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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

CHECK NUMBER	CHECK DATE	PAYEE NAME	DESCRIPTION	INVOICE DATE OR PERIOD COVERED FOR SERVICES OR TRAVEL	GROSS AMOUNT OF CHECK	AMOUNT CHARGEABLE TO OCFS
FOR CONTRACT AGENCIES ONLY: REIMBURSEMENT CHECK NUMBER				TOTALS		