

OMH
 OMRDD
 OASAS

NEW YORK STATE
CONSOLIDATED BUDGET REPORT
 For the Period: 07/01/09 - 06/30/10

B U D G E T

AGENCY NAME: _____	PREPARED BY: _____	TELEPHONE: () _____
AGENCY CODE: _____	() Please check the box if the preparer changed from the prior reporting period.	
COUNTY NAME & CODE: _____	USE WHOLE DOLLARS.	

B U D G E T

Line No.	COLUMN NUMBER ITEM DESCRIPTION	Cost Codes																TOTAL	
1	Accounting Method																		
2	Program Type	00073																	
3	Program Code (Program Code Index)	00013																	
4	Total Persons Served/Month	00220																	
5	Total Units of Service	00999																	
6	Gross Cost/Unit of Service	70999																	
7	Net Cost/Unit of Service	71999																	
8	Please Check:																		
9	A. Funding Source Index (OMH/OASAS only)																		
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	Contract Number *	00201																	
16	B. Funding Source Index (OMH/OASAS 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	Contract Number *	00202																	
23	C. Funding Source Index (OMH/OASAS only)																		
24	Number Persons Served/Month	00262																	
25	Number Units of Service	00252																	
26	Total Adjusted Expenses	50997																	
27	Less Applied Net Revenue	61997																	
28	Net Operating Costs	62997																	
29	Contract Number *	00203																	
	D. Totals From A-C Above																		
30	Total Adjusted Expenses	51999																	
31	Less Net Revenue	63999																	
32	Net Operating Costs	52999																	

* For direct contracts, enter the State contract number. For local contracts, enter the local contract number, if applicable.