ATTACHMENT H Consultant Disclosure Form A

OSC Use Only:		
Reporting Code:		
Category Code: (U6		
Date Contract Approved:		

FORM A OMHOI - CM 100199 AA - 3650270

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. Jones-Brown

Agency Code: 3650000 Contract Number: OMH01-

CM100199AA-3650270

Contract Start Date: 4/12/2018

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	10400	\$2,478,666.67
Total this page	0	0	
Grand Total		10,400	\$2,478,666.6

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Trainee

Phone #: 518-549-5224

Preparer's Signature:

Date Prepared: 3/14/1%

(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 online.onetcenter.org to find a list of occupations.)