



Date: XXXX XX, 2012

XXX Street
XXXX, Georgia XXXX

RE: XXX

Dear: XXXX

This notice acknowledges your report of possible abuse or neglect, received by this office on XXX. Thank you for your concern regarding the children of Georgia and your compliance with O.C.G.A. 19-7-5. We will not reveal your name to the subject of this report; however, if court action is necessary to protect the child, you may be subpoenaed to appear at the hearing. A reporter is protected from civil or criminal liability from any report made in good faith.

As a mandated reporter, at your request you may receive the Intake report disposition (Screen Out, Screen Out Refer to Early Intervention, Investigation, Family Support) and if the intake was assigned, the response time assigned and information concerning the case disposition.

Your report was processed as indicated below. If you have any questions, please contact the XXX County Department of Family and Children Services at XXX.

Sincerely,

Social Services Supervisor

Intake Disposition:

- Screen Out
- Screen Out Refer to Early Intervention
- Family Support
Response Time: Within 5 business days
- Investigation
Response Time: Immediate to 24 hours