# Deaf Blind Multiple Disabilities (DBMD) Documentation of Provider Choice

## Region 05, Southeast Texas

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Print Applicant/Individual's Name                                             Area Code and Telephone No.

I choose the following as my DBMD Program Provider:

☐ **Agency 1: Chrisdavnet Care Services, LLC**
**Contract No.:** 1020386
**Telephone:** ( 713) 589-2953
**Fax:** (713) 429-5123
**Services Provided:** In-Home Supports
**Counties Served:** Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler

☐ **Agency 2: Deaf Blind Services of Texas, LLC**
**Contract No.:** 1027962
**Telephone:** ( 713) 842-7121
**Fax:** (832) 487-1727
**Services Provided:** In-Home Supports
**Counties Served**: Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler

☐ **Agency 3: Disability Services of the Southwest, Inc. (DSSW)**
**Contract No.:** 1016448
**Telephone:** ( 409) 813-2527
**Fax:** (877) 463-1310
**Services Provided:** In-Home Supports
**Counties Served:** Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler

☐ **Agency 4: Volunteers of America Texas, Inc. (VOA)**
**Contract No.:** 1016566
**Telephone:** ( 713) 460-0781                    **Alt. Telephone:** (713) 351-9009
**Fax:** (832) 304-5231
**Services Provided:** In-Home Supports
**Counties Served:** Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange,

Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler

This is the list of DBMD program providers who serve the region in which I currently reside. It has been explained to me and I understand that I may transfer to a different program provider at any time.  If I am interested in transferring to a new program provider or if I am moving to another region of the state, I can request the list of DBMD program providers in that area from my case manager or call (512) 438-5359 at any time.

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**(Signature of Participant or Legally Authorized Representative)**                     **(Date)**