



# CoDA.org Meeting Results

---



## CoDA.org Meeting Information MA139

Group Name   
Start Time   
Length:   
Meeting Day   
Language   
Meeting Type   
Meeting Category  Your Name

Last Updated: 25-Apr-16

Facility Name  Facility Address 1  Facility Address  
 Facility City   
Facility State   
Facility Zip   
Facility Country

Special Instructions

## Meeting Contacts

---

## Primary

Name

## Secondary

Name

By submitting this request you certify that you are a contact, local meeting coordinator, or intergroup representative (i.e. someone that has knowledge of the meeting!)

Submitter's Email Address (required)

Title (required)

When you enter a proper email address in the "Submitter's Email Address" box, and click the "submit" button, your information will be sent via email to our Fellowship Services worker who does the actual edit to the database. By filling in this form, you do not actually edit the database!

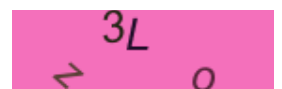
If you do not type a proper email, you will get an alert that you have input an improper email. Change your email address appropriately and resubmit.

After several tries, if you still are not able to submit your info, send an email to "[meeting@codal.org](mailto:meeting@codal.org)" stating the problem you are having and request the changes in the body of the email. Please give your meeting number when sending an email to "[meeting@codal.org](mailto:meeting@codal.org)". This will speed up the update process!

After clicking on submit button, you will receive a notification message that your edits have been sent to "[meeting@codal.org](mailto:meeting@codal.org)". Within several days you will receive notification from our Fellowship Services worker that your edits have been updated in the database. If you do not get this last message, then something went wrong and you should resubmit your data.

Type in the code you see below and click Submit Meeting.

Submit Meeting



Cancel

### TWELVE STEPS TO HOPE & RECOVERY CoDA GROUP

CoDA Meeting Number: MA139

- Day: **mon**
- Length: **1 hour**
- Start: **7:00 PM**

- Language: **English(Ingles)**
- Type: **Face to Face Meeting**
- Category: **Open**

**Genesis Spiritual Life and Conference Center**

59 MILL ST  
Westfield, MA 01085  
us

**Primary Contact**

Joe H.

---

**Secondary Contact**

Crystal Z.