Attachment V - TC Client Management Spreadshet Blank

Client Last Name	Client First Name	SID / DOC #	SAMIS#	Cycle	Race	Drug of	2nd Drug of	Additional Addiction Problems? (i.e sex, gamgling, etc)	Current Date	Age	Status
					_						

Referral Date	Ineligible date	Active Date	Removal date	Removal Comment	# Client Days	Projected Release Date