ATTACHMENT H Consultant Disclosure Form A

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: Jackson & Coker - A. Sanchez

Agency Code: 3650000 Contract Number: OMH01-CM100202AC-3650587

Contract Start Date: 3/25/2019

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	9360	\$2,106,000.00
	-		
Total this page	C	0	
Grand Total	1	9,360	\$2,106,000.00

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee

Phone #: (518) 549-5224

Preparer's Signature:

Date Prepared: 2/26/2019

(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.)