

		Office Address and Telephone No.
Individual's Name and Address		
		
·	endent Children Program Record Review Follo	
This letter is to inform you that during the annual reass with Written Narrative/Written Summary, was not prese		
Texas Administrative Code (TAC) §51.219 requires the residence the most recent seven days of service delive upon request. For the Consumer Directed Services (CI Written Summary, meets the requirement stated in (TA)	ery documentation in the DS) option , Form 1745 , \$	in-home record and make it available to DADS
DADS will follow up regarding compliance with the above ax or send Form 1745 to the case manager to confirm collow up request at the six month monitoring contact m	n the form has been plac	ed in the in-home record. Failure to meet this
Signature – Case Manager		Date

Case Manager