**CAUSE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**IN THE INTEREST OF § IN THE DISTRICT COURT**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**§ \_\_\_\_\_\_ JUDICIAL DISTRICT**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**A CHILD/CHILDREN § \_\_\_\_\_\_\_\_\_\_\_COUNTY, TEXAS**

**COURT ORDER**

It is ordered that Crystal Baird Ph.D., LPS shall conduct the below services on the cause number listed. Please circle the services to be completed.

* Psychosocial Assessment - $750
* Court Investigation (two interviews: adult or child, home visit, observed visit, two records, testify fee). Please indicate what records are being requested in the note/comment section. $750
* Parent Facilitation - $200 per hour
* Parent Coordination - $200 per hour
* Counseling - $150 per hour

Other Orders/Notes/Comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unless otherwise ordered by the court, all fees will be split between both parties and all fees shall be paid prior to the services being completed. These fees do not include the fee to testify unless specified by Dr. Baird. If a custody evaluation is ordered, after a psychosocial or court investigation is completed, $500 will be deducted from the price of the custody evaluation.

Signed on this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Judge Presiding