RECOVERY GROUP ATTENDANCE LOG

Office of Professional Regulation 89 Main Street, 3rd Floor Montpelier, VT 05620-3402

Fax: (802) 828-2389

This log covers the <u>current quarter (please check one)</u> : □ Jan–Mar	□ Apr–Jun	□ Jul–Sept	□ Oct–Dec	
Submit the log to the Office of Professional Regulation quarterly, with	thin 15 days	after the end of	the quarter—	-due
dates are April 15, July 15, October 15, and January 15.				

Date of Meeting	Location of Meeting	Type of Meeting	Signature of your sponsor or another attendee on this date		
I certify by my signature that I have attended all of the meetings listed above.					
Your Signature	our Signature Your Name Printed				
This is page of sheets for this quarter.					