Margyuridate
TELEPHONE REPORT

TELEPHONE REPORT				
ROOM NO.	NAME OF PATIENT	DOCTOR	CONDITION	VISITORS YES OR NO
	1			7
Do	1. Thrink)	munhabe	by I am th	antful
			1 6 God	and L
Tha	to he dill	Rept me p	are throng	LThu
		rain	and the for	19.
The	where D	r. Parks ni	M-his fe	ly
		Ru	rdly fa	E.L.
Hi	a sight-f	ortedity	to on the	
	V	al	ronriesta	day
an	d well ne	Come his	presence for	re thu
		nell	or the six	R
Bu	t fust mal	e up you	rnind	-HULL
		have h	is may qu	ick
1	e jm 26	ho day as	rd Ilea	nc.
		y	on to que	W
Ho	v merry m	ore addition	on will 1	muke
			or the re	st.
		grand	mothi	
			The second second	