From:		From:	
Date:	Time:	Date:	Time:
Priority: ☐ High ☐ Normal ☐ Low		Priority: ☐ High ☐ Normal ☐ Low	
Mr / Mrs		Mr / Mrs	
☐ Called for you	☐ Returned your call	☐ Called for you	☐ R eturned your call
☐ Stopped in to see you		☐ Stopped in to see you	
Message		Message	
☐ continued on back		☐ continued on back	
Contact Information		Contact Information	
☐ Work Phone:		☐ Work Phone:	
☐ Cell Phone:		☐ Cell Phone:	
☐ E mail:		□ E mail:	
☐ They will call again		☐ They will call again	
From:		From:	
Date:	Time:	Date:	Time:
Priority: ☐ High ☐ Normal ☐ Low		Priority: ☐ High ☐ Normal ☐ Low	
Mr / Mrs		Mr / Mrs	
☐ Called for you	☐ Returned your call	☐ Called for you	☐ R eturned your call
☐ Stopped in to see you		☐ Stopped in to see you	
Message		Message	
continued on back		continued on back	
Contact Information		Contact Information	
☐ Work Phone:		☐ Work Phone:	
☐ Cell Phone:		☐ Cell Phone:	
□ E mail:		□ E mail:	
Liliali.		□ E mail:	