



JG

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2/4
Waddy
9/4*

TELEPHONE: 38 6203
After hours 38 6205

SOCIAL WELFARE DEPARTMENT
FAMILY WELFARE DIVISION

"Turana,"
203 Park Street West,
Parkville, N. 2.

196

835/2 .

O/C CHILD CARE
For ATTACHMENT ONLY

Name *HODGES, Phillip* Date of Birth *X [REDACTED] 54 X*

Received from Turana the care and custody of the above-named Ward of the Family Welfare Branch.

Date *12. 4. 65* Signature *[Handwritten Signature]*
Address *Bayswater Boys Home*
Date *12/4/65*

To Bayswater Boys Home No 2

X Mr Bailey X