## 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: NYS OWH Contractor Name: HAROLD Mendelson WD	Agency Code: 50000	
SECONDAL PROPERTY OF THE PROPE	Contract Number: OluH of-	C009096
Contract, Start Date: [Contract Start 9/1/16	8/31/2021	3650000
Date] 3/6/16 Contract End Da	ate: [Contract End Date]	awaran a

Employment Category <sup>1</sup>	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Employment Category <sup>1</sup>	(	7,800	01,092,000
		(5415)	(5415)
			×
To The terror Street			
Total this page	0	0	
Grand Total	/	7800	1,092,000

٨	lame o	of	person	who	prepared	this	report:

Title: Harved Wendelfon and Preparer's Signature: (faced Mendelfon as)

Phone #: 9146720897

Date Prepared: 3/4/20/6

(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.)