☐ KARE
☐ Probation

Monthly Meeting Documentation

Participant Name: _____
License Number: _____ Case Number: _____

Meeting documentation for the month of _____ 20____

Instructions: Please document your attendance at 12-step meetings by completing this form for each meeting attended and mail the completed form to the Compliance Section, Consumer Protection Branch, by the tenth (10th) of each month.

Date	Group	Group Leader Initials

Summary of Sponsor Contact:

I certify that I have a minimum of twice weekly (2 times per week) contact with the above named participant. Contact is primarily (please check all that apply) ☐ face to face, ☐ via telephone, or ☐ at 12-step meetings.

Comments/Concerns/Progress in step-work: _____
_____
_____
_____

_____ _____
Sponsor's Signature (first name, last initial) Sponsor's Telephone Number (if permissible)

3/2/2009
jmc