WTASC GSR REPORT FORM

DATE:_____**GROUP NAME**:_____

GSR/ALT. GSR:_____

DIFFERENT CONTACT INFO THAN LAST MONTH?

_____ Yes (continue on) **_____ No (skip to REPORT)**

SEND MINUTES TO: EMAIL REGULAR MAIL (circle one & only fill out that section)

NEW EMAIL:_____

NEW MAILING ADDRESS:_____

_____

REPORT: (*Please include any positive experiences, problems, average attendance, newcomers, group updates/changes, etc.)*

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UPCOMING BIRTHDAYS/SPECIAL EVENTS:

Date of event:	**Birthday or Special Event (Please include # of years for birthdays)**:

LITERATURE ORDER:_____**DONATION TO WTASC**:_____**TOTAL**:_____