CE Discovery Activity Log/Notes

Individual's Name: _____ Contractor Name: _____

Service Begin Date: _____ DRS Counselor: _____

Date	Describe Activity, Location and Others Involved in Activity	Activity Hours

Service End Date: _____ Total Hours Billed: **0.00** Total Amount Billed: **$0.00**

EC Name: _____ Date: _____

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1147 Robinson Street,
Ocean Springs, MS 39564-3841
Phone: (228) 208-45 FAX: (228) 205-4597
www.marcgold.com

CE Discovery Activity Log/Notes

Discovery Observation and Activity Notes:

EC Name: _____ Date: _____

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