

STEP 8 OVERVIEW & DIRECTIONS - SECTION 1

This stepbook approaches step 8 by making a list of everyone you have ever had any relationship with of any kind for any length of time. If we remember the encounter, we write it down.

This is designed as a very complete in-depth list, but formatted in a way that is very straightforward and easy. Review the directions below for each section and on the following sheets. Then go to the Category Sheet to fill in just the first section in the Blank Sheet for every person/institution triggered by the category sheet. Check off categories when done.

After filling in Section 1 for every amends, then fill in Section 2 for them all, then 3, etc.

After all your sections are done for all your amends, do the Gratitude List/Asset Sheet at the end to complete step 8.

Have fun!

SECTION 1 - DIRECTIONS

- Do: Make a list of each grouping listed at the top of each page.
- Goal: List everyone you remember having any kind of encounter or relationship with, regardless if you never hurt them or not.
- Note: Only write their name, do not go to section 2. Again, don't think about if you hurt them or not, at this point it is immaterial.
- Sample: Review the sample below for this section. Other sections are not filled in as you should not look at those yet.
- Working It: After reviewing the sample below, proceed to the following sheet, completing one sheet per day. At the end of the 21 sheets you will find instructions for Section 2.

FAMILY THAT YOU HAVE KNOWN- SINCE 5YRS OF AGE (ALIVE & DECEASED)

<u>SECTION 1</u>	<u>SECTION 2</u>	<u>SECTION 3</u>	<u>SECTION 4</u>	<u>SECTION 5</u>
Name of Family Member	Check Here if you <u>ever</u> intentionally or <u>unintentionally</u> may have hurt them or their feelings.	Briefly describe how you hurt or may have hurt them.	Has anyone ever acted in a similar way towards you, if so, how did it make you feel (or how would it)?	What would you like someone to say to you if they had made you feel like this? Open up your Amends Notebook. On one page, write a sincere apology on the specific situation - do not generalize. When done, check off this column.
father: Don				
sister: Ann				
uncle: Joe				

STEP 8 OVERVIEW & DIRECTIONS - SECTION 2

Good job! If you've gotten this far you have successfully completed what is probably the most comprehensive list of people you have known in your life. Congratulate yourself, you are truly working your program.

This next section is pretty easy and you should be able to complete it in just one day. All we do here is check start with our first page of lists "FAMILY THAT YOU HAVE KNOWN- SINCE 5YRS OF AGE (ALIVE & DECEASED)", and check off whether or not we could have possibly ever done anything (on purpose or by accident) to have hurt them or their feelings. The idea here is to dig deep and check this box if there was even the most remote chance that we caused any harm.

Note: Again, please do not consider any of the other sections at this time. Focus only on checking off the boxes that apply. Looking on further at other sections could impair your ability to do the best job on this section.

SECTION 2 - DIRECTIONS

- Do: Check off the boxes next to the names on each list as instructed.
- Goal: To get all the lists checked off in one sitting as honestly as possible.
- Note: Only check off boxes that apply, do not go to section 3.
- Sample: Review the sample below for this section. Other sections are not filled in as you should not look at those yet.
- Working It: After reviewing the sample below, proceed to your list sheets. After checking off all applicable boxes in all sheets, turn to the next page after this for instructions on Section 3.

FAMILY THAT YOU HAVE KNOWN- SINCE 5YRS OF AGE (ALIVE & DECEASED)

<u>SECTION 1</u>	<u>SECTION 2</u>	<u>SECTION 3</u>	<u>SECTION 4</u>	<u>SECTION 5</u>
Name of Family Member	Check Here if you <u>ever</u> intentionally or <u>unintentionally</u> may have hurt them or their feelings.	Briefly describe how you hurt or may have hurt them.	Has anyone ever acted in a similar way towards you, if so, how did it make you feel (or how would it)?	What would you like someone to say to you if they had made you feel like this? Open up your Amends Notebook. On one page, write a sincere apology on the specific situation - do not generalize. When done, check off this column.
father: Don	X	DO NOT FILL THESE SECTIONS OUT UNTIL YOU HAVE FILLED OUT SECTION 1 & 2 ON ALL THE PRECEDING SHEETS.		
sister: Ann				
uncle: Joe	X			

STEP 8 OVERVIEW & DIRECTIONS - SECTION 3 & 4

ALL RIGHT! This is just a real brief summary - a one liner. Outline just the most obvious & biggest things you did or may have done to cause the hurt or hurt feelings to this person. Keep it short enough to fit in the space provided.

Note: This section may bring up a lot of feelings. Remember, this is who you used to be and what you used to do. Who you are now is someone who does not want to repeat the past hurts, but in order not to do the same hurtful things we need to clearly see what those hurtful things were. We are embarking upon change, clearing away the wreckage of the past.

Be brave, be strong. If you have a sponsor or friend in the program you may want their support if you find this difficult. Go through this section quickly. Try to do it all in one day (it may seem like a lot, but you do not want to drag this part out)! If you get stuck on one person, skip them, and come back to them at the end. Keep that pen (or pencil) moving. Remember keep it brief, a few words will suffice.

Note: If after completing this work you feel sad or bad in any way, call your sponsor or someone in the program and share your feelings. If possible get to a meeting and share. If neither is possible, go to the Gratitude List/Asset Sheet Attached & work it through.

SECTION 3 & 4 - DIRECTIONS

- Do: Section 3: 3-8 words on what you did to possibly hurt this person Section 4: Write in the word YES or NO.
- Goal: To set aside an hour to do this section and finish it in one sitting.
- Note: Skip those people who are stumping you, .
- Sample: Review the sample below for this section. Other sections are not filled in as you should not look at those yet.
- Working It: After reviewing the sample below, proceed to your list sheets. After filling out Section 3 & 4 in all your sheets, turn to the next page after this for instructions on Section 5.

FAMILY THAT YOU HAVE KNOWN- SINCE 5YRS OF AGE (ALIVE & DECEASED)

<u>SECTION 1</u>	<u>SECTION 2</u>	<u>SECTION 3</u>	<u>SECTION 4</u>	<u>SECTION 5</u>
Name of Family Member	Check Here if you <u>ever</u> intentionally or <u>unintentionally</u> may have hurt them or their feelings.	Briefly describe how you hurt or may have hurt them.	Has anyone ever acted in a similar way towards you, if so, how did it make you feel (or how would it)?	What would you like someone to say to you if they had made you feel like this? Open up your Amends Notebook. On one page, write a sincere apology on the specific situation - do not generalize. When done, check off this column.
father: Don	X	STOLE FROM HIM, DISRESPECTED, HURT MOM, ETC.	YES	DO NOT FILL THESE SECTIONS OUT UNTIL YOU HAVE FILLED OUT SECTION 1-4 ON ALL THE PRECEDING SHEETS.
sister: Ann				
uncle: Joe	X	HE BABYSAT ME ONCE & HIT ME - TOLD ME NEVER TO TELL	YES	

STEP 8 OVERVIEW & DIRECTIONS - SECTION 5

GOOD JOB, you've made it to the last section. Here is where the 9th step starts to really come into action. You are very close to throwing out the old and bringing in the new.

SECTION5 - DIRECTIONS

- Do: Review the 1st 4 column. Get a notebook and write AMENDS NOTEBOOK on cover or inside. Without using the word "sorry" write a sincere apology (max one page) on the situation, without blaming, justifying or mentioning the reason for your behavior.
- Sample: Review the sample below for this section.
- Goal: One page in the journal each day.
- Note: Skip those people/institutions who are stumping you, and ask for your sponsors help only after all others are done.
- Working It: This is getting into the meat of amends - the 9th step promises are just around the corner - please don't give up!

FAMILY THAT YOU HAVE KNOWN- SINCE 5YRS OF AGE (ALIVE & DECEASED)

<u>SECTION 1</u>	<u>SECTION 2</u>	<u>SECTION 3</u>	<u>SECTION 4</u>	<u>SECTION 5</u>
Name of Family Member	Check Here if you <u>ever</u> intentionally or <u>unintentionally</u> may have hurt them or their feelings.	Briefly describe how you hurt or may have hurt them.	Has anyone ever acted in a similar way towards you, if so, how did it make you feel (or how would it)?	What would you like someone to say to you if they had made you feel like this? Open up your Amends Notebook. On one page, write a sincere apology on the specific situation - do not generalize. When done, check off this column.
father: Don	X	STOLE FROM HIM, DISRESPECTED, HURT MOM, ETC.	YES	X
sister: Ann				
uncle: Joe	X	HE BABYSAT ME ONCE & HIT ME - TOLD ME NEVER TO TELL	YES	X

Sample from my Journal...

Dear Dad,

I'm working on my 9th step in Alcoholics Anonymous. That's the step where I need to make direct amends to all those I have harmed. You're at the top of my list. In looking back at my behavior growing up, I feel horrible about some of the things I said and did to you. My God, you were just trying to help me and love me the best you could and I was so mean and selfish, so hurtful and dishonest. I feel like if I started listing all the shitty things I said and did to you that I could fill up a thousand pages. I've wanted to apologize a million times but my own anger, righteousness, ego, and selfishness got in the way, not to mention my fear. I'm trying to walk through this program and get better - to become the man you and I both want me to be, and I so appreciate all the support and love you have given me. Know from the deepest part of my heart and soul now that I truly feel terrible about all the pain and suffering I put you through, all the fearful nights, all the mean and selfish things I said and did, to you, mom, the family, and everyone else in my life. My greatest goal is to never say or do these things again, and that's what I'm working toward in this program. You are the greatest father I could ever have, and I'm the luckiest guy in the world to have had you and all the support that ...

STEP 8 BLANK SHEET

[illegible]

STEP 8 CATEGORY SHEET

Use these categories to trigger your memories. See if there are any amends owed to any person or institution you may have knowingly or inadvertently hurt. Check off the box for each category after thoroughly searching your memory and writing down any amends in that category.

FAMILY THAT YOU HAVE KNOWN- SINCE 5YRS OF AGE (ALIVE & DECEASED)

YOUR FAMILY MEMBERS' FRIENDS

PEOPLE YOU'VE KNOWN IN THE PROGRAM (BY CITY)

JOBS/EMPLOYERS (FIRST TO LAST)

CO-WORKERS FROM THOSE JOBS (REFER TO LAST SHEET)

CUSTOMERS/CLIENTS (IF APPLICABLE)

DOCTORS & HEALTHCARE PERSONNEL

LANDLORDS & ROOMMATES

NEIGHBORS

USING PARTNERS & DEALERS

PEOPLE YOU OWE OR OWED MONEY TO

COLLEGE/TRADE SCHOOL TEACHERS & WORKERS (JANITORS, ETC) (IF APPLICABLE)

COLLEGE/TRADE SCHOOL STUDENTS (IF APPLICABLE)

HIGH SCHOOL/TEACHERS & WORKERS (JANITORS, ETC)

HIGH SCHOOL STUDENTS

GRAMMAR SCHOOL TEACHERS & WORKERS (JANITORS, ETC)

GRAMMAR SCHOOL STUDENTS

RELATIVES OF PEOPLE WE KNEW (YOUR FRIEND'S MOM,ETC)

PEOPLE WE HAS SEXUAL RELATIONS WITH

POLICE OR OTHER AUTHORITY FIGURES NOT MENTIONED

STRANGER ENCOUNTERS (ANYONE NOT ON ANY OTHER LIST, CLERKS, DMV, GOV'T, DRIVERS, ETC)

STEP 8 GRATITUDE LIST

List below the things you are grateful for in your life. The gifts that you have been given. You may find it helpful to divide them up into areas such as health (eyesight, legs, intelligence, etc.), friendships (program people, family, friends, etc.), program knowledge (tools you use to live by), and spirituality (prayer, meditation, your relationship with a higher power).

STEP 8 ASSETS SHEET

Since your sobriety date you have started practicing putting your positive character traits to work in your life.

Put a check mark to the left of each behavior that you are practicing more since you got sober.

	<input type="checkbox"/>	accepting	<input type="checkbox"/>	interested in others
	<input type="checkbox"/>	admiring	<input type="checkbox"/>	intuitive
	<input type="checkbox"/>	admitting wrongs	<input type="checkbox"/>	kind
	<input type="checkbox"/>	agreeable	<input type="checkbox"/>	loving
	<input type="checkbox"/>	balanced	<input type="checkbox"/>	loyal
	<input type="checkbox"/>	brave	<input type="checkbox"/>	non-controlling
	<input type="checkbox"/>	caring	<input type="checkbox"/>	non-judgmental
	<input type="checkbox"/>	calm	<input type="checkbox"/>	open-minded
	<input type="checkbox"/>	cheerful	<input type="checkbox"/>	optimistic
	<input type="checkbox"/>	closed-mouth	<input type="checkbox"/>	outgoing
	<input type="checkbox"/>	complimenting	<input type="checkbox"/>	patient
	<input type="checkbox"/>	concerned for others	<input type="checkbox"/>	polite
	<input type="checkbox"/>	conscientious	<input type="checkbox"/>	positive
	<input type="checkbox"/>	considerate	<input type="checkbox"/>	practical
	<input type="checkbox"/>	cooperative	<input type="checkbox"/>	praising
	<input type="checkbox"/>	courageous	<input type="checkbox"/>	purposeful
	<input type="checkbox"/>	courteous	<input type="checkbox"/>	realistic
	<input type="checkbox"/>	discipline	<input type="checkbox"/>	reasonable
	<input type="checkbox"/>	empathetic	<input type="checkbox"/>	reliable
	<input type="checkbox"/>	fair	<input type="checkbox"/>	respectful
	<input type="checkbox"/>	faithful	<input type="checkbox"/>	responsible
	<input type="checkbox"/>	flexible	<input type="checkbox"/>	sharing
	<input type="checkbox"/>	forgiving	<input type="checkbox"/>	sociable
	<input type="checkbox"/>	friendly	<input type="checkbox"/>	stable
	<input type="checkbox"/>	generous	<input type="checkbox"/>	supportive
	<input type="checkbox"/>	gentle	<input type="checkbox"/>	tolerant
	<input type="checkbox"/>	giving	<input type="checkbox"/>	thoughtful
	<input type="checkbox"/>	good-natured	<input type="checkbox"/>	trustworthy
	<input type="checkbox"/>	good-tempered	<input type="checkbox"/>	secure
	<input type="checkbox"/>	grateful	<input type="checkbox"/>	serene
	<input type="checkbox"/>	hard-working	<input type="checkbox"/>	self-accepting
	<input type="checkbox"/>	healthy	<input type="checkbox"/>	self-loving
	<input type="checkbox"/>	helpful	<input type="checkbox"/>	sincere
	<input type="checkbox"/>	honest	<input type="checkbox"/>	spiritual
	<input type="checkbox"/>	hopeful	<input type="checkbox"/>	unassuming
	<input type="checkbox"/>	humble	<input type="checkbox"/>	understanding
	<input type="checkbox"/>	hygienic	<input type="checkbox"/>	willing to grow

CONGRATULATE YOURSELF & FEEL GOOD - YOU ARE IN THE SOLUTION!!!