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## Seventh Tradition Contribution Form – 2022 Special Appeal #3

Please mail this form with your contribution.

<u>Donatio</u>	n from: 🗆 Local Group 🗀 Local Intergroup 🗀 Individual
Group Identification Number:	Date:
Mtg Day and Time:	
	Mtg /Event Location:
Mtg /Event City, State, Zip:	
Amount of Contribution: \$	
Acknowledgement Recip	pient Information: Below, please list the name and contact information
for the person w	no is to receive a receipt for this Seventh Tradition Contribution.
Acknowledgement recipient:	Service Position:
Recipient's Mailing Address:	
	State:Zip:
Telephone Numbers - Day:	Night:
F-mail Address:	