

STATEMENT

TO: Tuscarawas County Job & Family Services
389 16th Street, SW
New Philadelphia, Ohio 44663

DATE COMPLETED _____

FOR: FOSTER CARE OF THE FOLLOWING CHILDREN

| CHILD'S NAME | FROM | TO | TOTAL DAYS | CHILD'S AGE | FOR AGENCY USE ONLY | |
|--------------|------|----|------------|-------------|---------------------|-------|
| | | | | | RATE | TOTAL |
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APPROVED BY

FOSTER PARENT SIGNATURE AND ADDRESS

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