

## DISTRICT INFORMATION CHANGE FORM

*Items listed as "Required" are required for data entry into GSO's Fellowship New Vision (FNV) Database.  
In most cases, entering this information in FNV will cause a position-specific information packet to be sent from GSO.  
It is not necessary to include GSRs and their Alternates because changes to their information are reported on Group Change Forms.*

<b>Delegate Area: 20 District Number:</b>	<b>Service Rotation Date:</b>	<b>Submitter:</b>		<b>Submission Date:</b>
<b>District Position (Required)</b>	<b>Name (Required)</b>	<b>Complete Mailing Address (Required)</b>	<b>Telephone(s)</b>	<b>e-mail Address(es)</b>
District Committee Member				
District Committee Member - Alternate				
Treasurer				
Treasurer – Alternate				
Secretary				
Secretary - Alternate				
Answering Service Comm Chair				
Answering Service Comm Chair - Alternate				
Archives Comm Chair				
Archives Comm Chair - Alternate				

**Submit completed form to Area 20 Registrar:**

niaregistrar@gmail.com  
PO Box 635, Yorkville, IL 60560

*A Microsoft Word version of this form is available online at: <http://www.aa-nia.org/info.htm>*

## DISTRICT INFORMATION CHANGE FORM

*Items listed as "Required" are required for data entry into GSO's Fellowship New Vision (FNV) Database.*

*In most cases, entering this information in FNV will cause a position-specific information packet to be sent from GSO.*

*It is not necessary to include GSRs and their Alternates because changes to their information are reported on Group Change Forms.*

<b>Delegate Area: 20 District Number:</b>	<b>Service Rotation Date:</b>	<b>Submitter:</b>		<b>Submission Date:</b>
<b>District Position <i>(Required)</i></b>	<b>Name <i>(Required)</i></b>	<b>Complete Mailing Address <i>(Required)</i></b>	<b>Telephone(s)</b>	<b>e-mail Address(es)</b>
Cooperation with the Professional Community Comm Chair				
Cooperation with the Professional Community Comm Chair - Alternate				
Correctional Facilities Comm Chair				
Correctional Facilities Comm Chair - Alternate				
Grapevine Comm Chair				
Grapevine Comm Chair - Alternate				
Literature Comm Chair				
Literature Comm Chair - Alternate				
Public Information Comm Chair				
Public Information Comm Chair - Alternate				

**Submit completed form to Area 20 Registrar:**

niaregistrar@gmail.com  
PO Box 635, Yorkville, IL 60560

*A Microsoft Word version of this form is available online at: <http://www.aa-nia.org/info.htm>*

## DISTRICT INFORMATION CHANGE FORM

*Items listed as "Required" are required for data entry into GSO's Fellowship New Vision (FNV) Database.*

*In most cases, entering this information in FNV will cause a position-specific information packet to be sent from GSO.*

*It is not necessary to include GSRs and their Alternates because changes to their information are reported on Group Change Forms.*

<b>Delegate Area: 20 District Number:</b>	<b>Service Rotation Date:</b>	<b>Submitter:</b>		<b>Submission Date:</b>
<b>District Position <i>(Required)</i></b>	<b>Name <i>(Required)</i></b>	<b>Complete Mailing Address <i>(Required)</i></b>	<b>Telephone(s)</b>	<b>e-mail Address(es)</b>
Special Needs Comm Chair				
Special Needs Comm Chair – Alternate				
Treatment Facilities Comm Chair				
Treatment Facilities Comm Chair - Alternate				
Other:				
Other:				
Other:				
Other:				
Other:				
Other:				

**Submit completed form to Area 20 Registrar:**

niaregistrar@gmail.com  
PO Box 635, Yorkville, IL 60560

*A Microsoft Word version of this form is available online at: <http://www.aa-nia.org/info.htm>*



## DISTRICT INFORMATION CHANGE FORM

*Items listed as "Required" are required for data entry into GSO's Fellowship New Vision (FNV) Database.*

*In most cases, entering this information in FNV will cause a position-specific information packet to be sent from GSO.*

*It is not necessary to include GSRs and their Alternates because changes to their information are reported on Group Change Forms.*

<b>Delegate Area: 20 District Number:</b>	<b>Service Rotation Date:</b>	<b>Submitter:</b>		<b>Submission Date:</b>
<b>District Position <i>(Required)</i></b>	<b>Name <i>(Required)</i></b>	<b>Complete Mailing Address <i>(Required)</i></b>	<b>Telephone(s)</b>	<b>e-mail Address(es)</b>
Other:				
Other:				
Other:				

**Submit completed form to Area 20 Registrar:**

niaregistrar@gmail.com  
PO Box 635, Yorkville, IL 60560

*A Microsoft Word version of this form is available online at: <http://www.aa-nia.org/info.htm>*