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## WIPA Case Notes

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Beneficiary:

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Date of contact:

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Person contacted:

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Purpose of the contact:

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What work incentives, health care options, or other benefits did you discuss?

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List any referrals you made to other agencies:

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Notes and next steps:

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Person contacted:

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Purpose of the contact:

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Notes and next steps:

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Date	Item	Not Needed	In Process	Completed
	BSA			
	WIP			