

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT, DOMESTIC RELATIONS DIVISION

Form with fields for Petitioner, Respondent, and Case No.

ORDER FOR ACCOUNT ADJUSTMENT REVIEW

This cause coming to be heard on motion of Court Petitioner Respondent, due notice having been given, and the following having appeared:

Petitioner Petitioner's Attorney Respondent Respondent's Attorney

The Petitioner being the Payor Payee, and the Respondent being the Payor Payee; the Court having jurisdiction over the parties and the subject matter and being fully advised in the premises;

IT IS HEREBY ORDERED:

1. The Illinois Department of Healthcare and Family Services shall prepare an account adjustment review (AAR). This process will take approximately 40 days.

2. The Petitioner Petitioner's Attorney Respondent Respondent's Attorney shall deliver this order

To the Presiding Judge's Office, Room 1901 A at the Richard J. Daley Center, 50 W. Washington St., Chicago, IL 60602, or

To the Court Coordinator in courtroom of Municipal District .

3. This cause is continued for status on the AAR to (date) at AM PM in courtroom .

Form with fields for Atty. No., ARDC No., Atty Name, Atty. for, Address, City, State, Zip, Telephone, Primary Email

Form with fields for ENTERED, Dated, Judge, Judge's No.