Send to:
Western Mass General Service, Area 31
Attn: Archives
P.O. Box 6818
Holyoke, MA 01041

Prepared by: _____

Date: _____

G.S.O. Group #: _____

Group History

Name of Group: _____

Previous Name: _____

Date Founded: _____ Founder/s: _____

Early Members: _____

_____

Place of first meeting: _____ Time: _____

Town or City : _____

Present Membership #: _____ Average # of people per meeting: _____

Did group move? _____ When? _____
_____

Where? _____

GROUP HISTORY: (For example – tell us how your group celebrates anniversaries, special meetings, outside speakers, notes about founders, and other interesting stories about your group, etc. A photo of the building where your meeting is held.)

_____

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