SUPERIOR COURT OF CALIFORNIA COUNTY OF MERCED

www.merced.courts.ca.gov

SUPERVISED VISITATION REPORT

REPORT TO BE PLACED IN CONFIDENTIAL SECTION OF THE COURT FILE.

Supervised provider is to complete this report and email to: Family.Law.Reports@mercedcourt.org or mail to the Merced Superior Court Family Law Clerks Office at (209) 725-4117; 627 W. 21st Street, Merced CA 95340.

If you need additional information or have questions, please call Family Court Services at (209) 725-4253.

Document to be submitted to the Court two weeks prior to the further hearing.

Date_____ Court Case & Number_____
Number of Visits Supervised:___ Hours per Visit:_____
Dates of Visits:_____

Children :_____ Age or DOB_____
First Middle Last

Children:_____ Age or DOB_____
First Middle Last

Children :_____ Age or DOB_____
First Middle Last

Children:_____ Age or DOB_____
First Middle Last

Description of Contact/Summary of visit(s), statements: ☐ **Attached Documents**

Child(reds) Reaction to Visits:

Observation Regarding Visit:

Safety Concerns/Other Information of Benefit Regarding the Case:

Other information of benefit regarding the case:

Please provide the following information:

Agency Name:			
Name of Provider:			
Address:		**City:**	**State:**
Office Number:	**Fax Number:**		
Email:			
Signature			