



REGION 7 GROUP & INTERGROUP CONTRIBUTION FORM

Date: _____

Dear _____

Thank you for your contribution of _____ to Region 7. Your contribution will allow the Region to continue its efforts to carry the message of Recovery to those who still suffer, by supporting the Intergroups, and Loner Groups within the Region.

I'm sending you this form and a return envelope so that you can make future contributions easily. As you know, Region is establishing a prudent reserve, please help us reach our goal by making regular monthly contributions.

Thank you for your support and fellowship.

I look forward to communicating with you regularly, and I appreciate your service in OA.

Make checks payable to: Region 7, Inc.
Address: 3500 South DuPont Highway
 Dover, DE 19901-6011

Treasurer:
Glenn Kurowski
2239 Esbenshade Rd.
York, Pa. 17408
717-767-1135

We appreciate your self-addressed stamped envelope.

Group Name _____ Group # _____

Group Address _____ Amount _____

City, State _____ Date _____

If this is not your correct name & address, please correct: Fill in address for:

Name: _____

Secretary

Address: _____

Treasurer

City, State & Zip: _____

Other