 **Maryland General Service (MGS) Area 29**

**Love**

**And**

**Service**

**Treatment Facilities Committee**

**Local/Regional Quarterly Report**

**(Please type or legibly print) Date \_**     **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Submitted by**      **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Region**      **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Local Area**      **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(May be a District, County Town etc. depending on your locality)**

|  |  |
| --- | --- |
| **PRESENTATIONS TO AA COMMUNITY** | Count (How many) |
| Presentations at AA meetings |       |
| Regional events*(Training seminar, tables at local events Workshops)* |       |
| **PRESENTATIONS @ TREATMENT FACILITIES (Identify Facility below)** |  |
| BTG to newcomers  |       |
| BTG to Facility Employee  |       |
| **TEMPORARY CONTACTS**  |  |
| Love and Service Forms Completed |       |
| Registered (Forwarded to Treatment Facilities Chair) |       |
| Not Registered (Retained because person did not provide necessary information)  |       |
| **TEMPORARY CONTACT REQUESTS** |  |
| Newcomers connected with AA Community |       |
| Newcomers not connected (Changed their mind and did not utilize TC) |       |
| Newcomers referred to another fellowship |       |
| **TREATMENT FACILITIES**  |  |
| Number in local area (estimate) |       |
| Number with AA meetings (Provide separate list) |       |
| Number supported by BTG |       |
| **BTG HOME GROUPS** |  |
| Number in local area |       |
| Number BTG Ready |       |
| **RECOVERY HOUSES** |  |
| Number in local area  |       |
| Number w BTG Contacts |       |
| **AA GROUPS** |  |
| Groups in the local area |       |
| **Recommendation for Guidelines (please attach)** |  |

Plans, goals or comments:

Suggestions or concerns:

Support needed to get BTG established in you locality:

Please Note: Additional documents can be submitted as attachments

BTG 17 Maryland General Service TFC BTG Coordinator Quarterly Report - 101213 JDR