

Date	Driver Name	*Type of Service Provided	# of Individuals Served	Initials of Individuals Served	Additional Trip Notes

Total Number of Service Encounters:

Total Number of Unduplicated Individuals Served:

***TYPES OF SERVICES PROVIDED:**

Mobile Crisis Response

Deliver of home-based beha , BH Services

Delivery of school-based behavioral health services

Delivery of other community-based behavioral health services, including MAT

Transportation to outpatient behavioral health appointment, including MAT

Transportation to or from inpatient behavioral health services

Delivery of or transportation to cultural wellness activities and other prevention and early intervention programming

Wellness Check

Other