## 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: OMHAgency Code: 5000Contractor Name: ShilohContract Number:<br/>C100591AAContract Start Date: 01/01/2022Contract End Date: 12/31/2026

| Employment Category <sup>1</sup> | Number of<br>Employees | Number of hours to<br>be worked | Amount Payable<br>Under the Contract |
|----------------------------------|------------------------|---------------------------------|--------------------------------------|
| 21-1014.00                       | 6                      | 12000                           | 908,272.60                           |
|                                  |                        |                                 |                                      |
|                                  |                        |                                 |                                      |
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|                                  |                        |                                 |                                      |
| Total this page                  | 6                      | 0                               |                                      |
| Grand Total                      | 6                      | 12000                           | 908,272.60                           |

Name of person who prepared this report: Jason Silvano

Title: Contract Management Specialist 2

Phone #:

Preparer's Signature: Jason Silvano

Date Prepared: 11/22/2021

(Use additional pages, if necessary)

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