

**NEW YORK STATE**  
**CONSOLIDATED FISCAL REPORT**  
 For the Period: July 1, 2000 to June 30, 2001

**SCHEDULE OMH-3**  
**CLIENT**  
**INFORMATION**

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

Line No.	COLUMN NUMBER				
	PROGRAM CODE				
	PROGRAM TYPE				
	PROG/SITE ID.#				
	<b>PERSONS SERVED DURING THE YEAR</b>				
1	Persons on Rolls, Beginning of Year				
2	New Persons added to Rolls				
3	Persons Removed from Rolls				
4	Persons on Rolls, End of Year				