**North Carolina Department of Health and Human Services**

**Adult Services - Contact/Activity Log**

**Client\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Case #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- |
| **Date** | **Contact or Activity** | **Results or Contact/Activity** |
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DHHS-AS-6222 (Rev.03/2024)

Page 1 of 1