

Logan County Family & Children First Council

Request for Dispute Resolution

Person Requesting Services

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Role/Agency

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Phone

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Date of Disagreement

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*Specific Complaint*

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*Proposed Solution*

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*Attempts at Resolving Issue*

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Involved Agencies/Providers

Date Filed with Program Coordinator

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Return Completed Form to the FCFC Program Coordinator

1973 State Route 47 West  
Bellefontaine, OH 43311  
PHONE: 937.592.7287  
FAX: 937.592.7001