



VOID / VOID AND REPLACE MEMO

Attach ledger for indicated services

Date:

To: Leticia Plancarte-Garcia, Director
 Victor Manriquez, Behavioral Health Manager
 Adolfo Estrada, Behavioral Health Manager
 Ryan Taylor, Administrative Analyst

From:

CC:

Service To be Voided or Voided and Replace							
Type of Request (V / VR)	BC - Episode	Client's Name	Program	Pracitioner Name	Service Date	Service Code	Service Duration
If the service above is to be replaced, please enter the information below							
Edited Service Information							
Service To be Voided or Voided and Replace							
Type of Request (V / VR)	BC - Episode	Client's Name	Program	Pracitioner Name	Service Date	Service Code	Service Duration
If the service above is to be replaced, please enter the information below							
Edited Service Information							

Approved by _____