

AA Meeting Verification

NAME OF PERSON ATTENDING

_____ Name of group attended	_____ Date attended (usually weekly)	_____ Verifying Signature – Phone Number
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**Return AA Verification To:
Sherburne County Community Corrections
13880 Business Center Drive, N.W.
Elk River, MN 55330-1692
Fax (763) 765-4555
(please include your probation officer's name on envelope/fax)**