

**IN THE CIRCUIT COURT OF THE SIXTEENTH JUDICIAL CIRCUIT
KANE COUNTY, ILLINOIS**

Case No. _____

Plaintiff(s)/Petitioner(s)	Defendant(s)/Respondent(s)	
FROM: <input type="checkbox"/> Community Crisis Center Elgin, IL (847) 697-2380 <input type="checkbox"/> Family Counseling Service Aurora, IL (630) 844-2662 <input type="checkbox"/> Other _____		File Stamp

**DOMESTIC VIOLENCE COUNSELING
REPORT TO COURT**

Your Honor,

The Defendant/Respondent, has

- Court Date on _____ at _____ m. in room _____ .
- Been attending I.D.V.A group and has attended _____ of _____ sessions.
- Successfully completed I.D.V.A batterers group counseling.
- Been terminated from I.D.V.A treatment at our agency for the following reason(s):
 - Refused to accept responsibility for abuse
 - Inconsistent attendance
 - Continued patterns of abuse
 - Unsatisfactory participation
 - Substance abuse problem
 - Other:

We recommend that the following action be taken on this case:

- Continuation of counseling
- Provide proof of _____
- Other:

Date: _____

Respectfully Submitted, _____