PPS 10370 January 2018

ANE	Unit
Cove	rsheet

State of Kansas Department for Children and Families Prevention and Protection Services- Adult Protective Services

TYPE or PRINT LEGIBLY

To: Abuse /N		Fax No:	78	35-296-67	795	
Date:						
From:						
DCF Service Center:						
Email Address:	Phone Number:					
Incident City & County:						
KIPS Investigation #:						
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Was Law Enforcement involved in the investigation?			N	0	Yes (complete below)	
Was Law Enforcement forwarded the finding?			N	0	Yes (complete below)	
Name of Law Enforcemen	t Officer:					
Law Enforcement Agency	:					
Police Report Number: If readily available						
Telephone Number:						
Finding referred to County/District Attorney:			No		Yes (complete below)	
Name of County/District A	Attorney:					
	1 1 1					

NUMBER OF PAGES (including cover sheet):

Adult report attachments

 PPS 10100 PPS 10110 PPS 10120 PPS 10300 A summary of finding from KIPS Notes PPS 10350 PPS 10250 Corrective Action Plan (if applicable) 	
PPS 10120PPS 10300A summary of finding from KIPS NotesPPS 10350	PPS 10100
PPS 10300 A summary of finding from KIPS Notes PPS 10350	PPS 10110
A summary of finding from KIPS Notes PPS 10350	PPS 10120
PPS 10350	PPS 10300
	A summary of finding from KIPS Notes
PPS 10250 Corrective Action Plan (if applicable)	PPS 10350
	PPS 10250 Corrective Action Plan (if applicable)

Information contained in the attached Adult Protective Services Intake document (PPS 10100) was provided by the individual making the report. The accuracy of the information has not been verified or confirmed by DCF.



Strong Families Make a Strong Kansas