

**CHILD CUSTODY EVALUATION**  
**ESTIMATED EVALUATION COST FORM**

**Dr. Mark Babula**  
**Central Behavioral Healthcare, Inc.**

Child custody evaluations are billed at the rate of \$250.00 per 50 minute session or pro-rated and may include analyzing data, telephone contacts, faxes, emails, preparation of the report, writing the report, etc. The cost of any test materials and computer analysis of tests will also be billed as separate charges. You are expected to pay for services at the time rendered. Appointments **not cancelled 24 hours in advance** will be billed to the party who **missed** the appointment.

**RETAINER AMOUNT IS COLLECTED AT THE TIME OF FIRST VISIT OF AT LEAST \$1,800.00.**

**TYPICAL CHARGES FOR CHILD CUSTODY EVALUATIONS**

- Two sessions with Parent #1 alone
- Two sessions with Parent #2 alone
- Two sessions with Parent #1 and Children
- Two sessions with Parent #2 and Children
- Psychological Tests for Each Parent
- Testing for spouses or significant others
- Additional sessions, contact with significant others
- Collecting data, copying records, phone calls
- Analyzing/reviewing data and preparing written report
- **Estimated** amount \$3,600.00 - \$6,200.00

(This is an "estimated" amount the cost may be higher if more is involved in your case)

If you have a court date/deadline, please inform us and make sure the fees are paid at least **five (5) business days** before that deadline.

This is **not** a health care service and we **do not bill health insurance**, and do not provide health care coding for insurance.

**Final payment must be paid by either cash, money order or certified bank check.**

**Court Testimony-** A retainer of **\$1350.00** must be paid in advance by certified check or money order, charged at a minimum of four (3) hours. If I am requested to appear in court, either as an expert witness or fact witness, time on the stand is billed at \$330.00 per hour. Other time, including preparation, travel, waiting, etc., is billed at \$250.00 per hour. This charge is **not** included in the above evaluation cost estimate.

I have read and understand all the above listed conditions.

\_\_\_\_\_  
Name Date

Case Name \_\_\_\_\_