

WARREN COUNTY BOARD OF DEVELOPMENTAL DISABILITIES

FAMILY SUPPORT  
410 S. EAST STREET  
LEBANON, OHIO 45036  
Phone 513-228-6432

Email: Katrina.Steele@warrencountydd.org

Voucher for Services Request  
**Need 7 to 10 days to process**

**THIS IS TO BE FILLED OUT ONLY IF A VERIFICATION OF NEED FORM FOR THIS SERVICE IS ALREADY ON FILE.**

**ONCE REQUEST IS APPROVED YOU WILL RECEIVE A VOUCHER EITHER BY MAIL OR EMAIL. NO EXPENSE WILL BE HONORED WITHOUT PRIOR APPROVAL.**

SERVICES REQUESTED BY: \_\_\_\_\_

INDIVIDUAL ENROLLED: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

IF NEW MAILING ADDRESS PLEASE CHECK THIS BOX [ ]

PHONE NUMBER \_\_\_\_\_

EMAIL: \_\_\_\_\_

REQUESTED SERVICE \_\_\_\_\_

If this is for Respite or Camp please fill out a Respite or Camp Request

Total number of vouchers \_\_\_\_\_ Weekly or Monthly cost per voucher \_\_\_\_\_

Date range needed: \_\_\_\_\_

This amount may not be approved depending on available funds or cap limits

WHO IS TO BE PAID \_\_\_\_\_

**If we are paying you a completed W9 form must be on file**