

# 12 Step Attendance Sheet

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

Date	Group Name/Time/Location	Facilitator's Official Signature
(Week 1)		<div style="border: 1px solid black; display: inline-block; padding: 2px 5px;">*Required</div>
_____	_____	* _____
_____	_____	* _____
_____	_____	_____
_____	_____	_____
(Week 2)		
_____	_____	* _____
_____	_____	* _____
_____	_____	_____
_____	_____	_____
(Week 3)		
_____	_____	* _____
_____	_____	* _____
_____	_____	_____
_____	_____	_____
(Week 4)		
_____	_____	* _____
_____	_____	* _____
_____	_____	_____
_____	_____	_____
(Week 5)		
_____	_____	* _____
_____	_____	* _____
_____	_____	_____
_____	_____	_____

Please submit the **FULL** 12 Step Attendance Sheet with **OFFICIAL** facilitator signatures on time to be received by HAPN/KNAP by the **1st of each month**. Scan & E-mail the whole sheet to [compliance@hapn.org](mailto:compliance@hapn.org) using free app "CamScanner"; Fax to (913) 236-7779; Documentation should be complete, entirely legible and faxable to the board if need be. Call with questions (913) 236-7575.

**Altered or fraudulent forms will NOT be accepted and subject to further inspection.**