

## **Applying for Health Coverage – Tracking Sheet**

## Things to remember

My county/tribal worker's name (or team):

My county/tribal worker's phone number/email:

My PMI:

## Tracking form

Use this form, or create your own, to keep track of who you contacted and when, and what you need to do to resolve an issue.

Who I contacted	When	What	Notes (extra details, including names, contact info, the letter I received, what I need to do)
Choose an item.	Click or tap to enter a date.	Choose an item.	

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