

**ATTACHMENT H
Consultant Disclosure Form A**

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

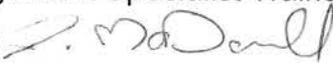
FORM A

<p>State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term</p>

State Agency Name: NYS Office of Mental Health	Agency Code: 3650000
Contractor Name: Staff Care, Inc. - J. Schubmehl	Contract Number: OMH01- CM100199AC-3650433
Contract Start Date: 3/1/2020	Contract End Date: 9/4/2023

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1066-00	1	7280	\$1,638,000.00
Total this page	0	0	
Grand Total	1	7,280	\$1,638,000.00

Name of person who prepared this report: Jessica McDonald
 Title: Contract Management Specialist Trainee Phone #: (518) 549-5224

Preparer's Signature: 

Date Prepared: 2/10/2020

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 to find a list of occupations.)