



Adult Diversion
Sedgwick County Courthouse
525 N. Main, Suite 235
Wichita, KS 67203

Office of the District Attorney
18th Judicial District of Kansas

Telephone: (316) 660-3663
Fax: (316) 660-3674
Toll Free: (800) 432-6878

12-STEP MEETING VERIFICATION

This is to certify that _____ was in attendance at the
Alcoholics/Narcotics anonymous, or other specified meeting listed below.

| GROUP NAME | DATE | TIME | LEADER'S SIGNATURE |
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I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct. Executed on this date _____ .

Attendee's Signature