

_____ OMH _____ SED
_____ OMRDD
_____ OASAS

SCHEDULE CFR-4
PERSONAL
SERVICES

AGENCY NAME: _____
AGENCY CODE: _____
SCHOOL CODE: (SED ONLY) _____

**REPORT FTE'S TO 2 DECIMAL PLACES.
USE WHOLE DOLLARS.
USE WHOLE HOURS.**

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

[illegible]

Note: FTE's do not get transferred. Keep program columns consistent throughout the CFR document.

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