

RECLASSIFICATIONS	PROVIDER CCN: _____	PERIOD: FROM _____ TO _____	WORKSHEET A-6
-------------------	------------------------	-----------------------------------	---------------

EXPLANATION OF RECLASSIFICATION(S)	CODE (1)	INCREASES				DECREASES				WKST. A-7 REF.
		COST CENTER	WKST. A LINE #	SALARY	OTHER	COST CENTER	WKST. A LINE #	SALARY	OTHER	
	1	2	3	4	5	6	7	8	9	10
1										1
2										2
3										3
4										4
5										5
6										6
7										7
8										8
9										9
10										10
11										11
12										12
13										13
14										14
15										15
16										16
17										17
18										18
19										19
20										20
21										21
22										22
23										23
24										24
25										25
26										26
27										27
28										28
29										29
30										30
31										31
32										32
33										33
34										34
35										35
500	Total reclassifications (sum of columns 4 and 5 must equal sum of columns 8 and 9)									500

(1) A letter (A, B, etc.) must be entered on each line to identify each reclassification entry.
Transfer the amounts in columns 4, 5, 8, and 9 to Worksheet A, column 4, lines as appropriate.