

REMOTE COMMUNITIES CHAIR CANDIDATE'S RESUME

NAME:

ADDRESS:

DATE OF LAST DRINK:

HAVE YOU SERVED IN ANY OF THE FOLLOWING AA SERVICE CAPACITIES?

PLEASE INDICATE TIME AND PERIOD

AREA COMMITTEE:

GENERAL SERVICE DELEGATE:

ALTERNATE GENERAL SERVICE DELEGATE:

CHAIRPERSON:

SECRETARY:

TREASURER:

DISTRICT:

GROUP:

INTERGROUP-CENTRAL SERVICE OFFICE:

COMMITTEE CHAIRPERSON:

COMMITTEE SECRETARY:

COMMITTEE TREASURER:

GROUP REPRESENTATIVE:

INSTITUTION COMMITTEE:

PUBLIC INFORMATION:

HOST COMMITTEES:

OTHER SERVICE ACTIVITIES:

