

Please Check State Agency:

- OMRDD
- OASAS

**NEW YORK STATE**  
**CONSOLIDATED FISCAL REPORT**  
*For the Period: January 1, 2007 to December 31, 2007*

**SCHEDULE DMH-2A**  
**AID TO LOCALITIES/  
 DIRECT CONTRACT  
 EQUIPMENT SUMMARY**

Page \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_  
 AGENCY CODE: \_\_\_\_\_

Line No.	COLUMN NUMBER ITEM DESCRIPTION				
1	PROGRAM TYPE				
2	PROGRAM CODE (Program Code Index)	( )	( )	( )	( )
	<b>EQUIPMENT &gt; \$2,500 (LIST INDIVIDUALLY)</b>				
3					
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22					
23	EQUIPMENT < \$2,500 EACH (AGGREGATE TOTAL)				
24	TOTAL EQUIPMENT				

Note: Do not include any expensed equipment reported in the OTPS line on this schedule.