## ATTACHMENT H Consultant Disclosure Form A

OSC Use Only: Reporting Code:

Category Code:

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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 - J. Savino

Agency Code: 3650000 Contract Number: OMH01-CM100205AD-3650367

Contract Start Date: 2/6/2020

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	7453	\$2,124,200.00
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Total this page	0	0	
Grand Total	1	7,453	\$2,124,200.00

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist, Trainee

Phone #: (518) 549-5224

Preparer's Signature: Date Prepared: 1/14/2020

(Use additional pages, if necessary)

Page 1 of 1

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.)