David & Margaret
Youth and Family Services
Foster Care and Adoptions Services
1350 Third Street, La Verne, CA 91750 (909) 593-0089

TREATMENT FOSTER CARE MONTHLY RECREATION RECEIPT

Child's Name:

DOB:
DOP:

Foster Home:

The required monthly standard for recreation is:

Age of Child	***Minimum Amount***
Treatment Foster Care	**$80.00**

Must Be Turned In Monthly With The Treatment Foster Care Voucher

Date	Item Purchased	Price
	Month _____, Year _____	

Staff Social Worker's Signature: _____ Date: _____