ATTACHMENT H Consultant Disclosure Form A

OSC Use Only:
Reporting Code:
Category Code: CVG
Date Contract Approved:

FORM A OMHOI - CM1001994B- 3650547

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. - I. Gurvits Agency Code: 3650000 Contract Number: OMH01-CM100199AB-3650547

Contract Start Date: 6/7/2018

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	10080	\$2,380,560.00
Total this page	0	0	
Grand Total	1	10,080	\$2,380,560.00

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee Preparer's Signature:

Phone #: (518) 549-5224

Date Prepared: 5/4/2018

(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.)