Southern Saskatchewan Area Service Committee

Group Service Representative (GSR) Report

Date: _____

Group Name: _____

Group Meeting Date(s): _____

Group Meeting Location: _____

GSR Name: _____

GSR Email: _____ GSR Phone: _____

Alt GSR Name: _____

Alt GSR Email: _____ Alt GSR Phone: _____

Avg. Weekly Attendance: _____

Avg. Newcomers/Meeting _____

Avg 7th Tradition/Meeting: $ _____ Area Donation: $ _____

Group Report (Comments, Concerns, Special Needs, etc.):

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