



## APPENDIX B: IMMERSION PARTICIPANT FINANCIAL/VOUCHER SUPPORT

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Date of Visit	IMMERSION Site Location	Employee/Volunteer(s)
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### Participant Information

### Contact Info

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First Name	Last Name	State ID/DOC ID
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Street Address	City	State	Zip
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Phone Number	Email Address	Date of Birth
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## Financial Support

### Rent

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

### Rent Payable To

Immersion Participant     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Utilities

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

### Utilities Payable To

Immersion Participant     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Other Financial Support

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

### Other Financial Support Payable To:

Immersion Participant     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_



## Food and Merchandise Support

### Food

Immersion Participant       Other \_\_\_\_\_

Date \_\_\_\_\_      Check/Doc # \_\_\_\_\_      Amount \_\_\_\_\_

Provider \_\_\_\_\_      Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Clothing

Cash       Voucher       Gift Card       Check/MO       Other \_\_\_\_\_

Date \_\_\_\_\_      Check/Doc # \_\_\_\_\_      Amount \_\_\_\_\_

Provider \_\_\_\_\_      Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Housewares/Linens

Cash       Voucher       Gift Card       Check/MO       Other \_\_\_\_\_

Date \_\_\_\_\_      Check/Doc # \_\_\_\_\_      Amount \_\_\_\_\_

Provider \_\_\_\_\_      Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Phone

Cash       Voucher       Gift Card       Check/MO       Other \_\_\_\_\_

Date \_\_\_\_\_      Check/Doc # \_\_\_\_\_      Amount \_\_\_\_\_

Provider \_\_\_\_\_      Budget \_\_\_\_\_

Notes \_\_\_\_\_



### Hygiene Bag

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Backpack

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Other Food and Merchandise Support

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_



## Transportation Support

### Gasoline

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Bus Passes

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Bicycles

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_

### Other Transportation Support

Cash     Voucher     Gift Card     Check/MO     Other \_\_\_\_\_

Date \_\_\_\_\_    Check/Doc # \_\_\_\_\_    Amount \_\_\_\_\_

Provider \_\_\_\_\_    Budget \_\_\_\_\_

Notes \_\_\_\_\_