

**FORM A**

**New York State Consultant Services  
Contractor's Planned Employment**

From Contract Start Date Through the End of the Contract Term

State Agency Name: Office of Mental Health

State Agency Department ID: 3650000

Agency Business Unit: OMH01

Contractor Name: JSM Consulting Inc

Contract Number: PH68612

Contract Start Date: 07/10/2023

Contract End Date: 01/09/2026

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours to be Worked</b>	<b>Amount Payable Under the Contract</b>
15-1254.00	1.00	5,200.00	\$335,452.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	5,200.00	\$335,452.00
<b>Grand Total</b>	<b>1.00</b>	<b>5,200.00</b>	<b>\$335,452.00</b>

Name of person who prepared this report: Jeffrey Petersen

Title: Contract Management Specialist

Phone #: 518-549-1525

Preparer's Signature: Jeffrey Petersen

Date Prepared: 06/28/2023

(Use additional pages, if necessary)

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