

Date _____

In the interest of time, please consider limiting your oral reports to activities, plans, announcements, financial condition, the problems and needs of your area, and any CHANGES in area servants or meeting places and times.

Area Name _____ City, State _____
 Facilitator _____ Co-facilitator _____
 Secretary _____ Treasurer _____
 Alternate Treasurer _____ RCM _____
 RCMA _____
 Subcommittee Reps _____

Mailing Address _____

Are there any changes in your meeting schedule? (circle) YES NO

Group	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

(Please include any business, speaker, or candlelight meetings, birthday nights, literature studies, etc)

Current Bank Balance _____ Prudent Reserve _____
 Monthly Expenses _____ Region Donation _____

Area Activities, Plans, Announcements

Problems / Needs in Your Area

Nominations for Vacant Regional Positions (save this for election part of meeting)

