

NEW YORK STATE  
OFFICE OF CHILDREN AND FAMILY SERVICES  
**SPECIAL NEEDS FUND**  
**INDIVIDUAL RESIDENT LOG**

RESIDENT'S NAME	ELIGIBILITY	DATE ADMITTED
	Check If Resident Receives <input type="checkbox"/> SSI <b>OR</b> <input type="checkbox"/> Safety Net	
		DATE DISCHARGED:

DATE	AMOUNT EXPENDED	PURPOSE	RESIDENT'S SIGNATURE OR INITIALS	DATE VOUCHER SUBMITTED	DATE PAYMENT RECEIVED

**Instructions:**

- 1) Maintain a separate log for each resident
- 2) When you spend money for a resident's clothing, transportation, recreation or cultural activity, enter the amount, date and purpose.
- 3) Have resident sign the log for each expense.
- 4) Indicate when you submitted the voucher to your local department of social services and when you received payment.