ATTACHMENT H Consultant Disclosure Form A

OMHOI-CMIODZOSAD-J65043]

| OSC Use Only: | |
|------------------------|--|
| Reporting Code: CUG | |
| 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: LocumTenens.com LLC - M. Loubeau Agency Code: 3650000 Contract Number: OMH01-CM100205AB-3650431

Contract Start Date: 2/1/2018

Contract End Date: 9/4/2023

| Employment Category ¹ | Number of Employees | Number of hours to be worked | Amount Payable Under the Contract |
|----------------------------------|------------------------|------------------------------|--------------------------------------|
| 29-1066-00 | 1 | 11520 | \$2,845,266.67 |
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| Total this page | 0 | 0 | |
| Grand Total | 1 | 11,520 | \$2,845,266.67 |

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee

Phone #: (518) 549-5224

Preparer's Signature:

Date Prepared: 2/23/2018

(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.)