

Southeastern Arizona NA Area Service Committee
SEAZNA
STATEMENT OF RESPONSIBILITY

DATE: _____

I, _____, a trusted servant of the fellowship of Narcotics Anonymous (NA) agree not to misuse property and keep safe any money or other assets entrusted to me by the Fellowship of NA.

I agree to avoid mixing Fellowship money with my own money or the money of anyone else.

I agree to use Fellowship money or other assets only as directed by the Fellowship of NA.

I agree that if I misappropriate or misuse Fellowship money or other assets because of my personal negligence or dishonesty, that I will accept full responsibility for their replacement.

I agree that as a trusted servant I serve as a volunteer and will not be paid for my work. When I complete my term of service or if I am removed from service, I agree to promptly turn over any Fellowship money, assets, records or other Fellowship Property.

I have agreed to follow and adhere to the Southeastern Arizona Area SEAZNA Service Committee's Loss and Recovery Policy.

Signed this _____ day of _____,

(Trusted Servant, Print Name)

(Trusted Servant Signature)

(Witness, SEAZNA Officer)

(Witness Signature)