# Record of Respite Services
## North Carolina Lifespan Respite Program

### Instructions:
- Fill in the completed, signed form along with the completed and signed Respite Care Provider Agreement by mail or fax.
- Caregiver Program Coordinator, High Country Area Agency on Aging, 468 New Market Blvd., Boone, NC 28607, (f) 828-355-4152

**Lifespan Respite Vouchers are brought to you by the NC Lifespan Respite Project and administered by High Country Area Agency on Aging**

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**Complete the colored sections as follows:**

- **Caregiver** (green): Person receiving the respite voucher award letter and hiring the respite provider
- **Respite Provider** (yellow): Person or agency being hired by caregiver to work
- **Care Recipient** (pink): Person for whom the care is being provided

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<table>
<thead>
<tr>
<th>Date of Service</th>
<th>Respite Provider’s Signature</th>
<th>County in Which Respite Care Occurred</th>
<th>Time Care Began</th>
<th>Time Care Ended</th>
<th>Number of Hours of Respite Care Provided this Date</th>
<th>Total Amount Paid for Respite Care this Date</th>
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**TOTALS FOR THIS RECORD**

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**Signature of Caregiver/Legally Responsible Person:**

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**Approved for Reimbursement**

**NC Lifespan Respite Voucher Fiduciary Agent:**

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**Date:**

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**Date:**

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**Date:**

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