GROUP SERVICE No. DELEGATE AREA No.		STATUS: DISTRICT No.	No. OF MEMBERS:			Ja Date: January 01, 2022
GROUP NAME:			GROUP	NAM	E:	
Meeting Location:			Meeting	Locatio	on:	
Street Address:			Street A	ddress:		
City/State/Zip:			City/State/Zip:			
GENERAL SERVICE RE	PRESENTATIVE (G.S.R.)		GENERA	L SERV	ICE REPRESENTATIV	/E (G.S.R.)
lame:			Name:			
treet Address:			Street Address:			
City/State/Zip:			City/State/Zip:			
Telephone:			Telepho	ne:		
E-mail:			E-mail:			
					П	П
ALTERNATE G.S.R. or N	MAIL CONTACT				ctory? Yes No S.R. pr MAIL CON	ITACT ase check one
Name:			Name:			
Street Address:			Street A	ddress:		
ity/State/Zip:		City/Sta	te/Zip:			
Telephone:			Telepho			
E-mail:			E-mail:			
			Meeting	s:	(see Changir	ng Meeting Information below)
Meetings:			Day	O/C	Additional Informatio	n
Sun						
Mon						
Tue						
Wed						
Thu						
Fri						
Sat						
column is the day of		etc.). The O/C colum	nn is O for c	pen me	eeting; C for closed.	n "New Information." The Day The Additional Information
Information" and fill	I meetings per day of the win the grid under "New Infosting meeting; simply write	rmation". If you want	to ADD and	other m	neeting on a day whi	the meeting under "Old ch already has a meeting, <i>do</i>
		WAYS TO RETUR	RN THIS FO	ORM		
Postal Mail to:	Area 46 Registrar	-or-				Scan and E-mail:
	c/o Gary Jaramillo 823 Sundbird Ct. S.W. Albuquerque, NM 8712	1				registrar@nm-aa.org