**Contact Sheet**

Participation in this list is entirely voluntary. The list will go around the room at least twice. The first time, if you wish, please add your name and telephone number, and check off the services you are in need of, and any you would like to give. The second time, feel free to copy the contact information of other people on the list. At the end of the meeting, the list will be destroyed to preserve everyone’s anonymity.

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| **Requirements for *giving* service (note: anyone can *receive* service!)**   * **Sponsorship: people who have worked the 12 Steps of Underearners Anonymous** * **Action Meetings: people may give action meetings after 30 days in the program and receiving two action meetings** * **Calls & action partners: honesty, openness and willingness** | | **Need To Receive** | | | | **Can Give** | | | |
| **Calls** | **Action Partner** | **Action Meetings** | **Sponsorship** | **Calls** | **Action Partner** | **Action Meetings** | **Sponsorship** |
| **First Name,**  **Last Initial** | **Telephone Number**  **(or Email)** |  |  |  |  |  |  |  |  |
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