

# SVdP HELP LINE RECORDING SHEET

revised 3/16/2007 jo/pr/rs

DATE:	
CLIENT NAME:	
ADDRESS:	
<i>(Have Client spell street name and give ST, AVE, RD etc)</i>	
APT. COMPLEX & # OR MOBILE HOME PARK:	
CITY:	ZIP: 46
TELEPHONE #:	CALLER I.D.? YES NO
Tell client our volunteer will block their number when calling, so phone must be answered to receive help.	
# OF ADULTS: ____	# OF CHILDREN: ____
BEST TIME TO REACH:	
<b>FOOD</b> _____	
<b>MONEY \$</b> _____ for rent, gas or elec Client must allow up to 5 days for a volunteer's call.	
<b>WAREHOUSE</b> _____	
- tell client to allow up to 3 1/2 weeks for a volunteer to contact them about their warehouse needs.	
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