

AREA 10 PROCEDURE / CHECKLIST FOR AN EXISTING GROUP TO TRANSFER TO THE GLOBAL ELECTRONIC AREA

COMPLETION OF THIS AREA PROCEDURE / CHECKLIST IS DEEMED TO BE AREA APPROVAL

Group Name _____

Group Number _____ District _____ Date: _____

	Action	Completed by	Date Completed & Initials of Person Completing
<input type="checkbox"/>	1. A physical group (physical location, hybrid or temporary electronic) needs to change its meeting location to electronic with Area 10 before it can request a transfer to the Global Electronic Area (GEA).	Group	
<input type="checkbox"/>	2. The group has taken a group conscience to transfer to the Global Electronic Area. (For reference, use the Service Manual, p. 49)	Group	
<input type="checkbox"/>	3. The group has gone on-line to https://al-anon.org/for-members/group-resources/group-records/electronic-group-area-transfer-request/ , read the instructions and completed the Electronic Group Area Transfer request form to transfer to the Global Electronic Area.	Group	
<input type="checkbox"/>	4. The group sent this checklist to the District (DR or designee).	Group	
<input type="checkbox"/>	5. The current District has approved. This allows the District to consider and plan for how the transfer may affect the district as a whole.	District	
<input type="checkbox"/>	6. The District sends this checklist to the Area Group Records Coordinator. Grouprecords@afgfls.com .	District	
<input type="checkbox"/>	7. The Area Group Records Coordinator forwards a copy of the Checklist to advise the Area Delegate.	Area Group Records	
<input type="checkbox"/>	8. The Area Delegate advises WSO of the Area approval.	Area Delegate	
<input type="checkbox"/>	9. The completed checklist is maintained by the Area Group Records Coordinator.	Area Group Records	
<input type="checkbox"/>	10. Group Records informs Area Web Coordinator.	Area Group Records	
<input type="checkbox"/>	11. Area Web Coordinator removes the group from Area Website.	Area Web Coordinator	

Name of Group Representative or Designee _____

Phone _____ Email _____

Name of District Representative or Designee _____

Phone _____ Email _____

Policy and Procedure Committee

Created 2/12/2024 AWSC approved N/A
 Pen & Ink Revision 12/7/2024 (completion date added)

Assembly Modified & Approved 6/1/2024, motion # 7
 WSO approved N/A