

**ATTACHMENT H
Consultant Disclosure Form A**

OSC Use Only: Reporting Code: 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: Office of Mental Health Contractor Name: Catherine Diana Contract Start Date: 1/1/2022	Agency Code: OMH01 Contract Number: S100591AB Contract End Date: 12/31/2026
---	--

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
21-1023.00	3	19500 hrs	821300
11-3011-00	1	10400 hrs	208000
Total this page	0	0	
Grand Total	4	29900	\$1,029,300.00

Name of person who prepared this report: Jason Silvano
 Title: Contract Management Specialist Phone #: 518-549-5295
 Preparer's Signature: *Jason Silvano*
 Date Prepared: 01/18/2022
 (Use additional pages, if necessary)

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.)