**GSR Report to Service Body Template**

Date:

Phone:

Name:

Email:

Mailing address:

Service position:

Group name:

Other group contact (GSR alternate, secretary, etc.)

Day(s) and Time(s) of meeting(s) (if changed from current meeting list):

Address and details of meeting(s) (if changed from current meeting list):

Is your meeting Open or Closed? Wheelchair Accessible? Yes No Child friendly? Yes No

Group service vacancies:

Questions or challenges from your group:

Other comments:

**Please fill out this form and hand it to the appropriate trusted servant**