

**Hawaii Area 17**  
Alcoholics Anonymous General Service  
***District Report***

Date:

District:

Person reporting and position: (First Name, Last Initial)

*Suggestions: Start with how your district is carrying the message through such things as upcoming workshop, district events, goals carried out, etc. Your report will be limited to 2 minutes. Please provide a copy via email or hard copy to our area secretary.*

**What District \_\_\_\_\_ did to carry the message of Alcoholics Anonymous:**

**Other Topics:**