

**NEW YORK STATE**  
**CONSOLIDATED FISCAL REPORT**  
*For the Period: January 1, 2018 to December 31, 2018*

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

Page \_\_\_\_\_

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

Line No.	COLUMN NUMBER				
	PROGRAM CODE (PROGRAM CODE INDEX)	( )	( )	( )	( )
	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				