

**Washita Valley CAC**  
 **Early Head Start**     **Head Start**

**In-Kind Record for Disabilities and Mental Health Services**

**Washita Valley CAC Head Start/Early Head Start Center:** \_\_\_\_\_

**Month:** \_\_\_\_\_                      **Year:** \_\_\_\_\_

**Agency Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Services Performed:**

**Screenings** \_\_\_\_\_ **valued at** \_\_\_\_\_ **Total** \_\_\_\_\_

**Evaluations** \_\_\_\_\_ **valued at** \_\_\_\_\_ **Total** \_\_\_\_\_

**Treatments** \_\_\_\_\_ **valued at** \_\_\_\_\_ **Total** \_\_\_\_\_

**Mileage** \_\_\_\_\_ **valued at** \_\_\_\_\_ **Total** \_\_\_\_\_

**Training** \_\_\_\_\_ **valued at** \_\_\_\_\_ **Total** \_\_\_\_\_

**Observations** \_\_\_\_\_ **valued at** \_\_\_\_\_ **Total** \_\_\_\_\_

**Total Amount of In-Kind Non-Federal Share: \$** \_\_\_\_\_

**Signature:** \_\_\_\_\_                      **Date:** \_\_\_\_\_

**(Complete Top Area Only)**

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**Total Amount \$** \_\_\_\_\_ **In-Kind Non-Federal Share**

**Total In-Kind value approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_