

This form is attached to DV-110, *Temporary Restraining Order* DV-130, *Restraining Order After Hearing*
 DV-140, *Child Custody and Visitation Order*

① **Name of Protected Person:** _____ Mom Dad Other*

② **Other Parent's Name:** _____ Mom Dad Other*

*If Other, specify relationship to child: _____

The Court Orders:

③ **Mediation, Visitation and Exchange**

a. Parties must go to mediation at: _____

b. Visitation of children is supervised.

Parent to be supervised is: Mom Dad Other (name): _____

c. Exchanges of children are supervised.

④ **Schedule of Supervised Visits**

a. All visits as provided in the schedule on Form DV-140, item ④(d) are to be supervised.

b. Supervised visits shall be _____ visit(s) per week of _____ hours(s) each, to be arranged with the provider.

c. Other schedule of supervised visits is attached. (Check here and attach a sheet of paper with "DV-150, Other Schedule" for a title.)

⑤ **Type of Provider**

a. Professional (individual or supervised visitation center)

b. Nonprofessional

c. Therapeutic (licensed mental health professional)

⑥ **Provider's Information**

Name: _____

Telephone number: _____

Address: _____

⑦ **Costs Will Be Paid As Follows:**

Mom to pay: _____ %

Dad to pay: _____ %

Other: _____

⑧ **Contact With Provider**

Mom to contact provider before (date): _____

Dad to contact provider before (date): _____

Other: _____

⑨ **The court also orders (specify):** _____

This is a Court Order.