

TO MAKE **INDIVIDUAL CONTRIBUTIONS TO THE
OKLAHOMA GRATITUDE PLAN** - AS WELL AS TO MAKE
REGULAR GROUP CONTRIBUTIONS TO:

Oklahoma STATE Committee

(also known as "Area 57" or "the State AA Office")

OKLAHOMA STATE GRATITUDE PLAN

THIS IS MY CONTRIBUTION IN THE AMOUNT OF \$ _____
showing Gratitude for my _____ years of sobriety.

Please make checks payable to: "Oklahoma State Committee"

Contributor Name _____ Sobriety Date (Optional) _____

Address _____

City _____ State _____ Zip _____ Phone _____

E-mail address (optional) _____

It is OK to publish my first name, last initial, home group & yrs of sobriety in Area 57 Newsletter: Yes ___ No ___

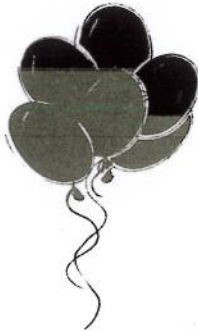
*Do you want this gratitude contribution credited to your group? Yes ___ No ___

Group Name * _____ Group Service # (optional) _____

This is a group contribution of \$ _____

SUGGESTED GRATITUDE CONTRIBUTION: \$1.00 for each year of sobriety

PO Box 18415
Oklahoma City, OK 73154



Oklahoma **State** Committee
Post Office Box 18415
Oklahoma City, OK 73154-0415