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NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES

PROGRAM EXPENDITURE REPORT - M&O AND FACILITY REPAIRS

AGENCY/MUNICIPALITY		PROGRAM PERIOD FROM TO						
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CHECK NUMBER	CHECK DATE	PAYEE NAME	DESCRIPTION	INVOICE DATE OR PERIOD COVERED FOR SERVICES OR TRAVEL	GROSS AMOUNT OF CHECK	AMOUNT CHARGEABLE TO OCFS		
	ACT AGENCIES			TOTALS				

SUBMIT ORIGINAL