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: NYS Office of Mental Health Contractor Name: LocumTenens.com - D. Gangure

Agency Code: 3650000 Contract Number: OMH01-CM100205AG-3650270

Contract Start Date: 7/6/2020 Contract End Date: 3/31/2021

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1066-00	1	1560	\$577,200.00
Total this page	0	0	
		1,560	
Grand Total	1		\$577,200.00

Name of person who prepared this report: Jessicca McDonald

Title: Contract Management Specialist Phone #: (518) 549-5224

Preparer's Signature:

Date Prepared: 6/23/2020

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