

Washington Northern Idaho Region of Narcotics Anonymous

Report Form for Regional Committee Members (RCM's)

Date _____

Report from (Area): _____ # Groups _____ #Meetings _____

of H&I Presentations (Weekly) _____ (Bi-Weekly) _____ (Monthly) _____

RCM

Regional Donation _____

Name _____

Mailing Address _____

Home Phone () _____

Cell Phone () _____

E-Mail Address _____

RCM2

Name _____

Mailing Address _____

Home Phone () _____

Cell Phone () _____

E-Mail Address _____

Report on Subcommittee Activities: (H&I, PI, Activities, Phonenumber, Literature, etc.)

(Continue on back of form if needed)

Upcoming Events:

Area Concerns:

Does your Area have any ideas or topics for "Open Sharing?"

(To save time, rather than reading various Chairs info, just list them on back so they appear in minutes)

Area Officers with phone #'s, e-mail & addresses

Area Chair

Name: _____ Phone Number () _____
E-mail Contact _____

Area Vice Chair

Name: _____ Phone Number () _____
E-mail Contact _____

H&I Chair

Name: _____ Phone Number () _____
E-mail Contact _____

PL Chair

Name: _____ Phone Number () _____
E-mail Contact _____

Activities Chair

Name: _____ Phone Number () _____
E-mail Contact _____

Phoneline Chair

Name: _____ Phone Number () _____
E-mail Contact _____

Literature Chair

Name: _____ Phone Number () _____
E-mail Contact _____

Other

(Designate committee name) _____

Name: _____ Phone Number () _____
E-mail Contact _____

(Designate committee name) _____

Name: _____ Phone Number () _____
E-mail Contact _____

(Designate committee name) _____

Name: _____ Phone Number () _____
E-mail Contact _____

(CONTINUED FROM FRONT)