

Faribault, Martin and Jackson Multi-County ASAC Participant Handbook



This Book Belongs to: _____

10/2014

If I am in crisis or feel like I'm going to use I will call

Sponsor:

Treatment: Fountain Centers 507-238-4382

WarmLine: 1-877-399-3040

Other recovery supports:

Name:	Phone:	
Name:	Phone:	
Name:	Phone:	
Name:	Phone:	

Drug Court Directory

Coordinator	507-238-3226/507-402-9375
Coordinator FAX	507-238-1913
Probation Agent	507-399-7107/507-317-7136
Treatment	507-238-4382
Human Services	
Law Enforcement	

Welcome to Drug Court

FMJ Multi-County Adult Substance Abuse Court (sometimes called ASAC or drug court) is designed to provide the Court with a sentencing alternative for adults who have serious problems with addiction and are involved with the legal system. ASAC is a highly structured program that combines intensive probation supervision and chemical dependency treatment and fosters regular communication between participants and the Court.

This program is collaboration between the Fifth Judicial District, County Attorney's Offices, Public Defender's Office, Human Services, law enforcement, probation and treatment.

We hope to see positive changes in your life as you progress through the program. We are committed to providing you with support and encouragement as you find your way to a clean and sober life. The end result is a greater likelihood that you will remain sober, stay out of jail and become a contributing member of society.

Do Not Lose This Book!

You must take this book with you to all probation appointments, court dates, and NA/AA meetings.

We encourage you to share this handbook with your family and friends for their support and encouragement.

Weekly Staffing Tuesdays 11:30 a.m.

Before court each week the judge is given a progress report from your probation agent and treatment provider. The report covers drug test results, attendance, participation and cooperation in treatment, employment or other requirements that were imposed.

Drug Court Hearings Tuesdays 12:30 p.m.

You are required to appear in court on a regular basis, how often depends primarily on your phase. Failure to appear will result in a warrant for your arrest and detention in jail until you can appear in court.

The judge may ask questions and discuss with you any problems that you are having. If you are doing well, you will be rewarded with an item from the small fishbowl. At times you may get a name slip to put in the large fish bowl for a chance at a gift card. You will also periodically receive vouchers for money off your fees for progress in the program. If your progress report shows you are not doing well, the judge will discuss this with you and determine future action, which could include a sanction to help you remember your goals in this program, anything from increased program requirements to jail.

Items to be submitted by NOON for each Court appearance:

- Judge's Journal
- Participant's Weekly Progress Report
- Participant Handbook with AA/NA attendance
- Other assignments as ordered

Please drop these off in the jury room on the 3rd floor of the Martin County Courthouse before your court appearance. Failure to do so will result in a sanction.

Non-Discrimination Policy

It is the policy of the Faribault, Martin and Jackson Multi-County Adult Substance Abuse Court that no person will be discriminated against on the basis of: race, color, creed, religion, national origin, gender and marital status, status with regard to public assistance, disability, sexual orientation or age.

Confidentiality

State and federal law requires that your identity and privacy be protected. In response to these regulations, Drug Court personnel, case managers and treatment providers have developed policies and procedures to help protect your privacy. You signed a consent to release information during orientation. This disclosure is for the sole purpose of hearings and reports concerning your specific Drug Court case.

Grievance Policy

The following procedure is available if you wish to seek review of any conflict existing between you and a member of the ASAC team. The only disputes to which these procedures shall not apply are those that might result in your suspension or dismissal from the ASAC program.

A grievance is any form of unfair treatment, harassment, bullying, or disrespect toward the ASAC participant by an ASAC team member.

You have the right to file a grievance if you believe you have been treated unfairly by an ASAC team member. Contact the ASAC Coordinator, Miranda Rosa, at 507-402-9375, 201 Lake Ave. Suite 243, Fairmont, MN 56031.

After being notified of the complaint, the ASAC Coordinator will meet with you to hear any information regarding the conflict. All parties involved in the conflict will be questioned and given the opportunity to present their respective arguments.

If your grievance involves the ASAC Coordinator, you may give your complaint to either of the following:

Brenda Pautsch Fifth Judicial District Drug Court Manager 11 Civic Center Plaza Suite 205 Mankato, MN 56001 507-344-4947 Hon. Bradley C. Walker Chief Judge Fifth Judicial District Blue Earth County Court Administration 401 Carver Road PO Box 347 Mankato MN 56001 507-304-4650

Courtroom Rules

- > Punctuality is a must. You will be on time for all court appearances.
- Do not speak when the Court is speaking.
- You will stand when addressing the Court or when addressed by the Court.
- You shall not approach the bench unless permission is obtained or if the Court invites the participant to do so.
- > You shall not sit on the counsel table in the courtroom.
- It is forbidden to be under the influence of any intoxicating beverage and/or illicit drug when in court.
- All weapons are banned from the courtroom.
- > All cell phones or pagers must be turned off.

Court Dress Code

Tops:

- Must cover shoulders. Halter tops, tube tops and spaghetti straps are not allowed.
- Men can not wear muscle shirts or undershirts.
- Must cover waist of the bottom apparel. The abdominal area shall not be exposed. There can be no gap, front or back, between the pants and top.
- Cannot be transparent.

Bottoms:

- Must fit and be worn at the waist (i.e., sagging is not permitted.)
- Must be at or below the knee. No SHORT shorts or miniskirts.

Shoes:

- Footwear must be worn at all times.
- ➢ No flip flops.
- > No bedroom slippers.

Hats and Headwear:

- Baseball hats, stocking caps and knit caps must not be worn in the courtroom.
- Sunglasses may not be worn unless the individual suffers from a visual disability.

General Prohibitions:

Clothing must not display inappropriate writing or pictures, including references to violence, alcohol, drugs or sexual matter.

Participation Agreement

- 1. I agree to participate in alcohol and/or other drug treatment as directed by the court, including self-help meetings (such as AA or NA), as set forth in my treatment plan and that I will provide verification of attendance. I understand that compliance with treatment recommendations is mandatory.
- 2. I agree to cooperate with and comply with the directives of the Drug Court Program, probation staff and treatment providers.
- 3. I agree to attend all treatment meetings, court dates and other scheduled appointments and I will be on time. If I am unable to attend I will call the provider I am seeing and my probation agent at least two hours in advance.
- 4. I understand that failure to appear for a court date or any other breach of this agreement will result in the issuance of a bench warrant. I am responsible for transportation in order to fulfill the terms of the Drug Court Program.
- 5. I agree to sign any and all consent forms waiving confidentiality of any medical, mental health treatment or social service records. I further agree to sign any and all releases which will allow the Drug Court team to review diagnostic and treatment information. I understand that while I am a drug court participant such consents are irrevocable.
- 6. I agree that in order to achieve and maintain sobriety I need to have a permanent and stable residence that supports a sober lifestyle. I shall notify the Drug Court Probation Agent before I change my address or phone number.
- 7. I agree to remain in my residence during the hours specified in my case plan. In the event of an emergency I will notify my Probation Agent immediately or as soon as possible.
- 8. I understand that I shall not use, possess or associate with any person(s) who use or possess any controlled substance or illegal drugs.
- 9. I will not have in my possession or under my control any paraphernalia or drugs not prescribed to me by a licensed physician.
- 10.1 will not use any prescribed or over the counter mood-altering substance except as prescribed to me by a licensed physician with the full knowledge of my addiction and participation in drug court.
- 11.1 will not distribute nor sell any legal or illegal mood-altering substances.

- 12.1 will not attend any program under the influence of alcohol or any illicit drug or legal drug not prescribed to me.
- 13.1 agree that I will not use or possess alcoholic beverages nor enter establishments that derive their principal income from the sale of alcoholic beverages.
- 14.I agree to abide by the FMJ ASAC Medication Contract.
- 15.I agree to abide by the FMJ ASAC Drug Testing Policy.
- 16.I understand that I shall not use or possess a firearm nor enter an establishment or home where they would be available to me. Further, I understand I shall not attend any program in possession of a weapon of any form, firearms, knives, box cutters, etc.
- 17.I agree to participate in the Drug Court Program until successfully discharged from all phases of the program including in-patient and out-patient treatment.
- 18.1 agree to participate in any educational, medical, treatment or rehabilitation program ordered by the Drug Court to help maintain my sobriety and maintain a law-abiding lifestyle.
- 19.I agree to perform forty (40) hours of structured activity per week, such as actively seeking or maintaining employment, attending school/job training, performing unpaid alternative community work assignments or any other activity approved by my Drug Court Probation Agent. I will provide verification of 40 hours of activity per week.
- 20.I recognize that by Phase 3 I am expected to have full-time employment, full-time school, or a combination of the two, including work on a GED if appropriate. I will provide proof of employment or employment search to my probation agent. I will notify my probation agent within 48 hours of any new employment or changes in employment.
- 21.I agree to abide by the rules and regulations of probation supervision and any special conditions ordered by the court including community work service or STS.
- 22.1 will pay any fees or fines as directed by the court and will have an opportunity to "earn down" some fees for excellent program participation.
- 23.I agree to inform the Drug Court Probation Agent and treatment provider of any new arrests, summons or any other situation that may impact my probation. I understand any arrest or contact with law enforcement must be reported to my probation agent within 24 hours.

- 24.I agree that I am subject at any time to a search conducted by a representative of the Corrections Department and/or Drug Court, which includes any law enforcement representative, without a warrant, of my person, place of residence, vehicle or other personal or real property.
- 25.I will make satisfactory progress in the program as measured by each phase's requirements.
- 26.I agree that my participation in the Drug Court Program shall be terminated if I fail to make satisfactory progress toward completion of the program.
- 27.I agree that my participation in the Drug Court Program may be terminated if I am rearrested, test positive for drugs or alcohol or fail to meet any of my court ordered obligations.
- 28.I understand that the Court can impose sanctions, including county jail time, rather than terminate my participation in the program. I understand that sanctions may be increased and may include termination from the program.
- 29.I understand that I have a right to an attorney during court proceedings which include plea, sentence and any violation which could lead to termination of participation in the Drug Court Program. If I am unable to afford an attorney I may be eligible for public defender representation. I further understand that if I have any questions concerning Drug Court I should discuss them with my attorney.
- 30.1 will not travel outside the Faribault, Martin and Jackson County area without first receiving permission from my Drug Court Probation Agent. Further, I understand that if I leave the state extradition proceedings may be initiated to return me to Minnesota from any jurisdiction in or outside of the United States. By signing this document, I agree to waive extradition and do waive extradition to return to Minnesota from any jurisdiction in or outside the United States of America.
- 31.I will not act as a confidential informant while I am a participant in FMJ's Adult Substance Abuse Court.
- 32.I have received a copy of the FMJ ASAC participant manual and have reviewed it with the ASAC Coordinator.

Medication Contract

- 1. I will inform all medical professionals that I am a drug court participant and not permitted to take any narcotic medication unless the prescribing medical professional makes the decision to prescribe such a medication to me with full knowledge of my addiction and participation in ASAC. This will be proven through use of the Medical Confirmation Form.
- 2. If a narcotic is prescribed, I will contact my probation agent immediately.
- 3. I understand I am responsible for informing and providing documentation of all prescription medications I am taking or may take. I am also responsible for notifying my Drug Court Probation Agent if there are any changes to any and all prescriptions.
- 4. I understand the ASAC reserves the right to limit me to seeing one primary medical professional.
- 5. I will fill prescriptions at one pharmacy of my choosing, _______unless an emergency were to arise and this pharmacy were not available to me. In that situation I will inform my probation agent by calling and leaving a message informing her of the situation.
- 6. I understand that I shall inform my Drug Court Probation Agent of any over-thecounter medications that I am using or may be using. The medications must be nonaddictive and not contain alcohol (i.e. mouthwash, cough syrup, etc.). I am responsible for verifying with a pharmacy or medical professional that these medications are non-addictive and do not contain alcohol.
- 7. If I am given a prescription and decide against taking it or do not take the entire amount prescribed, I will ask my probation agent how to destroy the remaining amount of the prescription.
- 8. If directed by your probation agent, treatment provider or court I will make my prescription available in order to count the number of pills from the date the prescription was filled.
- Once the prescription has expired or by the time all pills should have been used, none of the pills will be in my possession. A positive test after that time because I took "left over" medication will considered a positive test and appropriately sanctioned.

Medication: Points To Remember

Personal Responsibility

You and you alone are responsible for what goes in your body. Do not come to drug court with an explanation that illegal or prohibited drug use is anyone's fault but your own. You are responsible for that.

Other People's Medications

Never take medication that has been prescribed for someone else (your mother, brother, boyfriend, girlfriend, etc...). Using medication prescribed to another person is in violation of federal law and drug court rules.

When You Are Not Sure

When in doubt, DON'T TAKE IT. Ask your doctor, treatment provider, or drug court personnel. If you have any questions at all about any medication you are taking or are planning to take, contact a member of the FDTC team.

Read the Label

Read the label when you buy cough syrup, cold medicine, mouthwash or other over-the-counter liquids. MAKE SURE THEY DO NOT CONTAIN ALCOHOL. Listerine contains alcohol. Dayquil and Nyquil contain alcohol. There are over-the-counter products that do not contain alcohol.

Poppy Seeds

Never eat poppy seeds or "everything bagels" because they can give you a false positive for morphine. Don't even try to explain away a positive drug test by saying you ate poppy seeds. It will not work!

Hand Sanitizers

Hand sanitizers (such as Purell) and other antiseptic gels and foams used to disinfect hands contain up to 70% ethyl alcohol. Excessive, unnecessary or repeated use of these products could result in a positive urine test. Hand washing with soap and water are just as effective for killing germs.

Making Recovery More Difficult

Taking prohibited drugs can only make your recovery harder.

In Case of Emergency

Carry this notice in your wallet or purse so you can show it to any medical personnel in case of an emergency.

Program Phases

The program is divided into four phases. You must successfully complete all requirements in each phase before moving to the next phase.

Phase I-Choice

Objective: Begin abstinence and chemical dependency treatment; develop relapse trigger awareness and identify your support system. Typically 30 days.

Requirements

- Arrange intake for chemical dependency treatment and follow all recommendations of this provider.
- Complete mental health/trauma screening on ______ at _____ at Sioux Trails in Fairmont 507-238-8112. Follow recommendations.
- Attend weekly Drug Court Hearings.
- Attend sobriety support groups as set by treatment.
- Meet with probation agent at least twice per week.
- Adhere to house arrest/scheduled curfew (6 pm to 6 am).
- Complete prosocial activities as directed.
- > Full time school/employment or positive response to your goals.
- If driver's license is not valid, meet with coordinator to make a license reinstatement plan.
- Complete a minimum of three (3) drug tests per week.

Advancement Requirements

- No positive drug test results for 15 consecutive days prior to advancement.
- No unexcused absences for scheduled services for 15 consecutive days.
- Full time school/employment or positive response to education/vocational goals.
- Begin Primary Chemical Dependency Treatment

Phase II-Challenge

Objective: Continued abstinence, establishment of recovery and development of educational and/or vocational goals. Typical length is 5 to 6 months.

Requirements

- Attend and observe three out of four Drug Court Hearings per month as scheduled (excused from one hearing per month).
- Meet with probation agent at least once per week.
- > Follow all recommendations of C.D. treatment provider.
- Follow all recommendations of mental health provider, if applicable.
- > Attend sobriety support groups as set by treatment.
- Adhere to a less restrictive curfew (8 pm to 6 am).
- Complete pro-social activities as directed.
- Work towards full-time work, full-time school, or a combination of the two.
- > Make best effort for license reinstatement, if applicable.
- Complete minimum of two (2) drug tests per week.

Advancement Requirements

- No positive drug tests results for 90 consecutive days prior to advancement.
- No unexcused absences for services for 90 consecutive days prior to advancement.
- Progress shown towards license reinstatement, if applicable.
- > Employed full-time, full-time school, or a combination of both.
- Pay \$100 towards program fee.
- Present answers to phase advancement questions in court.

Phase III-Change

Objective: Continue abstinence, pursue education/vocational goals and connect with the community at large. Minimum length is 6 months.

Requirements

- Attend and observe Drug Court Hearings every other week as scheduled.
- Meet with probation agent at least twice monthly.
- Follow all recommendations from C.D. treatment provider.
- Follow all recommendations of mental health treatment provider, if applicable.
- Attend sobriety support groups as required.
- Abide by a less restrictive curfew (10 pm to 6 am)
- Complete pro-social activities as directed.
- Participation in volunteer project: this involves volunteer work at a non-profit agency arranged by the participant and approved by your probation agent. The number of required hours to be determined.
- Maintain full time school/employment.
- Make best effort for license reinstatement, if applicable.
- Complete a minimum of two (2) drug tests per week.

Advancement Requirements

- No positive drug test results for 180 consecutive days prior to advancement.
- No unexcused absences for services for 180 consecutive days.
- Progress shown towards license reinstatement, if applicable.
- Full time school/employment or positive response to educational/vocational goals.
- Pay \$100 towards program fee.
- Present answers to phase advancement questions in court.

Phase IV-Commencement

Objective: Pursue lasting recovery, pursue graduation from ASAC and develop a strong connection with community at large. Minimum length is 6 months.

Requirements

- Attend and observe one Drug Court Hearing per month as scheduled.
- Meet with probation agent at least once per month.
- > Follow all recommendations from C.D. treatment provider.
- Follow all recommendations of mental health treatment provider, if applicable.
- Abide by a less restrictive curfew of 11 pm to 5:30 am.
- Attend sobriety support groups as required.
- Complete pro-social activities as directed.
- Participation in volunteer project: this involves volunteer work at a non-profit agency arranged by the participant and approved by your probation agent. The number of required hours to be determined.
- Maintain full time school/employment.
- Complete a minimum of two (2) drug tests per week.
- > Make best effort for license reinstatement, if applicable.
- Attend monthly Alumni Association meetings.
- Take part in Relapse Prevention Education Program.

Phase Progression:

Phase	I	II		IV	Graduation
Date					

Graduation Requirements

When you have successfully completed the following you will be scheduled for graduation:

- Successful completion of each phase.
- At least six months of sobriety-abstaining from ALL mood-altering chemicals.
- Maintain full time school/employment.
- Completion of volunteer projects.
- Completion or satisfactory achievement of all court ordered special conditions, as determined by the court.
- License Reinstatement, if applicable.
- Completion of Relapse Prevention Education program.
- Drug Court fee paid in full.
- Prepare answers to questions for graduation speech for the team to review prior to graduation.

On the day of your graduation you will be expected to present the graduation speech you prepared for the team. At your ceremony the Judge will present you with a certificate of completion of the ASAC Program and will recognize your excellent accomplishments. Your family and friends are invited to attend your graduation.



My Goals throughout the Program		

Compliance and Consequences

The Judge shall order progressively increasing sanctions and incentives. The table below summarizes compliant and non-compliant behavior and the corresponding incentives and sanctions.

Achievements	Incentives
Attending Court	Praise from the judge
Periods of sobriety	Less restrictive curfew
Treatment attendance	Candy or pop
Compliance with	Gift cards
treatment plan	Money off of fees
Securing employment	Graduation ceremony
and/or housing	Less frequent court
Completing phases	appearances
Completing treatment	Less frequent drug
Educational achievements	testing
Infractions	Sanctions
Use of mood-altering	Verbal reprimand
substance	Essay on a topic related
Refusing to submit to a	to violation
drug test, tampering with	Community service
a drug test or getting a	More restrictive curfew
diluted sample	Impose previous phase
Unexcused absence	restrictions
Failure to follow Court	Daily check in with team
order/comply with	member
sanction	Increased testing, court
Failure to report address	hearings or PO meetings
or employment change	Fines
Leaving the three county	Immediate detention
area without permission	Termination from ASAC
Not turning in required	
paperwork to court	
Uncooperative behavior	
Failure to attend support	
group meetings	

Termination

The Judge makes the final determination for termination from the program. Repeated violations for any of the following can result in termination (this is not a complete list):

- Positive urine tests
- Missed or refused urine tests
- Failure to attend court
- Failure to participate or cooperate in family intervention
- Failure to participate or cooperate in counseling
- Failure to report to case manager
- Failure to attend outside programs
- Failure to attend school or work

The serious violation of a new arrest does not automatically terminate a participant from the program. If the charge is of a violent nature and the prosecutor files charges the participant will be unsuccessfully terminated and referred to the prosecutor's office for further proceedings.

All advancements, incentives, sanctions, graduations and terminations are subject to the discretion of the Court!

Drug Court Fees

The ASAC charges \$1,500 for its 18-month program. Participants earn credit towards this fee in a number of ways. Credits are as follows:

Phase 1 Completion Primary Treatment Completion Level 1 of Treatment Completion 30 Days Sobriety 60 Days Sobriety 90 Days Sobriety 90 Days Sobriety 6 Months Sobriety Phase 2 Completion Level 2 of Treatment Completion Phase 3 Completion	\$15 \$25 \$10 \$10 \$25 \$40 \$25 \$35 \$50
5	•
	•
Level 2 of Treatment Completion	\$35
Phase 3 Completion	\$50
9 Months Sobriety	\$50
1 Year Sobriety	\$100
Level 3 of Treatment Completion	\$75
18 Months Sobriety	\$75
Graduation	\$100
Total	\$650 credits

Owed to ASAC:

\$850 - \$450 must be paid out of pocket

There are other ways to earn money off your fees. Occasionally you may draw a \$5 credit from the small fishbowl. Once per month a \$50 credit is given from the large fishbowl.

If a participant is terminated from the ASAC program, he or she is still required to pay any fees owed to the program, though only for the time the participant was in the program. Collections and revenue recapture will be pursued if necessary.

Recovery Support Group Meetings

You are required to attend weekly recovery support group meetings, in an amount set by your treatment provider. You will show proof of attendance by having the chair of the meeting sign off in this book at each meeting. Which meetings you attend is your choice.

The pages that follow are known AA and NA meetings in the area and are as current as the information we've received. If AA or NA isn't working for you, there are alternatives.

Fountain Center Recovery Support Group MeetingsFairmont: Tuesdays 10 am Tuesdays 6:30 pmJackson: Tuesdays 6:30 pmThese meetings at times may be 12-step based but are not as spiritually-
based as traditional AA and NA meetings.

<u>Bible-Based Recovery Support Group Meetings</u> Fairmont: Wednesdays 6:15 pm Covenant Church

<u>SMART Recovery Meetings</u> non-faith based alternative Meetings take place in Mankato on Mondays at 7 pm at SMRC or online at <u>http://www.smartrecovery.org/meetings/olschedule.htm</u> If you choose to take part in online meetings you will be required to provide proof of attendance.

Drug Testing Call-In Line

Call: 507-697-0538 between 6 am & Noon every day, seven days per week.

Your code is: _____

Report to your assigned testing location: _____

Between any one of these testing windows:

If you fail to show for a test by the end of the testing windows your probation agent will be called and a bench warrant will be issued. Failure to test will be treated as a positive drug test.

Support Group Meetings

Day and Time	Location	Phone Number and
Monday		Contact
Noon AA	Big Book	Bonnie
Fairmont	0	
	214 Downtown Plaza	507-238-9299
6:30 pm AA	Discussion Group	Rick or Kathie
Worthington	1127 Sherwood St.	507-372-2455
7 pm AA	United Hospital	Kathy
Blue Earth	515 S. Moore St.	507-653-4386
7 pm AA	Fevered Brains	Barb
Fairmont	214 Downtown Plaza	507-236-8259
7 pm AA	Ashley House	Tom P.
Jackson	308 W. Ashley St.	507-847-4242
7 pm AA	Sparks Park.	Stan
Lakefield	N. Hwy 86	507-662-6704
7:30 pm AA	Fire Hall across from Post	Lorri C.
Windom	Office	507-831-6107
8 pm AA	210 N. State St.	Nathan B.
Bricelyn		507-553-5210
8 pm AA	One-to-One	Jeff K.
Fairmont	214 Downtown Plaza	507-235-3399
Tuesday	· ·	
Noon NA	Ties That Bind	Cindi C.
Fairmont	214 Downtown Plaza	507-236-9373
6 pm AA	Hispanic Speaking , Fire	Dave R.
Windom	Hall by Post Office	507-831-2843
7 pm NA	House of Addicts	Kim R.
Fairmont	House of Hope	507-399-9754
	1100 Indus St.	
7:30 pm AA	Wells Alano Group	Bill
Wells	United Methodist Church	507-553-5871
8 pm NA	American Lutheran Church,	Kelly
Windom	906 Prospect Ave.	507-832-8184
8 pm AA	Big Book	Bonnie
Fairmont	214 Downtown Plaza	507-238-9299

"Keep it simple-stay sober and ask for help"—Submitted by Barb K., 2003 Drug Court Graduate

Wednesday		
9:30 am AA	Fire Hall across from Post	Lorri C.
Windom	Office	507-831-6107
Noon AA	Big Book	Bonnie
Fairmont	214 Downtown Plaza	507-238-9299
6 pm NA	Midweek Serenity	Dan Z.
St. James	202 Armstrong Blvd S.	507-621-0613
6:30 pm NA	Sanford Hospital	Wendy H.
Worthington	1018 6th Ave.	507-329-5273
7 pm NA	Wild Side NA	Mike K.
Bricelyn	407 N. 3rd St.	507-525-1536
8 pm NA	Wonders of Recovery	Cindi C.
Fairmont	214 Downtown Plaza	507-236-9373
8 pm AA	Big Book	Bonnie
Fairmont	214 Downtown Plaza	507-238-9299
8 pm AA	Truman Community Bldg	Duane 236-1154 or Jim
Truman	313 N. 1st Ave W.	380-6590
Thursday		
Noon AA	Downtown Group	
Worthington	1127 Sherwood St.	
5:30 pm AA	Sisters in Sobriety	507-831-1619
Windom	41445 US Hwy 71	Assembly of God
7 pm NA	Adolescents in Recovery	Lakyn
Fairmont		507-236-2188
7 pm AA	Sherburn Community Bldg	Dianne P.
Sherburn	on Main St.	507-236-7487
7:30 pm AA	Sacred Heart School 800	Joe
Heron Lake	9 th St.	507-793-2353
8 pm AA	Big Book	Bonnie
Fairmont		507-238-9299
8 pm AA	Moving Forward	Tom H.
Worthington	1127 Sherwood St.	507-360-3173
Friday		
Noon AA	Big Book	Bonnie
Fairmont	214 Downtown Plaza	507-238-9299
6:30 pm NA	True to Ourselves	AI J.
Fairmont	214 Downtown Plaza	507-236-0908
7 pm AA	Trail's Group	Jill
MN Lake	103 Main St.	507-317-8987
8 pm AA	One-to-One	Dan
Fairmont	214 Downtown Plaza	507-236-4049
8 pm AA	Fire Hall across from Post	Lorri C.
Windom	office	507-831-6107

Saturday		
9 am AA	Step Study	Scott H.
Worthington	1127 Sherwood St.	507-372-2353
11 am AA	Sat. Morning Live	Lorri C.
Windom	Fire Hall by post office	507-831-6107
Noon NA	1720 N. Burlington Ave.	Wendy
Worthington	American Ref. Church	507-329-5273
6:30 pm NA	Wild Side NA	Mike K.
Bricelyn	407 N. 3 rd St.	507-525-1536
7 pm AA	Step Meeting	Tom P.
Jackson	Ashley House	507-847-4242
8 pm – AA	Bricelyn Alano Group 210	Nathan B.
Bricelyn	N. State St.	507-553-5210
8 pm – AA	Speaker Meeting	Jerry S.
Fairmont	214 Downtown Plaza	507-236-8259
Sunday		
7 pm NA	Hopeless to Dopeless	AI J.
Fairmont	214 Downtown Plaza	507-236-0908
7 pm AA	Afflicted & Fearless, Sr.	John M. 507-893-3535 or
Blue Earth	Citizen Center 118 W 7 th St.	520-6676
8 pm AA	Big Book	Darrell D.
Fairmont	214 Downtown Plaza	507-399-9330
8 pm AA	Worthington AA	Clarence
Worthington	1127 Sherwood St.	507-372-5809

Support Group Attendance Record

Date	Location	Group Leader Signature & Phone Number

Location	Group Leader Signature & Phone Number
	Location

Location	Group Leader Signature & Phone Number
	Location

Location	Group Leader Signature & Phone Number
	Location

Location	Group Leader Signature & Phone Number
	Location

Location	Group Leader Signature & Phone Number
	Location

Date	Location	Group Leader Signature & Phone Number

Location	Group Leader Signature & Phone Number
	Location

Location	Group Leader Signature & Phone Number
	Location

Location	Group Leader Signature & Phone Number
	Location

Location	Group Leader Signature & Phone Number
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Location	Group Leader Signature & Phone Number
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Location	Group Leader Signature & Phone Number
	Location

Location	Group Leader Signature & Phone Number
	Location

Notes