## ATTACHMENT H Consultant Disclosure Form A

OMHOI-CMIOOZOSAC	- 3650L	120
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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 - F. Hayden

Agency Code: 3650000 Contract Number: OMH01-CM100205AC-3650420

Contract Start Date: 2/1/2018 Contract End Date: 9/4/2023

Employment Category <sup>1</sup>	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1066-00	11	10720	\$2,729,133.33
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Total this page		0	
Grand Total		1 10,720	\$2,729,133.33

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee

Preparer's Signature . Tal

Date Prepared: 3/15/2018

(Use additional pages, if necessary)

Phone #: (518) 549-5224

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<sup>1. (</sup>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.)