

NAME *Robert Wilson*

DATE *23/9/98*

HANDBAG

PURSE *with change*

WALLETT

PENSION BOOK

JEWELLERY

RINGS

WATCH *broken metal Strap*

TEETH *top set only*

GLASSES *metal framed bifocals - on person*

HEARING AID *has one at home*

DISCLAIMER NOTICES SHOWN TO PATIENT AND RELATIVES YES/NO

PATIENT ASKED IF WOULD LIKE TO PUT VALUABLES IN SAFE YES/NO

VALUABLES FORM NO.

SIGNATURE: Code A Code A