## Monthly Program Income Statement

For the month ending:

### REVENUE

- Substance Abuse Prevention and Treatment (SAPT)
- Other BH Professional
- Psychiatry
- Other (Net of Cost of Goods Sold)
- Professional & Outside
- Other
- Non-BH Administrative
- Other (Net of Cost of Goods Sold)

### EXPENSES

- Case Management
- Other Non-BH Administrative
- Psychiatric
- Other Non-BH Administrative
- Administrative
- Other (Net of Cost of Goods Sold)

### Net Income

- Total
- Total Other
- Non-BH Administrative
- Other Non-BH Administrative
- Non-BH Administrative

### NET DEPRECIATION

- Total
- Total Other
- Net Income

### CHANGES IN NET ASSET(S) INCOME

- Total
- Total Other
- Net Income

### Dot Line

- Total
- Total Other
- Net Income

### PROGRAM-SPECIFIC CAPITAL EXPENDITURES

- Total
- Total Other
- Non-Operating

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**Notes:**

- Provider Manual Section 10.1 - Financial Management and Reporting - PM Attachment 10.1.2 - Monthly Program Income Statement
- For the month ending: [Month Date]
- Source: [Provider Name]
- Revised: [Revision Date]

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**Form:**

- Form Name: [Form Name]
- Page 1 of 1

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**Source:**

- [Source Name]