



Date: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MR#: \_\_\_\_\_

Dear \_\_\_\_\_:

We would like to take this opportunity to THANK YOU for choosing Daymark Recovery Services for your Mental Health and/or Substance Use needs.

For us to continue to serve you, we require the following **items** to be brought in with you at your next appointment on \_\_\_\_\_.

- Photo ID       Social Security Card       Insurance Card (Humana, BCBS, etc.)
- Medicaid Card       Medicare Card
- Proof of Income-Bring any of the items below that you have as proof of income.
  - W2 Tax Return      Pay Stubs (if employed)      Disability Yearly Statement
  - Unemployment Benefit Statement      Child Support Award letter
- Other \_\_\_\_\_

If you do not bring these items in at your next appointment, you may be charged full fee for the services rendered on that date.

Please feel free to contact us if you have any questions or concerns regarding this letter.

Respectfully,

\_\_\_\_\_  
Center Director or Associate Center Director      Date

\_\_\_\_\_  
Financial Intake Staff      Date