

Delaware Health and Social Services

December 13, 2012

HSS-12-044

Delaware Peer Support Services

Meeting Attendance Sheet

****Please Be Sure to Provide a Business Card****

NAME	ORGANIZATION/ADDRESS	E-MAIL ADDRESS	PHONE NUMBER	MWBE
Allen Conover	Rick van Slyke Center	Allen @ RickvanSlykeCenter.org	302-691-7746	7/8
Michael Brody	Mental Hlth Assoc SE PA	mbrodyemhosp.org	267-407-3841 654-6833	
Jim Lafferty	Mental Health Assoc.	JLAFFERTY@MHAINDE.ORG	654-6833	
Dona Mesto	Mental Health Assoc.	dmesto@mhaide.org	302 442 0114	
Erma English-Pager	30 Dallas Rd New Castle DE 19720	emestopager@ octavia926@yahoo.com		

*** If your organization is certified as a Women or Minority Owned Business, please put a checkmark in the far right box, next to your phone number.***

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NAME	ORGANIZATION/ADDRESS	E-MAIL ADDRESS	PHONE NUMBER	MWBE
Ben Jackson	RVRC	BenJ@phase1entl.com	3022998242	<input checked="" type="checkbox"/>

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The Bell of Hope

**MENTAL
HEALTH
ASSOCIATION**
OF SOUTHEASTERN PENNSYLVANIA

Michael Brody, LSW

Director of Service Operations

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3841

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Rick Vanstory center(s) Inc.

Recovery based resource center(s).

WWW.RICKVANSTORYCENTERS.ORG

Allen Conover

Executive Director

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