

COUNTY OF YOLO

Health and Human Services Agency

Mental Health Services Act (MHSA) 30-Day Public Comment Form

Public Comment Period—Friday June 19, 2020 through Monday July 20, 2020

Document Posted for Public Review and Comment:

MHSA Three-Year Program & Expenditure Plan FY 2020-2023

This document is posted on the Internet at:

http://www.yolocounty.org/mhsa

PERSONAL INFORMATION (optional)

Name:	
Agency/Organization:	
Phone Number:	_Email address:
Mailing address:	
What is your role in the Mental Health Community?	
Client Consumer	Mental Health Services Provider
Family Member	Law Enforcement/Criminal Justice Officer
Educator	Probation Officer
Social Services Provider	Other (Specify)
Please write	e vour comments below:

If you need more space for your response, please feel free to submit additional pages.

- Scan and Email this completed form to MHSA@yolocounty.org, Subject: MHSA Plan Draft for FY 2020-2023 Comments
- Mail this form to HHSA/MHSA, Attn: MHSA Coordinator, 25 N. Cottonwood St., Courier #16CH, Woodland, CA 95695.