FundingState Agency:

□ ОМН

NEW YORK STATE

CONSOLIDATED FISCAL REPORT

For the Period: January 1, 2009 to December 31, 2009

SCHEDULE DMH-3 AID TO LOCALITIES AND DIRECT CONTRACTS PROGRAM FUNDING SOURCE SUMMARY

Page ____

	NCY NAME: PREPARED BY:				TELEPHONE: ()			
AGENCY CODE:	Please	se check the box if	the preparer chang	ed from the previou	us submission.			
	h			ΡΙ ΕΔSE		ATED CLAIM	FINAL CLAIM	
)	-	-					
Line COLUMN NUMBER	Cost						TOTAL	
No. ITEM DESCRIPTION	Codes		-					
1 Accounting Method	00073							
2 Program Type								
3 Program Code (Program Code Index)		()	()	()) ()	()		
4 Total Persons Served/Month								
5 Total Units of Service	00999							
6 Gross Cost/Unit of Service	70999							
7 Net Cost/Unit of Service	71999							
8 Please Check If Participant Specific Methodology Is Used (OMRDI								
9 A. Funding Source Code (Local Assistance) Index (OMH/OAS		001	001	001	001	001		
10 Number Persons Served/Month	00260							
11 Number Units of Service	00250							
12 Total Adjusted Expenses	50999							
13 Less Applied Net Revenue	61999							
14 Net Operating Costs	62999							
15 State Contract Number / LGU Contract Number *	00201							
16 B. Funding Source Code Index (OMH/OAS	AS only)							
17 Number Persons Served/Month	00261							
18 Number Units of Service	00251							
19 Total Adjusted Expenses	50998							
20 Less Applied Net Revenue	61998							
21 Net Operating Costs	62998							
22 State Contract Number / LGU Contract Number *	00202							
23 C. Funding Source Code Index (OMH/OAS								
24 Number Persons Served/Month	00262							
25 Number Units of Service	00252							
26 Total Adjusted Expenses	50997					ļļ		
27 Less Applied Net Revenue	61997							
28 Net Operating Costs	62997					ļ		
29 State Contract Number / LGU Contract Number *	00203							
D. Totals From A-C Above								
30 Total Adjusted Expenses	51999							
31 Less Net Revenue	63999					ļ]		
32 Net Operating Costs	52999					1 1		

* For direct contracts, enter the State Contract Number. For local contracts, enter the local Contract Number, if applicable.