## NOTICE OF ASSIGNMENT

	ourt Appointed Special Advocates (CASA) program has me) Family Court to the family listed below. The assigne
	, will be contacting your office shortly in regards to:
Family File Number:	
(Name)	(Date of Birth)
(Name)	(Date of Birth)
(Name)	(Date of Birth)
for the safety and well-being of the chil	on is to assist the court in determining the best decision ld(ren) involved in this court action. The CASA burt Order and any signed releases for your files.
•	cam) office of any relevant meetings. We appreciate your Volunteer works to gather appropriate and necessary
•	ng the children of ( <i>Inser county name</i> ). If you have any the program director's contact information).
Sincerely, (This can be signed by howe	ver many program staff you would like to include.)
(Name and title)	(Name and title)
(Date)	<u></u>