REPORT LOG

		REFERRAL (R), UNREACHABLE (U), DENIED (D), LACK OF FUNDS (LoF), BILLS PAID (BP), VOUCHER (V)													
DATE	NAME	TIME	MILES (Home Visit)	# OF ADULTS	# OF CHILDREN	$ IN KIND	$ FOOD VOUCHER	RENT ASSISTANCE	UTILITIES	TRANSPORTATION	SVDP STORE VOUCHER	MEDICAL	CLOTHING	OTHERS	