				OMB No.: 0915-	0285. E	Expiration Date: 08/31/2010	
DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration FORM 5B: SERVICE SITES				FOR HRSA USE ONLY			
				Application Tracking Number		Grant Number	
			E SITES				
Sit	e Information						
Na	me of Service Site		9	Service Site Type			
Location Type				ocation Setting			
Se	mber of Contract rvice Delivery Locations ucher Screening Only)			Jumber of Intermittent Sites (Intermittent Only)			
We	eb URL			·			
Site Operated by [_] Appl			icant [_] Contractor [_] Sub-Recipient				
If Site is operated by Sub-recipien			it or Contractor please prov	ide the organization information	belov	V:	
	Organization						
	Organization Name						
	Address (Physical)						
	Address (Mailing)						
	EIN						
	Comments						
Da	te Site was Opened			Date Site was Added to Scope			
Site Operational By				Medicare Billing Number			
Medicaid Billing Number				Medicaid Pharmacy Billing Number			
Site Phone Number				Site Fax Number			
Site Physical Address				"			
Site Mailing Address (Including Mailstop Code, Division/Department Name, and Company)							
Administration Phone Number				Service Area Population		[_] Urban [_] Rural	
Service Area Zip codes							
Se	rvice Area Census Tracts	5					
Operational Schedule			[_] Full-Time [_] Part-Time	Calendar Schedule		[_] Year-Round [_] Seasonal	
Total Hours of Operation when Patients will be Served per Week				Months of Operation			

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0285. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.

(include extended hours)