

ATTACHMENT H

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: Office of Mental Health	Agency Code: OMH01
Contractor Name: CROWN HEIGHTS FOOTCARE, P.C	Contract Number: C202721
Contract Start Date: October 1, 2025	Contract End Date: September 30, 2030

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
PODIATRY SERVICES	1	600	\$75,600.00
Total this page	0	0	
Grand Total	1	600	\$75,600.00

Name of person who prepared this report:

Title: *PRESIDENT*

Phone #: *718 604 8370*

Preparer's Signature: *[Handwritten Signature]*

Date Prepared: *9/5/25*

(Use additional pages, if necessary)

Page of

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.)