

ALCOHOLICS ANONYMOUS **GROUP** INFORMATION CHANGE FORM

Please fill this out after Group elections - AND - Whenever group information changes. Thank you!

GSO Group Service No _____ (Optional) Estimated Number of Members Claiming This Group as Their Home Group: _____

District Number: 10 20 30 40 50 60 70 80 90 (Circle one)

GSO Area Number: 57 (State of OK)

OLD GROUP INFORMATION

Group Name _____
 Old Meeting Place _____
 Old Meeting Address _____
 City _____ State _____ Zip _____

NEW GROUP INFORMATION

New Meeting Place _____
 New Meeting Address _____
 City _____ State _____ Zip _____

GROUP'S MEETING SCHEDULE

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

O= Open C = Closed S = Smoking NS = Non Smoking BBS = Big Book Study SS = Step Study T = Topic , etc.

CURRENT GROUP CONTACT INFORMATION

* (Please check ONLY one) Our Group Designates ALL MAIL from GSO go to: * Primary Contact _____ * Secondary Contact _____

<p>1) Group's - Primary Contact (PriCont)</p> <p>Is PriCont Your GSR (General Service Rep.) ? Yes ___ No ___</p> <p>New PriCont/GSR Name _____</p> <p style="padding-left: 20px;">Name of person being replaced _____</p> <p>New person's Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Home Phone (___) _____ Cell (___) _____</p> <p>E-Mail Address _____</p>	<p>2) Group's - Secondary Group Contact (SecCont)</p> <p>Is this SecCont the group's Alt GSR? Yes ___ No ___</p> <p>New SecCont/Alt. GSR's Name _____</p> <p style="padding-left: 20px;">Name of person being replaced _____</p> <p>New person's Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Home Phone (___) _____ Cell (___) _____</p> <p>E-Mail Address _____</p>
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Other Group Contacts:

3) Treasurer _____ (___) _____

Secretary _____ (___) _____

Mail To:

4) Oklahoma State Committee Office
 PO Box 18415, OKC, OK 73154

Submitted by: _____
 Date Submitted: _____

Revised 8/15/2024

Contact Area Secretary For Questions:

secretary@aaoklahoma.org
 (405) 842-1200