



County of Orange  
Health Care Agency, Behavioral Health Services

Mental Health Services Act (MHSA)  
2007

**MHSA CSS Implementation Progress Report**  
30 Day Public Comment Form

April 25, 2008 – May 25, 2008

**PERSONAL INFORMATION**

Name: \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

Phone Number: \_\_\_\_\_ e-mail address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Please send comments to:  
MHSA Office  
600 W. Santa Ana Blvd. Suite 510  
Santa Ana, CA 92701  
or email to: [mhsa@ocha.com](mailto:mhsa@ocha.com)

**What do you see as the strengths of the Report?**

**If you have concerns about the Report, please explain.**