



Illinois Department of Children and Family Services

RE: _____ v. _____

No. _____

Dear Judge

☐ The Department has concluded its custody investigation pursuant to your written order in the above captioned matter under the Marriage and Dissolution of Marriage Act. We herewith submit our bill for services rendered and ask that you assess it as costs against the parties.

☐ The Department has rendered continuing supervision over the parties and child(ren) in the above captioned matter under the Marriage and Dissolution of Marriage Act. We herewith submit our bill for services rendered and ask that you assess it as costs against the parties. This statement covers the following period:

- | | | | |
|----|--|----------------------|-------|
| 1. | Social Worker time: _____ | hours x \$18.25/hour | _____ |
| 2. | Clerical time: _____ | hours x \$11.11/hour | _____ |
| 3. | Travel: _____ | hours x \$.31/mile | _____ |
| 4. | Photocopying: _____ | pages x \$.10/page | _____ |
| 5. | Actual billing for professional diagnostic assessment
ordered by this Court, as follows: _____
_____ | | |
| 6. | Miscellaneous expenses, as follows: _____
_____ | | |

TOTAL: _____

The party (parties) should be advised to make their check payable to the Treasurer, State of Illinois, and remit to the Department office below.

If requested, an itemized statement of time will be submitted.

Very truly yours,

Department Representative

cc: _____

Attorney for Petitioner
(or Petitioner if unrepresented)

Attorney for Respondent
(or Respondent if unrepresented)

Office of the Director

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