

FundingState Agency:  
 OMH  
 OPWDD  
 OASAS

**NEW YORK STATE**  
**CONSOLIDATED FISCAL REPORT**  
*For the Period: July 1, 2018 to June 30, 2019*

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

AGENCY NAME: _____	PREPARED BY: _____	TELEPHONE: (____) _____
AGENCY CODE: _____	<input type="checkbox"/> Please check the box if the preparer changed from the previous submission.	
COUNTY NAME & CODE: _____ (____)	PLEASE CHECK: FINAL CLAIM _____	

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/Year	00220															
5	Total Units of Service	00999															
6	Gross Cost/Unit of Service	70999															
7	Net Cost/Unit of Service	71999															
8	Reserved for Future Use	72999															
9	A. Funding Source Code (Local Assistance)	Index (OMH/OASAS only)	001		001			001			001				001		
10	Number Persons Served/Year	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/OASAS only)															
17	Number Persons Served/Year	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/OASAS only)															
24	Number Persons Served/Year	00262															
25	Number Units of Service	00252															
26	Total Adjusted Expenses	50997															
27	Less Applied Net Revenue	61997															
28	Net Operating Costs	62997															
29	State Contract Number / LGU 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.