

GSR REPORT TO AREA

Group Name: _____ Month: _____

Secretary: _____ Treasurer: _____ G.S.R.: _____

Alternate G.S.R.: _____ G.S.R. Telephone #: _____

Approx. Attendance Per Meeting: _____ A.S.C. Donation: _____

Group Business/Problems (in relation to Area):

Comments/Footnotes: