

**ATTACHMENT H  
Consultant Disclosure Form A**

<b>OSC Use Only:</b> Reporting Code: Category Code: Date Contract Approved:
--

**FORM A**

<b>State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term</b>
--

State Agency Name: Office of Mental Health Contractor Name: Mid Erie Counseling Contract Start Date: 1/1/18	Agency Code: OMH01 Contract Number: C100436 Contract End Date: 04/30/19
---	---

Employment Category <sup>1</sup>	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
21-014.00	16	31200	175,000.00
Total this page	0	0	
Grand Total	16	31,200	\$175,000.00

Name of person who prepared this report: Jason Silvano  
 Title: Contract management Specialist 1  
 Preparer's Signature: *Jason Silvano*  
 Date Prepared: 03/29/2018  
 Phone #: 518-549-5295  
 (Use additional pages, if necessary) Page of

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](http://online.onetcenter.org) to find a list of occupations.)