APPROVED:

_____ _____

Guardian ad Litem (Signature) Assistant County Attorney (Signature)

_____ _____

Guardian ad Litem (Printed Name) (S. Ct. No.) Assistant County Attorney (S. Ct. No.)
(Printed Name)

_____ _____

Attorney for Mother (Signature) Attorney for Father (Signature)

_____ _____

Attorney for Mother (Printed Name) (S. Ct. No.) Attorney for Father (Printed Name) (S. Ct. No.)

Copy of this Order to Counsel and

____ SRS
____ _____
____ C.A.S.A.
____ Interested Party
____ Interested Party
____ Other
____ Other