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 Office of Mental Health — Agency Code: 3650000
Contractor Name: Ameresco INC — Contract Number: C102801
Contract Start Date: 1/1/2026 — Contract End Date: 12/31/2026

Employment Category[1]	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
11-9041.00	2	1,628	$285,535.73
13-2031.00	1	1,640	$154,399.44
17-2071.00	1	1,704	$279,009.18
17-2141.00	8	9,869	$1,209,180.62
Total this page	12	14,841	$1,928,124.97
Grand Total	12	14,841	$1,928,124.97

Name of person who prepared this report: Daniel Gormley
Title: Program Manager — Phone #: 508-598-4528
Preparer's Signature: Daniel Gormley
Date Prepared: 2/2/2026

(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** to find a list of occupations.)