

Please Check State Agency:  
 OMH     SED  
 OMRDD  
 OASAS

**NEW YORK STATE**  
**CONSOLIDATED FISCAL REPORT**  
*For the Period: July 1, 2006 to June 30, 2007*

**SCHEDULE CFR-4**  
PERSONAL  
SERVICES

Page \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_  
 AGENCY CODE: \_\_\_\_\_  
 SCHOOL CODE: (SED ONLY) \_\_\_\_\_

REPORT FTE'S TO 3 DECIMAL PLACES.  
 USE WHOLE DOLLARS.  
 USE WHOLE HOURS.

Provide all applicable information. Refer to Appendix R for Position Title Codes and Definitions. Check the standard work week or provide the number of hours in the "other" column.

Check the staffing category following the description on the line below to which each page applies:

PROGRAM/SITE-PROGRAM ADMIN./LGU ADMIN. (Position Title Codes 100-599 and 700-799 series) \_\_\_\_\_ AGENCY ADMINISTRATION (Position Title Codes 600-699 series) \_\_\_\_\_\*

Position Title Code Appendix R	COLUMN NUMBER															
	PROGRAM CODE ** (PROGRAM CODE INDEX)		( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )			
	PROGRAM/SITE IDENTIFICATION NUMBER **															
PROGRAM/SITE NAME																
PROGRAM/SITE ADDRESS (Line One)																
PROGRAM/SITE ADDRESS (Line Two)																
COUNTY CODE																
Position Title	Standard Work Week				Hours Paid	FTE	Amount Paid	Hours Paid	FTE	Amount Paid	Hours Paid	FTE	Amount Paid	Hours Paid	FTE	Amount Paid
	35	37.5	40	Other												
Total "Hours Paid", "FTE" and "Amount Paid" for Positions.																

\* Report Agency Administration in one column on a separate page.  
 \*\* For OASAS, program code = service level and program/site = PRU level.  
 Transfer totals to Schedule CFR-1 Line 16 (Program/Site, Program Administration & LGU Administration), or Schedule CFR-3 Line 1 (Agency Administration).  
 Note: FTE's do not get transferred. Keep program columns consistent throughout the CFR document.