

Sample Agency
Statement of Revenue and Expenditures
All Funds
01/06 - 06/06

	001 Administration	002 Comprehensive Case Management	003 Continuing Day Treatment	004 Clinic	005 Community Residence	006 Transportation
<u>Revenue</u>						
Agency Funded	0.00	0.00	0.00	53,300.00	22,880.00	0.00
Aid Grant	0.00	4,800.00	0.00	0.00	1,200.00	0.00
Ford Foundation	0.00	0.00	0.00	0.00	0.00	0.00
Office of Mental Health	0.00	0.00	0.00	5,880.00	12,933.24	0.00
OMRDD	0.00	117.36	0.00	0.00	0.00	0.00
Total Revenue	<u>0.00</u>	<u>4,917.36</u>	<u>0.00</u>	<u>59,180.00</u>	<u>37,013.24</u>	<u>0.00</u>
<u>Expenses</u>						
Agency Funded	47,997.59	945.25	0.00	0.00	2,094.50	0.00
Aid Grant	0.00	6,662.88	0.00	0.00	6,327.80	0.00
Ford Foundation	0.00	0.00	7,897.50	0.00	0.00	0.00
Office of Mental Health	0.00	0.00	0.00	25,165.80	1,525.94	800.00
OMRDD	0.00	0.00	0.00	0.00	0.00	0.00
Total Expenses	<u>47,997.59</u>	<u>7,608.13</u>	<u>7,897.50</u>	<u>25,165.80</u>	<u>9,948.24</u>	<u>800.00</u>
Excess or (Deficiency) of Revenue Over Expenses	<u>(47,997.59)</u>	<u>(2,690.77)</u>	<u>(7,897.50)</u>	<u>34,014.20</u>	<u>27,065.00</u>	<u>(800.00)</u>

007 Workshop	008 Waiver Res Hab	Total
48,900.00	0.00	125,080.00
0.00	1,200.00	7,200.00
0.00	10,000.00	10,000.00
0.00	715.44	19,528.68
<u>(245.64)</u>	<u>0.00</u>	<u>(128.28)</u>
<u>48,654.36</u>	<u>11,915.44</u>	<u>161,680.40</u>
0.00	112.00	51,149.34
0.00	1,637.94	14,628.62
0.00	3,948.75	11,846.25
0.00	0.00	27,491.74
<u>46,056.00</u>	<u>0.00</u>	<u>46,056.00</u>
<u>46,056.00</u>	<u>5,698.69</u>	<u>151,171.95</u>
<u><u>2,598.36</u></u>	<u><u>6,216.75</u></u>	<u><u>10,508.45</u></u>