

CONTACT INFORMATION

Resident name	Department/ Year
Spouse name	
	· / ·
Home Address*	city / zip code
Dhone number (please note unlisted if it is)	Best contact time
Phone number (please note unlisted if it is)	Dest contact time
Children: Names/Ages (not included in PALMS directory)	
, , , , , , , , , , , , , , , , , , , ,	
I would be interested in participating in activities during the day	evening both
·	3
*PI :	
*Please include Jacksonville address & phone number if you know it.	
	STORY OF THE PROPERTY OF THE P
Please mail this form to :	9
Christine Stauffer 12824 Quincy Bay Dr.	
Jacksonville, FL. 32224	

(904) 652-5014