



## North Central Wisconsin Area Service Committee Group Report

*Directions: Please fill out this form with your home group members at your home group business meeting. If no member from your homegroup can be present, a picture or scanned copy can be emailed to the Area Secretary at northcentralwina@gmail.com.*

**Group Name:** \_\_\_\_\_

**GSR / GSRA / Rep (circle one) Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Meeting Day:** \_\_\_\_\_ **Meeting Time:** \_\_\_\_\_

**Meeting City:** \_\_\_\_\_ **Meeting Location:** \_\_\_\_\_

**Meeting Format:** \_\_\_\_\_

**Average Attendance #:** \_\_\_\_\_ **Meeting Support (circle):** Suffering / Fair / Good/ Excellent

**Literature Order:** \$ \_\_\_\_\_ **Area Donation:** \$ \_\_\_\_\_

**Trusted Servants Needed:** Yes / No If yes, what is open? \_\_\_\_\_

\_\_\_\_\_

**Topics or Challenges to Discuss:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Upcoming Activities:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Additional Info to Report:** \_\_\_\_\_

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