

KANSAS STATE OXFORD HOUSES

CHAPTER REPORT SUMMARY

Complete and bring to the State meeting

Months of _____ & _____

Date ___/___/___

Chapter # _____ Number of houses _____ Number of beds _____

Checking account balance \$ _____

Savings account balance \$ _____

Number of vacancies _____

Number of relapses _____

Chapter dues to State paid; Yes ___ No ___

Total amount of contribution paid to Oxford House Inc \$ _____

Comments:

(How is your Chapter doing? AA-NA meeting attendance, conflicts, social events, etc....)

Signature _____ Title _____