## ATTACHMENT H Consultant Disclosure Form A

OSC Use Only:	
Reporting Code:	
Category Code: CU6	
Data Contract Approved:	

FORM A OMHOI-CM 100199AA- 3650587

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: Staff Care, Inc. - C. Litkei

Agency Code: 3650000 Contract Number: OMH01-

CM100199AA-3650587

Contract Start Date: 6/1/2018

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	1	5166	\$1,152,879.00
	3		
Total this page	0	0	
Grand Total	1	5,166	\$1,152,879.00

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee

Phone #: (518) 549-5224

Preparer's Signature . Od all

Date Prepared: 5/10/2018

(Use additional pages, if necessary)

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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.)