ATTACHMENT H Consultant Disclosure Form A

OMHOI-CM100205AE-3650420

OSC Use Only:		
Reporting Code:	(UG
		-

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 - N. Goel

Agency Code: 3650000 Contract Number: OMH01-CM100205AE-3650420

Contract Start Date: 2/1/2018

Contract End Date: 9/4/2023

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Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1066-00	1	8576	\$2,304,085.33
Total this page	0	0	
Grand Total	1	8,576	\$2,304,085.33

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee

Phone #: (518) 549-5224

Date Prepared: 3/19/2018

(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.)