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## *North Carolina Infant-Toddler Program*

## *Accounting of Release/Disclosure and Record Access*

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| Child’s Name: |       | Date of Birth: |       |
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| To be used: [1] Whenever written client information is disclosed to another individual, provider, or agency, and |
|  [2] Whenever parents or others not otherwise authorized by the CDSA are given access to examine the client record. |

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| **Date** | **Description of Information****Released/Disclosed or Record Access****[Include Recipient, Method, and Purpose]** | **Signature** |
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