

<b>GL Check Out Sticker</b> <i>(place on back of white copy of Referral Form)</i>	
<b>Date</b> <i>(yyyy/mm/dd)</i>	
<b>Family Rep</b> <i>(signature)</i>	
<b>Required for updating bed inventory</b>	
<input type="checkbox"/>	Update Sleeping Area Assignment Log by placing blank white label over previous bed assignment(s)
<input type="checkbox"/>	Dispose of/sanitize all bedding from cot(s)
<input type="checkbox"/>	Tag cot(s) for cleaning and arrange for cot(s) to be cleaned as per Group Lodging procedures
<input type="checkbox"/>	Arrange for replacement cots, if required
<input type="checkbox"/>	Place a red post it flag at the top left hand corner of the white copy of the Referral Form prior to refilling
<b>Comments</b>	
<b>ESS Responder Name</b> <i>(first name &amp; last name initial)</i>	20140501

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