

**ATTACHMENT H  
Consultant Disclosure Form A**

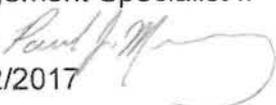
**OSC Use Only:**  
Reporting Code:  
Category Code:  
Date Contract Approved:

**FORM A**

**State Consultant Services - Contractor's Planned Employment  
From Contract Start Date Through The End Of The Contract Term**

State Agency Name: NYS OMH Agency Code: 3650000  
Contractor Name: Shiloh Consulting LLC Contract Number: C100408  
Contract Start Date: 5/1/2017 Contract End Date: 3/31/2018

Employment Category <sup>1</sup>	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
21-1014.00 – Mental Health Counselors	3	2,000	\$99,000
Total this page	0	0	
Grand Total			\$99,000

Name of person who prepared this report: Paul J. Murray  
Title: Contract Management Specialist II Phone #: 518-549-5219  
Preparer's Signature:   
Date Prepared: 12/12/2017  
(Use additional pages, if necessary)

1. (Note: Access the O\*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at [online.onetcenter.org](http://online.onetcenter.org) to find a list of occupations.)