

GROUP HISTORY FORM

Please return to Area Archives Coordinator
373 Stotler Road
Pittsburgh, PA 15235

Name of Group/District: _____

Current address: _____

Date of first meeting: _____

What was the original format of meeting when it started? : _____

Has the format of your meeting changed? : _____

Who were your original home group member's? _____

Who were your first home group's officers? : _____

Is your current meeting place the same? : _____

What is the day & time of your meeting? : _____

What is your groups' average attendance? : _____

Any particular reason why your meeting was formed? : _____

Is there any interesting information about the group that you would like to share with future generations of AA's? : _____

Name(s) of person(s) recording this history: _____

Date of this recording: _____