ATTACHMENT H Consultant Disclosure Form A



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Reporting Code: (U6

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

Contractor Name: Jackson & Coker - A. Yunai, A. Kataria

Agency Code: 3650000 Contract Number: OMH01-

CM100202-3650547

Contract Start Date: 12/1/2017

Contract End Date: 9/4/2023

606

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1066-00	1	5520	1,400,217.00
			(x
11.00			
8		NAME OF THE PERSON OF THE PERS	*
Total this page	(0	
Grand Total		5,520	\$1,400,217.00

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee

Preparer's Signature:

IJ

Date Prepared: 3/26/2018

(Use additional pages, if necessary)

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Phone #: (518) 549-5224

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.)