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| Children's Division  Circuit Manager's Name,Title   • Address •  City, MO Zip Code  www.dss.mo.gov • Telephone • Fax number |
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| Call Number | | | | |  |
|  | | RE: | *Parent(s)*    *Child(ren)* | | |
| Dear: |  | | | | |
| The purpose of this letter is to inform you that the Children’s Division has conducted an Investigation or Family Assessment in response to your call to the Child Abuse/Neglect Hotline on       regarding the above named family. Please see the finding below: | | | | | |
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|  | | | | Sincerely, | |
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|  | | | |  | |
|  | | | | *(Worker’s Name)* | |