

# Important Numbers

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<b>home information:</b> address.....  Community.....  phone.....	<b>doctor:</b> name.....  address.....  phone.....
<b>mom's contact info:</b> cell .....  wk Phone.....  wk address.....	<b>dentist:</b> name .....,  address .....  phone.....
<b>dad's contact info:</b> cell .....  wk phone.....  ... work address.....	<b>pharmacy:</b> name .....  address .....,  phone.....
<b>relatives or neighbors close by:</b> .....  .....  .....	<b>Veterinarian:</b> name .....,  address .....,  phone.....
<b>babysitters:</b> ..... .....	<b>Schools:</b> ..... .....