IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT LAKE COUNTY, ILLINOIS

Gase No. Petitioner Support Parential Responsibility Previous or current Ops involving either party: OP Case No. County: OP Case No. OP Case No. County: OP Case No. OP Ca	IN RE TH	HE □ MARRIAGE	☐ PARENTAG	Ε)		
Petitioner Petitioner Petitioner Petitioner Previous or current Ops involving either party: OP Case No. County: OP Case No. OP Case No. OP Case No. County: OP Case No. OP Case No. OP Case No. OP Case Note Indicate		☐ SUPPORT		N OF)		
Petitioner Previous or current Ops involving either party: OP Case No. County:		☐ CIVIL UNION	PARENTAL R	ESPONSIBILIT ¹	()		
Petitioner OP Case No. County:) Coss No		
Vs.			Petitic	ner) Case No		·
Respondent } OP Case No:		VS.) Previous or co	urrent Ops invo	lving either party:
ALLOCATION OF PARENTAL RESPONSIBILITIES EVALUATION REFERRAL ORDER On motion of: Petitioner Respondent Attorney for Minor Child Child Rep Court It is hereby ordered that this matter is referred to: Professional/Evaluator/finvestigator:: Name Address Fax Pursuant to: 750 ILCS 5/604.10(b), to provide the court with professional advice on issues relating to the best interests and wishes of the child(ren) who is/are the subject of allocation of parental responsibility proceedings. 750 ILCS 5/604.10(c), for an evaluation concerning the best interests of the child(ren) as it relates to allocation of parental responsibility. The time and place of the evaluation shall be pursuant to court order if agreement by the parties cannot be reached. 750 ILCS 5/604.10(d), to conduct an investigation concerning the allocation of parental responsibility for a child who is the subject of the allocation of parental responsibility proceedings. Party A Name: Telephone: Address:							
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Name Address Telephone Fax	It is here	by ordered that this n	natter is referred t	o:			
Telephone							
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Address:	\	who is the subject of	the allocation of p	arental responsi	bility proceedings.		
Attorney for Party: Telephone: () Address:	Party A	Name:				Telephone: (_)
Attorney for Party:		Address:					
Address:				(Stree	t/City/State/ZIP)		
Street/City/State/ZIP Party B Name:		Attorney for Party:				Telephone: (_)
Party B Name:		Address:					
Address:				•			
Attorney for Party:	Party B	Name:				Telephone: (_)
Attorney for Party:		Address:		(Ctus s	1/City/Ctata/7/D)		
Address:		Allere Co. Deal				T.1	,
GAL/AFC/CR Name:						i elepnone: (_)
GAL/AFC/CR Name:		Address:			t/City/Stato/ZID)		
Address:	GAL/AE	C/CP Name:		•		Telephone: (1
(Street/City/State/ZIP) Scope of appointment: □ Allocation of parental responsibility - □ Original □ Modification □ Parenting time - □ Original □ Modification □ Abuse	GAL/AI					releptione. (_	
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□ Parenting time - □ Original □ Modification □ Abuse	-	• •	esponsibility - 🗆	Original N	Modification		
•		•		· ·		□ Abuse	
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The pa	rties represent:		
	No orders of protection have ever been entered involving	the parties to this case, or	
	The parties are, or have been in the past, involved in a p	roceeding(s) under the Illinois Domestic Violence Act.	
	A current order of protection prohibits one of the parties	rom having contact with the other party.	
	County and Case Number(s) of IDVA cases involving the	parties:	_
	onal Matters: The parties are ordered to contact the appointee within t	wo (2) business days to schedule the first appointment.	
2.	Except if the referral is pursuant to 604.10(c), the appoint copies to the attorneys for the parties and to any pro select of the report.		1
3.	If the referral is pursuant to 604.10(c), the report shall be 604.10(c).	furnished to all attorneys of record as required by	
4.	Pursuant to 750 ILCS 5/606.5(e), the final report of the at the Clerk of the Court unless otherwise ordered.	ppointee furnished to the court shall be kept sealed by	
5.	The provider may communicate freely with the child repr child(ren). Except to discuss the scheduling matters, the party on an ex parte basis. Communications with attorne in writing with a copy to each attorney.	provider may not communicate with an attorney for a	
6.	Unless a proper written consent has first been obtained, expert information about any person investigated, excep 110 et seq.	an appointee may not obtain medical, psychiatric or oth for information about a minor as provided in 740 ILCS	ıe
7.	When served with a subpoena, an appointee shall be ob obtained in regard to this case as well as the names and However, unless a proper written consent specificall medical, psychiatric or other expert information obtained.	addresses of all persons whom the appointee consulte y so authorizes, the appointee may not re-release	d
8.	Pursuant to the Mental Health and Developmental Disab psychological test materials whose disclosure would con may not be disclosed to anyone, including the subject of administrative, judicial or legislative proceeding. However disclosed to any psychologist designated by the recipient comply with the requirements of 740 ILCS 110/5(b).	npromise the objectivity or fairness of the testing proces the test, and is not subject to disclosure in any r, the recipient may have all records relating to the test	
Ne	blogical testing: ither party nor the child(ren) shall be required to submit to fessionals for evaluation except as follows:		•
Fee Al	ocation: The fees of the appointee shall be paid as follo	ws:	
Pa	rty A% Party B% County of Lake	% (Limit on amount County will pay \$	
The ma	atter is set for presentation of final 604.10 report on	at M	
	at Waukegan, Illinois this Enter		
	_ day of, 20	•	
	_ 44, 5		
Prepare	ed by:	JUDGE	
•	Pro Se 🗆		
Addres	s:		
	State:		
Phone:	Zip Code:		
ARDC	#:		
Fax: _			

E-mail address: ____