

GSR /SUBCOMMITTEE MONTHLY REPORT

Group Name

Address

Day, Time, and Group Format

PARAGRAPH EXPLAINING HOW YOUR GROUP IS DOING:

Monthly Income _____

Monthly Expenses _____

Literature Purchase _____

Area Donation _____

Balance _____

GSR Name: _____

Alt. Name: _____

GSR Phone: _____

Alt. Phone: _____

GSR Address: _____

Alt Address: _____

GSR EMAIL: _____

ALT EMAIL _____

PLEASE BRING THIS WITH YOU TO THE NEXT AREA AND SUBMIT IT TO THE SECRETARY