

Administrative Office of Courts & Probation

P.O. Box 98910
Lincoln, NE 68509
Phone: (402) 471-3730

District 7

Agency Facility County: Antelope

Agency Name: County of Antelope-Antelope County Sheriff's Office

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
County of Antelope-Antelope County Sheriff's Office	1102 L Street Neligh, NEBRASKA 68756	Invoice - Law Enforcement Transportation			

Agency Name: Next Step Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Next Step Counseling, LLC Neligh Location	760 E Hwy 275 Neligh, NEBRASKA 68756	Adult Mental Health Outpatient Counseling (Individual)	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Adult Substance Use Evaluation	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Adult Substance Use Outpatient Treatment (Individual)	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Juvenile Substance Use Evaluation	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Frank, Abigail	4029295009	abigail@counselingnextstep.com

Agency Facility County: Cuming

Agency Name: Midtown Health Center, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midtown Health Center--West	303 Plaza Dr West Point, NEBRASKA	Adult Co-Occurring Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Mental Health			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Point	68787	Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: The Well

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Outpatient-West Point	130 Anna Stalp Avenue West Point, NEBRASKA 68788	Adult Co-Occurring Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
		Adult Mental Health Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			
		Juvenile Co-Occurring Evaluation			
		Juvenile Mental Health Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			

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Outpatient-West Point	130 Anna Stalp Avenue West Point, NEBRASKA 68788	Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Facility County: Knox

Agency Name: Next Step Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Next Step Counseling, LLC Creighton Location	712 Main Street Creighton, NEBRASKA 68729	Adult Mental Health Outpatient Counseling (Individual)	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Adult Substance Use Evaluation	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Adult Substance Use Outpatient Treatment (Individual)	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Juvenile Substance Use Evaluation	Frank, Abigail	4029295009	abigail@counselingnextstep.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Frank, Abigail	4029295009	abigail@counselingnextstep.com

Agency Name: Ponca Tribe of Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-	2523 Woodbine St Niobrara, NEBRASKA	Adult Mental Health Evaluation			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Niobrara	68760	Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum	Custer, Janet	4028511605	janetc@poncatribene.org
		Adult Substance Use Evaluation	Custer, Janet	4028511605	janetc@poncatribene.org
		Adult Substance Use Outpatient Treatment (Individual)	Custer, Janet	4028511605	janetc@poncatribene.org

Agency Facility County: Madison

Agency Name: AMH Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
AMH Counseling LLC	1004 W. Norfolk, Ave Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Walton, Robert	4028413791	walton.rob@outlook.com
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Walton, Robert	4028413791	walton.rob@outlook.com
		Adult Substance Use Addendum	Walton, Robert	4028413791	walton.rob@outlook.com
		Adult Substance Use Evaluation	Walton, Robert	4028413791	walton.rob@outlook.com
		Adult Substance Use Outpatient Treatment (Individual)	Walton, Robert	4028413791	walton.rob@outlook.com

Agency Name: Alicia Wagner Counseling LLC

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Tranquil Lotus Collaborative	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Mental Health Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Mental Health Outpatient Counseling (Group)			
		Adult Mental Health Outpatient Counseling (Individual)	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Addendum	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Group)			
		Adult Substance Use Outpatient Treatment (Individual)	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Co-Occurring Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Mental Health Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Addendum	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Substance Use Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Substance	Wagner,	4022567883	alicia@tranquillotuscollaborative.org

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Tranquil Lotus Collaborative	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Use Outpatient Treatment (Individual/Family)	Alicia		

Agency Name: Apex Therapy Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Apex Therapy Services, LLC	1306 Andrews Drive Norfolk, NEBRASKA 68701	Adult Psychological Evaluation	Hannappel, Mark	4028514026	mark@apextherapyservices.org
			Snitchler, Eric	4028514026	snitchler@apextherapyservices.org
		Juvenile Psychological Evaluation	Hannappel, Mark	4028514026	mark@apextherapyservices.org
			Snitchler, Eric	4028514026	snitchler@apextherapyservices.org
		Juvenciles Who Sexually Harm Risk Evaluation	Hannappel, Mark	4028514026	mark@apextherapyservices.org
			Snitchler, Eric	4028514026	snitchler@apextherapyservices.org

Agency Name: Associated Psychologists & Counselors, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associated Psychologists & Counselors, LLC	1306 N. 13th St. Suite 100 Norfolk, NEBRASKA 68701	Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Mental Health Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Mental Health Outpatient Counseling (Individual)	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Associated Psychologists & Counselors, LLC	1306 N. 13th St. Suite 100 Norfolk, NEBRASKA 68701	Adult Psychological Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Sex Offense-Specific Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Substance Use Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Adult Substance Use Outpatient Treatment (Individual)	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juvenile Mental Health Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juvenile Psychological Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org
		Juveniles Who Sexually Harm Risk Evaluation	Mitchell, David	4023718218	davidmitchell@apcnorfolk.org

Agency Name: Behavioral Health Specialists

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Behavioral Health Specialists	1900 Vicki Lane Norfolk, NEBRASKA 68701	Adult Co-Occurring Capable Short-Term Residential	Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
		Adult Co-Occurring Evaluation	Battle, Lisa	4023703140	lbattle@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
			Mulberry,	6057606988	jmulberry@4bhs.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Behavioral Health Specialists	1900 Vicki Lane Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Jessica		
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Battle, Lisa	4023703140	lbattle@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
			Mulberry, Jessica	6057606988	jmulberry@4bhs.org
		Adult Mental Health Outpatient Counseling (Group)	Battle, Lisa	4023703140	lbattle@4bhs.org
			Korth, Brady	4023703140	bkorth@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
		Adult Mental Health Outpatient Counseling (Individual)	Battle, Lisa	4023703140	lbattle@4bhs.org
			Korth, Brady	4023703140	bkorth@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
		Adult Psychological Evaluation			
		Adult Substance Use Addendum	Battle, Lisa	4023703140	lbattle@4bhs.org
			Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Korth, Brady	4023703140	bkorth@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
			Mulberry, Jessica	6057606988	jmulberry@4bhs.org

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Behavioral Health Specialists	1900 Vicki Lane Norfolk, NEBRASKA 68701	Adult Substance Use Addendum	Reyes, Juan	4025649994	jreyes@4bhs.org
		Adult Substance Use Evaluation	Battle, Lisa	4023703140	lbattle@4bhs.org
			Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
			Reyes, Juan	4025649994	jreyes@4bhs.org
		Adult Substance Use Halfway House	Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Battle, Lisa	4023703140	lbattle@4bhs.org
			Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Korth, Brady	4023703140	bkorth@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
			Mulberry, Jessica	6057606988	jmulberry@4bhs.org
			Pollard, James	2403093852	japoll01@wsc.edu
			Schlieve, Jennifer	4023703140	jschlieve@4bhs.org
			Vogeler, Amanda	4023703140	avogeler@4bhs.org
		Adult Substance Use Outpatient Treatment (Group)	Battle, Lisa	4023703140	lbattle@4bhs.org
			Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Korth, Brady	4023703140	bkorth@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org

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Behavioral Health Specialists	1900 Vicki Lane Norfolk, NEBRASKA 68701	Adult Substance Use Outpatient Treatment (Group)	Pollard, James	2403093852	japoll01@wsc.edu
			Vogeler, Amanda	4023703140	avogeler@4bhs.org
		Adult Substance Use Outpatient Treatment (Individual)	Battle, Lisa	4023703140	lbattle@4bhs.org
			Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Korth, Brady	4023703140	bkorth@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
			Pollard, James	2403093852	japoll01@wsc.edu
			Schliewe, Jennifer	4023703140	jschliewe@4bhs.org
			Vogeler, Amanda	4023703140	avogeler@4bhs.org
		Adult Substance Use Short-Term Residential	Hohbein, Kathy	4024169630	khohbein@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
			Mulberry, Jessica	6057606988	jmulberry@4bhs.org
			Pollard, James	2403093852	japoll01@wsc.edu
			Reyes, Juan	4025649994	jreyes@4bhs.org
			Schliewe, Jennifer	4023703140	jschliewe@4bhs.org
			Vogeler, Amanda	4023703140	avogeler@4bhs.org
		Agency Supported Foster Care	Schwartz, Tamara	4023700511	tschwartz@4bhs.org
		Juvenile Co-Occurring			

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Behavioral Health Specialists	1900 Vicki Lane Norfolk, NEBRASKA 68701	Evaluation			
		Juvenile Mental Health Evaluation	Korth, Brady	4023703140	bkorth@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Korth, Brady	4023703140	bkorth@4bhs.org
			Morris-Von Kampen, Carla	4026407521	cvonkampen@4bhs.org
			Mulberry, Jessica	6057606988	jmulberry@4bhs.org
		Juvenile Substance Use Addendum			
		Juvenile Substance Use Evaluation			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Pollard, James	2403093852	japoll01@wsc.edu
		Relative/Kinship Home Study	Schwartzter, Tamara	4023700511	tschwartzter@4bhs.org

Agency Name: COR Therapeutic Services, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	Adult Sex Offense-Specific Outpatient Counseling (Individual/Group)	Davies, Paul	4023166570	p.a.davies15@gmail.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
		Adult Substance Use Intensive Outpatient	Cuevas, Tikisha	4028417633	tikisha.cuevas@cortherapeutic.com
			Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com

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COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	Counseling (IOP)	Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Adult Substance Use Outpatient Treatment (Individual)	Cuevas, Tikisha	4028417633	tikisha.cuevas@cortherapeutic.com
			Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Houser, Elisabeth	4027419121	elisabeth.houser@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Day Reporting	Milander-Mace, Amanda	4025006870	amanda.Milandermace@Cortherapeutic.com
			Schlake, Erin	4026494479	erin.schlake@cortherapeutic.com
		Expedited Mental Health Evaluation	Brooks, Cristy	4025006870	cristy.brooks@cortherapeutic.com
			Burgoon, Andria	4025006870	andria.burgoon@cortherapeutic.com

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COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	Expedited Mental Health Evaluation	Davies, Paul	4023166570	p.a.davies15@gmail.com
			Freudenburg, Kendra	4025006870	kendra.freudenburg@cortherapeutic.com
			Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Kuchar, Tonya	4025006870	tonya.kuchar@cortherapeutic.com
			Larson, Beth	4025006870	Beth.Larson@cortherapeutic.com
			Laudenklos, Julianne	4025006870	julianne.laudenklos@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Lotz, Sharon	4025006870	sharon.lotz@cortherapeutic.com
			Milander-Mace, Amanda	4025006870	amanda.Milandermace@Cortherapeutic.com
			Ohde, Ashton	4025006870	ashton.ohde@cortherapeutic.com
			Reese, Megan	4023672571	megan.reese@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			Williams, Tina	4023582047	tina.williams@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		General Education Class	Brooks, Cristy	4025006870	cristy.brooks@cortherapeutic.com
			Brugger, Siera	4025006870	siera.brugger@cortherapeutic.com
			Burgoon,	4025006870	andria.burgoon@cortherapeutic.com

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COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	General Education Class	Andria		
			Cuevas, Tikisha	4028417633	tikisha.cuevas@cortherapeutic.com
			Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Green, Caleb	4022904634	caleb.green@cortherapeutic.com
			Jefferson, Javona	4029108704	javona.jefferson@cortherapeutic.com
			Klinetobe, Sarah	4023400772	sarah.klinetobe@cortherapeutic.com
			Laudenklos, Julianne	4025006870	julianne.laudenklos@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Lotz, Sharon	4025006870	sharon.lotz@cortherapeutic.com
			Milander-Mace, Amanda	4025006870	amanda.Milandermace@Cortherapeutic.com
			Ohde, Ashton	4025006870	ashton.ohde@cortherapeutic.com
			Reese, Megan	4023672571	megan.reese@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Invoice - Mileage			
		Juvenile Co-Occurring Evaluation	Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Houser, Elisabeth	4027419121	elisabeth.houser@cortherapeutic.com

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COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	Juvenile Co-Occurring Evaluation	Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
		Juvenile Mental Health Evaluation	Brooks, Cristy	4025006870	cristy.brooks@cortherapeutic.com
			Burgoon, Andria	4025006870	andria.burgoon@cortherapeutic.com
			Davies, Paul	4023166570	p.a.davies15@gmail.com
			Freudenburg, Kendra	4025006870	kendra.freudenburg@cortherapeutic.com
			Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Jefferson, Javona	4029108704	javona.jefferson@cortherapeutic.com
			Kuchar, Tonya	4025006870	tonya.kuchar@cortherapeutic.com
			Larson, Beth	4025006870	Beth.Larson@cortherapeutic.com
			Laudenklos, Julianne	4025006870	julianne.laudenklos@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Lotz, Sharon	4025006870	sharon.lotz@cortherapeutic.com
			Milander-Mace, Amanda	4025006870	amanda.Milandermace@Cortherapeutic.com
			Ohde, Ashton	4025006870	ashton.ohde@cortherapeutic.com
			Reese, Megan	4023672571	megan.reese@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	Juvenile Mental Health Evaluation	Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			Williams, Tina	4023582047	tina.williams@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Blase, Valerie	3089912360	valerie.blase@cortherapeutic.com
			Brooks, Cristy	4025006870	cristy.brooks@cortherapeutic.com
			Brugger , Siera	4025006870	siera.brugger@cortherapeutic.com
			Burgoon, Andria	4025006870	andria.burgoon@cortherapeutic.com
			Davies, Paul	4023166570	p.a.davies15@gmail.com
			Freudenburg, Kendra	4025006870	kendra.freudenburg@cortherapeutic.com
			Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Green, Caleb	4022904634	caleb.green@cortherapeutic.com
			Houser, Elisabeth	4027419121	elisabeth.houser@cortherapeutic.com
			Jefferson, Javona	4029108704	javona.jefferson@cortherapeutic.com
			Kuchar, Tonya	4025006870	tonya.kuchar@cortherapeutic.com
			Larson, Beth	4025006870	Beth.Larson@cortherapeutic.com
			Laudenklos, Julianne	4025006870	julianne.laudenklos@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Lotz, Sharon	4025006870	sharon.lotz@cortherapeutic.com
			Milander-Mace,	4025006870	amanda.Milandermace@Cortherapeutic.com

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COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	Juvenile Mental Health Outpatient Counseling (Individual/Family)	Amanda		
			Ohde, Ashton	4025006870	ashton.ohde@cortherapeutic.com
			Reese, Megan	4023672571	megan.reese@cortherapeutic.com
			Reyes, Connie	4029200524	connie.reyes@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			Torres, Tamara	4023694458	tamara.torres@cortherapeutic.com
			Williams, Tina	4023582047	tina.williams@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juvenile Substance Use Addendum	Cuevas, Tikisha	4028417633	tikisha.cuevas@cortherapeutic.com
			Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Houser, Elisabeth	4027419121	elisabeth.houser@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com

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COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	Juvenile Substance Use Evaluation	Cuevas, Tikisha	4028417633	tikisha.cuevas@cortherapeutic.com
			Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Houser, Elisabeth	4027419121	elisabeth.houser@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juvenile Substance Use Outpatient Treatment (Group)	Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Cuevas, Tikisha	4028417633	tikisha.cuevas@cortherapeutic.com
			Duffy, Terry	4026401542	terry.duffy@cortherapeutic.com
			Gadeken, Angela	4023600782	angela.gadeken@cortherapeutic.com
			Houser, Elisabeth	4027419121	elisabeth.houser@cortherapeutic.com
			Leifeld, Katie	4025006870	katie.leifeld@cortherapeutic.com
			Rowley, Abbie	4025006870	abbie.rowley@cortherapeutic.com

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COR Therapeutic Services, LLC	1800 W Pasewalk Avenue Suite A Norfolk, NEBRASKA 68701	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
			Streff, Tobin	4025006870	tobin.streff@cortherapeutic.com
			warner, roland	4023854597	roland.warner@cortherapeutic.com
		Juveniles Who Sexually Harm Outpatient Treatment (Group)	Stahlecker, Rebecca	4025006870	rebecca.stahlecker@cortherapeutic.com
		Juveniles Who Sexually Harm Outpatient Treatment (Individual/Family)	Davies, Paul	4023166570	p.a.davies15@gmail.com
		PRS-BIP	Milander-Mace, Amanda	4025006870	amanda.Milandermace@Cortherapeutic.com

Agency Name: Cara Leader Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cara Leader Counseling, LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
		Adult Mental Health Outpatient Counseling (Individual)	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
		Adult Substance Use Addendum	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Evaluation	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Cara Leader Counseling, LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Adult Substance Use Evaluation	Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Individual)	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Co-Occurring Evaluation	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
		Juvenile Substance Use Addendum	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Substance Use Evaluation	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Leader, Cara	4022567883	cara@tranquillotuscollaborative.org
			Wagner, Alicia	4022567883	alicia@tranquillotuscollaborative.org

Agency Name: Carmichael Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Carmichael Counseling	110 North 37th Suite 301 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)			
		Adult Substance Use Addendum			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Carmichael Counseling	110 North 37th Suite 301 Norfolk, NEBRASKA 68701	Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)			
		Juvenile Substance Use Outpatient Treatment (Individual/Family)			

Agency Name: Crystal Matthews Counseling, LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Crystal Matthews Counseling, LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Mental Health Evaluation	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Mental Health Outpatient Counseling (Individual)	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Substance Use Addendum	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Substance Use Evaluation	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Individual)	Matthews, Crystal	4022567883	crystal@tranquillotuscollaborative.org

Agency Name: Good Life Counseling & Support LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Good Life Counseling & Support	200 North 34th Street Norfolk,	Adult Co-Occurring Evaluation	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
LLC	NEBRASKA 68701	Adult Co-Occurring Evaluation	Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kleinschmit, Amy	4023713044	amy.kleinschmit@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Adult Mental Health Outpatient Counseling (Individual)	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kleinschmit, Amy	4023713044	amy.kleinschmit@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Adult Substance Use Addendum	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Eich, Christy	4023713044	christy.eich@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Adult Substance Use Addendum	Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Adult Substance Use Evaluation	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Eich, Christy	4023713044	christy.eich@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Adult Substance Use Intensive Outpatient Counseling (IOP)			
		Adult Substance Use Outpatient Treatment (Individual)	Eich, Christy	4023713044	christy.eich@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
		Community Youth Coaching	Baber, Levi	4029921232	levi.baber@goodlifecounseling.com
			Casanova, Jaime	4024175587	jaime-casanova@live.com
			Eich, Christy	4023713044	christy.eich@goodlifecounseling.com
			Perry, Gage	4025629160	Gageperry321@gmail.com
			SCHEER, JADE	4028600673	jade.scheer@goodlifecounseling.com
			Schmuecker, Kirsten	4028449557	kirsten.schmuecker@goodlifecounseling.com
		Day Reporting	Baber, Levi	4029921232	levi.baber@goodlifecounseling.com
			SCHEER, JADE	4028600673	jade.scheer@goodlifecounseling.com
		Family Support	Baber, Levi	4029921232	levi.baber@goodlifecounseling.com
			Casanova, Jaime	4024175587	jaime-casanova@live.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Family Support	Hahn, Mary	4025620400	mary.hahn@goodlifecounseling.com
			Perry, Gage	4025629160	Gageperry321@gmail.com
			SCHEER, JADE	4028600673	jade.scheer@goodlifecounseling.com
			Schmuecker , Kirsten	4028449557	kirsten.schmuecker@goodlifecounseling.com
		Intensive Family Preservation	Casanova, Jaime	4024175587	jaime-casanova@live.com
			Hahn, Mary	4025620400	mary.hahn@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com
			Kleinschmit, Amy	4023713044	amy.kleinschmit@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Invoice - Mileage			
		Juvenile Co-Occurring Evaluation	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Juvenile Electronic Monitoring Cell Phone			
		Juvenile Electronic Monitoring GPS	Baber, Levi	4029921232	levi.baber@goodlifecounseling.com
			Perry, Gage	4025629160	Gageperry321@gmail.com
			SCHEER, JADE	4028600673	jade.scheer@goodlifecounseling.com
			Schmuecker , Kirsten	4028449557	kirsten.schmuecker@goodlifecounseling.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Juvenile Electronic Monitoring Land Line			
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kleinschmit, Amy	4023713044	amy.kleinschmit@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Juvenile Mental Health Intensive Outpatient Counseling (IOP)	Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kleinschmit, Amy	4023713044	amy.kleinschmit@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Juvenile Psychiatric Evaluation			
		Juvenile Substance Use Addendum	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Eich, Christy	4023713044	christy.eich@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
		Juvenile Substance Use Addendum	Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Juvenile Substance Use Evaluation	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Eich, Christy	4023713044	christy.eich@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Juvenile Substance Use Intensive Outpatient (IOP)	Eich, Christy	4023713044	christy.eich@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Barr, Thomas	4023713044	tom.barr@goodlifecounseling.com
			Eich, Christy	4023713044	christy.eich@goodlifecounseling.com
			Jackson, Myla	4028416149	myla.jackson@goodlifecounseling.com
			Klassen, Ellie	4027505920	ellie.klassen@goodlifecounseling.com
			Kubo, Dana	4023713044	dana.kubo@goodlifecounseling.com
			Slater, Kendra	4023713044	kendra.slater@goodlifecounseling.com
		PRS-BIP			

Agency Name: Jordan Willer

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Jordan	3901 W. Norfolk Ave.	Adult Co-Occurring	Willer, Jordan	4023600055	jewiller@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Willer	Ste. A Norfolk, NEBRASKA 68701	Evaluation			
		Adult Mental Health Evaluation	Willer, Jordan	4023600055	jewiller@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Willer, Jordan	4023600055	jewiller@gmail.com
		Adult Substance Use Addendum	Willer, Jordan	4023600055	jewiller@gmail.com
		Adult Substance Use Evaluation	Willer, Jordan	4023600055	jewiller@gmail.com
		Expedited Co-Occurring Evaluation	Willer, Jordan	4023600055	jewiller@gmail.com
		Expedited Mental Health Evaluation	Willer, Jordan	4023600055	jewiller@gmail.com
		Expedited Substance Use Evaluation	Willer, Jordan	4023600055	jewiller@gmail.com
		Juvenile Co-Occurring Evaluation	Willer, Jordan	4023600055	jewiller@gmail.com
		Juvenile Mental Health Evaluation	Willer, Jordan	4023600055	jewiller@gmail.com
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Willer, Jordan	4023600055	jewiller@gmail.com
		Juvenile Substance Use Addendum	Willer, Jordan	4023600055	jewiller@gmail.com
		Juvenile Substance Use Evaluation	Willer, Jordan	4023600055	jewiller@gmail.com

Agency Name: Kelli Means Teletherapy

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Kelli Means Teletherapy	714 E Park Ave Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Mental Health	Means, Kelli	4025000028	kmteletherapy@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Kelli Means Teletherapy	714 E Park Ave Norfolk, NEBRASKA 68701	Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Substance Use Addendum	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Substance Use Evaluation	Means, Kelli	4025000028	kmteletherapy@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Means, Kelli	4025000028	kmteletherapy@gmail.com

Agency Name: MADISON COUNTY SHERIFF'S OFFICE

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
MADISON COUNTY SHERIFF'S OFFICE	1313 N MAIN ST PO BOX 209 Madison, NEBRASKA 68748	Invoice - Law Enforcement Transportation			

Agency Name: Madison County Juvenile Accountability Unit

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Madison County Juvenile Accountability Unit	123 North 4th Street Norfolk, NEBRASKA 68701	Day Reporting			

Agency Name: Michael Sullivan Counseling

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Michael Sullivan Counseling	110 N. 37th Street Suite 301 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Mental Health Evaluation	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Mental Health	Sullivan,	4027507923	ramsgaterecovery@gmail.com

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Michael Sullivan Counseling	110 N. 37th Street Suite 301 Norfolk, NEBRASKA 68701	Outpatient Counseling (Individual)	Michael		
		Adult Substance Use Addendum	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Substance Use Evaluation	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com

Agency Name: Midtown Health Center, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midtown Health Center, Inc.	302 W Phillip Ave Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Outpatient Treatment (Individual)			
Midtown Health Center--Madison	222 S Main St Madison, NEBRASKA 68748	Adult Co-Occurring Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Midtown Health Center--Madison	222 S Main St Madison, NEBRASKA 68748	Adult Substance Use Outpatient Treatment (Individual)			
Midtown Xpress Care	210 S 3rd St Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Mental Health Evaluation			
		Adult Mental Health Outpatient Counseling (Individual)	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Evaluation	Sotelo, Jessica	4023718000	jsotelo@midtownhealthne.org
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: Norfolk Group Home

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Norfolk Group Home	201 n 12th st Norfolk, NEBRASKA 68701	Group Home A			
		Shelter Care			
Norfolk Transitional Living	1201 WEST PHILLIP AVE Norfolk, NEBRASKA 68701	Independent Living			

Agency Name: Northeast Nebraska Juvenile Services

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Northeast Nebraska Juvenile Services	1313 1/2 N. Main Madison, NEBRASKA 68748	Invoice - Secure Detention			
		Invoice - Staff Detention			

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Agency Name: Oasis Counseling International

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Oasis Counseling International	333 W NORFOLK AVE, Suite 201 Suite 201 Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Race, Chelsea	7047288471	crace@ocinternational.org
		Adult Medication Management	Ottis, Bobbi	4023792030	bottis@ocinternational.org
		Adult Mental Health Evaluation	Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
		Adult Mental Health Outpatient Counseling (Individual)	Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
		Adult Psychological Evaluation	Race, Chelsea	7047288471	crace@ocinternational.org
		Adult Substance Use Evaluation	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oestreich, Rhonda	4023792030	roestreich@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Titus, Autumn	4023792030	atitus@ocinternational.org
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oestreich, Rhonda	4023792030	roestreich@ocinternational.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Oasis Counseling International	333 W NORFOLK AVE, Suite 201 Suite 201 Norfolk, NEBRASKA 68701	Adult Substance Use Intensive Outpatient Counseling (IOP)	Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Race, Chelsea	7047288471	crace@ocinternational.org
			Titus, Autumn	4023792030	atitus@ocinternational.org
		Adult Substance Use Outpatient Treatment (Group)	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oestreich, Rhonda	4023792030	roestreich@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oestreich, Rhonda	4023792030	roestreich@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
			Titus, Autumn	4023792030	atitus@ocinternational.org
		Community Treatment Aide (CTA)	Clyde, Jessica	4023792030	jclyde@ocinternational.org
			Keller, Janie	4029927206	jkeller@ocinternational.org
		Family Support	Clyde, Jessica	4023792030	jclyde@ocinternational.org
			Keller, Janie	4029927206	jkeller@ocinternational.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Oasis Counseling International	333 W NORFOLK AVE, Suite 201 Suite 201 Norfolk, NEBRASKA 68701	Family Support	Janie		
		Juvenile Co-Occurring Evaluation	Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
		Juvenile Mental Health Evaluation	Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Ottis, Bobbi	4023792030	bottis@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
		Juvenile Psychiatric Evaluation	Ottis, Bobbi	4023792030	bottis@ocinternational.org
		Juvenile Substance Use Evaluation	Keller, Janie	4029927206	jkeller@ocinternational.org
			Oestreich, Rhonda	4023792030	roestreich@ocinternational.org
			Oltmer, Cynthia	4023792030	coltmer@ocinternational.org
			Petersen, Connie	4028417720	conpete@gmail.com
			Race, Chelsea	7047288471	crace@ocinternational.org
			Titus, Autumn	4023792030	atitus@ocinternational.org

Agency Name: Owens Educational Services, Inc.

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
OWENS-NORFOLK	1220 W Benjamin Ave Suite 1 Norfolk, NEBRASKA 68701	Family Support			

Agency Name: PAC Counseling LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
PAC Counseling LLC	1909 Vicki Lane Ste 105 Norfolk, NEBRASKA 68701	Adult Substance Use Addendum	Claussen, Patricia	4023401158	anne@tranquillotuscollaborative.org
		Adult Substance Use Evaluation	Claussen, Patricia	4023401158	anne@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Group)	Claussen, Patricia	4023401158	anne@tranquillotuscollaborative.org
		Adult Substance Use Outpatient Treatment (Individual)	Claussen, Patricia	4023401158	anne@tranquillotuscollaborative.org
		Juvenile Substance Use Addendum	Claussen, Patricia	4023401158	anne@tranquillotuscollaborative.org
		Juvenile Substance Use Evaluation	Claussen, Patricia	4023401158	anne@tranquillotuscollaborative.org
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Claussen, Patricia	4023401158	anne@tranquillotuscollaborative.org

Agency Name: Ponca Tribe of Nebraska

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-Norfolk (Ponca Hills)	1800 Syracuse Av Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Custer, Janet	4028511605	janetc@poncatribene.org
		Adult Mental Health Evaluation	Custer, Janet	4028511605	janetc@poncatribene.org
		Adult Mental Health	Custer, Janet	4028511605	janetc@poncatribene.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ponca Tribe of Nebraska-Norfolk (Ponca Hills)	1800 Syracuse Av Norfolk, NEBRASKA 68701	Outpatient Counseling (Individual)			ne.org
		Adult Substance Use Addendum	Custer, Janet	4028511605	janetc@poncatribene.org
		Adult Substance Use Evaluation	Custer, Janet	4028511605	janetc@poncatribene.org
		Adult Substance Use Outpatient Treatment (Group)	Custer, Janet	4028511605	janetc@poncatribene.org
		Adult Substance Use Outpatient Treatment (Individual)	Custer, Janet	4028511605	janetc@poncatribene.org

Agency Name: Ramsgate LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Ramsgate LLC	1000 Koenigstein Avenue Norfolk, NEBRASKA 68701	Transitional Living - Level 1	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com
		Transitional Living - Level 2	Sullivan, Michael	4027507923	ramsgaterecovery@gmail.com

Agency Name: Steffen Social Work Services LLC

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Steffen Social Work Services LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Adult Mental Health Outpatient Counseling (Group)	Steffen, Lori	4022567883	lori@tranquillotuscollaborative.org
		Adult Mental Health Outpatient Counseling (Individual)	Steffen, Lori	4022567883	lori@tranquillotuscollaborative.org
		Juvenile Mental Health Outpatient Counseling (Group)	Steffen, Lori	4022567883	lori@tranquillotuscollaborative.org
		Juvenile Mental Health	Steffen,	4022567883	lori@tranquillotuscollaborative.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Steffen Social Work Services LLC	1909 Vicki Lane Suite 105 Norfolk, NEBRASKA 68701	Outpatient Counseling (Individual/Family)	Lori		

Agency Name: The Counseling & Enrichment Center

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Counseling & Enrichment Center	105 S. 5th Street Norfolk, NEBRASKA 68701	Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Outpatient Treatment (Individual)			

Agency Name: The Link, Inc.

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Link, Inc.	1001 West Norfolk Ave. Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Substance Use Addendum			
		Adult Substance Use Evaluation			
		Adult Substance Use Halfway House	Nuss, William	4023715310	wnuss@link-recovery.org
			Sell, Brent	4023790040	bsell@link-recovery.org
			Sparr, Kain	4023715310	ksparr@link-recovery.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Link, Inc.	1001 West Norfolk Ave. Norfolk, NEBRASKA 68701	Transitional Living - Level 1	Nuss, William	4023715310	wnuss@link-recovery.org
			Sparr, Kain	4023715310	ksparr@link-recovery.org
		Transitional Living - Level 2	Nuss, William	4023715310	wnuss@link-recovery.org
			Sparr, Kain	4023715310	ksparr@link-recovery.org

Agency Name: The Well

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Dual Disorder Program	910 W. Park Avenue Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rech, Kim	4028604014	kimr@womenslifeline.net
		Adult Mental Health Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rech, Kim	4028604014	kimr@womenslifeline.net
		Adult Substance Use Addendum	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rech, Kim	4028604014	kimr@womenslifeline.net
Intermediate Residential/ Halfway House	200 S. 13th Street Norfolk, NEBRASKA 68701	Adult Substance Use Addendum	Parr, Jessica	4023793622	jessicaparr@thewellne.org
		Adult Substance Use Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
		Adult Substance Use Halfway House	Parr, Jessica	4023793622	jessicaparr@thewellne.org
Men's Program	306 W. Indiana Avenue Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation			
		Adult Mental Health Evaluation			
		Adult Substance Use Addendum			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Men's Program	306 W. Indiana Avenue Norfolk, NEBRASKA 68701	Adult Substance Use Evaluation			
		Dual Residential (MH/SA)			
Mommy and Me	512 Verges Avenue Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
		Adult Mental Health Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
		Adult Substance Use Addendum	Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Evaluation	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Halfway House	Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Dual Residential (MH/SA)			
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Adult Co-Occurring Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Initial Diagnostic Interview (Medication Prescriber Only)			
		Adult Medication Management			
		Adult Mental Health Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org

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The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Adult Mental Health Evaluation	Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Mental Health Outpatient Counseling (Individual)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Addendum	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian	4023710220	taniadamianbarrios@thewellne.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Adult Substance Use Evaluation	Barrios, Tania		
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Parr, Jessica	4023793622	jessicaparr@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Intensive Outpatient Counseling (IOP)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Newcombe, Tera	4023710220	teranewcombe@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Outpatient Treatment (Group)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org

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The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Adult Substance Use Outpatient Treatment (Group)	Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Adult Substance Use Outpatient Treatment (Individual)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Community Treatment Aide (CTA)	James, Natalie	4023710220	nataliejames@thewellne.org
			Muncie, Brittney	4023710220	brittneymuncie@thewellne.org
		Juvenile Co-Occurring Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
		Juvenile Medication Management			
		Juvenile Mental Health Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
		Juvenile Mental			

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Health Intensive Outpatient Counseling (IOP)			
		Juvenile Mental Health Outpatient Counseling (Group)			
		Juvenile Mental Health Outpatient Counseling (Individual/Family)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Juvenile Psychiatric Evaluation			
		Juvenile Psychiatric Evaluation Interview Only			
		Juvenile Substance Use Addendum	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Juvenile Substance Use Evaluation	Aschoff, Allison	4023710220	alliaschoff@thewellne.org

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Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Juvenile Substance Use Evaluation	Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Juvenile Substance Use Intensive Outpatient (IOP)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
		Juvenile Substance Use Outpatient Treatment (Group)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
			Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
			Rivest, Seth	4023710220	sethr@womenslifeline.net
		Juvenile Substance Use Outpatient Treatment (Individual/Family)	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			Damian Barrios, Tania	4023710220	taniadamianbarrios@thewellne.org
			Dannar, Karla	4023710220	karladannar@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
			Larson, Donielle	4028410184	donnyl@womenslifeline.net

Administrative Office of Courts & Probation

P.O. Box 98910
Lincoln, NE 68509
Phone: (402) 471-3730

District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
The Well	1203 S. 8th Street Norfolk, NEBRASKA 68701	Juvenile Substance Use Outpatient Treatment (Individual/Family)	Lindahl, Tabitha	4023710220	tabithalindahl@thewellne.org
Transitional Living	510 Verges Avenue Norfolk, NEBRASKA 68701	Transitional Living - Level 1	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org
		Transitional Living - Level 2	Aschoff, Allison	4023710220	alliaschoff@thewellne.org
			DeSilva, Kelly	4026493269	kellydesilva@thewellne.org

Agency Name: Women's House of Hope

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Open Doors	106 W Spruce Ave Norfolk, NEBRASKA 68701	Transitional Living - Level 1	Merchant, Chad	4029921119	houseofhope91@yahoo.com
Women's House of Hope	608 S 9th St. Norfolk, NEBRASKA 68701	Transitional Living - Level 2	Merchant, Chad	4029921119	houseofhope91@yahoo.com

Agency Facility County: Wayne

Agency Name: CITY OF WAYNE POLICE DEPT

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
CITY OF WAYNE POLICE DEPT	PO BOX 8 Wayne, NEBRASKA 68787	Invoice - Law Enforcement Transportation			

Agency Name: Renee R Wilson

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wilson	904 Jaxon Street	Adult Substance Use	Wilson,	4023693007	renee.r.wilson@hotmail.com

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District 7

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wellness and Counseling	Wayne, NEBRASKA 68787	Addendum	Renee		
		Adult Substance Use Evaluation	Wilson, Renee	4023693007	renee.r.wilson@hotmail.com
		Adult Substance Use Outpatient Treatment (Individual)	Wilson, Renee	4023693007	renee.r.wilson@hotmail.com
		Juvenile Substance Use Evaluation	Wilson, Renee	4023693007	renee.r.wilson@hotmail.com

Agency Name: Wayne County Sheriff's Office

Agency Facility Name	Facility Address	Agency Facility Service Description	Approved Individual for Service	Individual Phone	Individual Email
Wayne County Sheriff's Office	521 Lincoln St. Wayne, NEBRASKA 68787	Invoice - Law Enforcement Transportation			