## SAMPLE LETTER FOR ANNUAL REVIEW OF MANDATORY OUTPATIENT TREATMENT UNDER

T.C.A. § 33-7-303(g)

(Use Agency or Private Provider Letterhead)

The Honorable Judge
CountyCourt
Address
City, State, ZIP
RE: Acquittee's Name
Case Number
Dear Judge;
Mr./Ms has been ordered to participate in Mandatory Outpatient Treatment under T.C.A. §33-7-303(g) and is due for their annual court review on or about
(In this paragraph please provide the court with information about the acquittee's history of compliance and likelihood of voluntary compliance in the future.)
(In this paragraph please include any recommendations that you would like to make.)
Sincerely,
Name
Agency Name
Address
City, State, ZIP
cc:
Acquittee
Conservator (if applicable)
ADA Acquittee's Attorney
RMHI MOT Coordinator (if applicable)
TDMHSAS MOT Coordinator
1Division by 1401 Coordinator