

David Collins Leukaemia Foundation of Tasmania Inc.



Annual Report 2013

“Your help is our hope”

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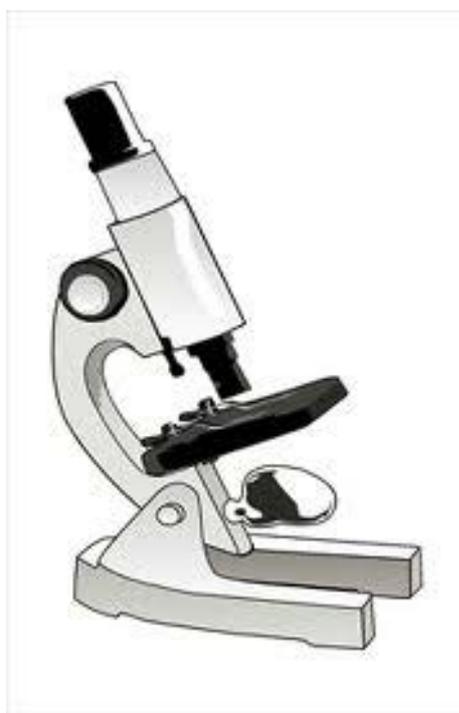
The David Collins Leukaemia Foundation of Tasmania Inc. is a Tasmanian organisation dedicated solely to the care and cure of Tasmanians living with leukaemia, lymphoma and related blood disorders. All money raised stays in Tasmania.

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2013 Office Bearers

Patron: The Governor His Excellency The Honourable Peter Underwood AC

President: Mrs D Tuck

Vice President: Prof G Woods

Secretary: Mrs A Ogilvie

Treasurer:

Executive Officer: Mr G Petterd

Committee:

Mr D Asten, Mrs A Piaszczyk, Mr N Deane, Mr R Heuke, Dr K Marsden, Ms K Dun, Ms S. Woods, Mrs C Willis.

Life Members:

Dr M Baikie. Mrs J Balon Mrs B Collins, Mr N Deane,



President's Report

It is with pleasure and a great deal of pride that I present the President's Report for 2013

Our themes for financial support as a Foundation continue to include;

- patient support
- professional development awards for those who work within the hospital environment
- equipment for hospitals
- continuing support for research

In times of crisis, patients and their families sometimes find meeting the financial commitments associated with illness to be an added stress. DCLFT, in consultation with hospital professionals, provide one off support to ease their financial burdens.

During 2013, the Foundation presented four Professional Development Awards statewide to the value of \$5,953. These awards enabled scientists and nurses to attend national and international conferences. Upon their return, the recipients shared their new knowledge with their colleagues, ultimately benefiting many health professionals.

Hospitals all over the state including North West Regional Hospital, Launceston General Hospital, Royal Hobart Hospital (RHH) and St John's Campus, Calvary Health Care each received an Accuvein machine to assist in highlighting patients' veins suitable for cannulation prior to chemotherapy treatment. The total value of these machines was \$28,000 - made possible from the receipt of a bequest from a long-term supporter of our work as a Foundation.

Our research commitment continued during 2013, with \$60,000 being allocated to research at Menzies Research Institute Tasmania/University of Tasmania. The recipients were Dr. A Holloway and Dr Liz Tegg who are both working on projects investigating the origins of leukaemia development.

Our Annual Dinner held in April at the Lindisfarne Rowing Club was again a great success. We took the opportunity to award Life Membership to Mrs Joan Balon – a long time supporter of DCLFT in the North West of the state. Joan's ongoing dedication and

commitment to the Foundation and its aims continues to be admired and appreciated by many.

In 2013, at the RHH, we supported the creation of a new position of a registered nurse as a Haematology Cancer Care Coordinator. The Committee committed \$58,000 to support this half time appointment for one year. There has been a great deal of positive feedback with evaluation ongoing.

I wish to acknowledge and thank Sarah Woods for her contribution and meticulous management of the Foundation's financial affairs over several years as our Treasurer. Sarah stepped down as Treasurer during 2013. The Foundation has signed a Memorandum of Understanding with Cancer Council of Tasmania (CCT), where CCT coordinates the monthly financial commitments of DCLFT along with our Executive Officer – Graeme Petterd.

Our Annual Button Day raised \$18,662 with Smithton, Burnie, Launceston, New Norfolk, Sorell, Huonville and Hobart and suburban areas involved. We would like to thank our long term supporters and button sellers, along with school students from ten high schools and colleges around the state for their assistance.

Late in 2013 the committee investigated the upgrading and renovation of David Collins House situated in Lutana – very close to Hobart CBD. This unit has been used for 28 years to house intrastate patients and their families whilst undergoing treatment in Hobart. The committee has decided to progress with this proposal during 2014. I hope to provide very positive outcomes in next year's Annual Report.

Finally I wish to thank the Executive Officer, Graeme Petterd and DCLFT Committee members for assisting me in steering the Foundation in a financially sound direction whilst being ever mindful of our objectives – supporting patients in Tasmania with leukaemia and other blood diseases

Thank You

Deirdre Tuck

President, David Collins Leukaemia Foundation of Tasmania

Thirty Three Years of Achievements 1980 - 2013

For each of its 33 years the Foundation has had significant achievements.

Yearly Achievements

- 1980 Incorporated
- 1981 Presented research grant of \$12,128 and first button day raised \$1,466
- 1982 Research grants totalled \$30,000 and \$5,000 to oncology services
- 1983 Fundraising target of \$80,000 and achieved \$90,348
- 1984 Formation of North West Group
- 1985 Purchased David Collins House
- 1986 Car donated by Mr R Baker raffle raised \$23,000
- 1987 Publication of "Kristy's Book"
- 1988 First statewide Button Day
- 1989 Roger Scott's "Walk for Life" raised \$12,978
- 1990 Progressive fundraising exceeded \$1,000,000
- 1991 Committed \$10,000 to establish Tasmania Bone Marrow Registry
- 1992 Formation of Northern Group based in Launceston
- 1993 Northern Group raised \$5,827
- 1994 Bi-Annual statewide meetings introduced
- 1995 Research grants > \$60,000 plus \$12,000 to Bone Marrow Registry
- 1996 Progressive fundraising exceeded \$1,600,000
- 1997 Established "Special Purpose Investment Fund" of \$502,959
- 1998 \$10,000 in equipment presented to the Royal Hobart Hospital
- 1999 North West Group raised a record of \$9,500 for the year
- 2000 Research grants exceeded \$95,000 and became affiliated with the Cancer Council of Tasmania
- 2001 \$11,500 refurbishment of David Collins' House
- 2002 Tom Goninon walked from Wynyard to Hobart to raise \$23,000 in memory of his grandson
- 2003 Joint DCLF/LFA \$8,000 grant to fund Tasmanian Bone Marrow Transplant Support Group
- 2004 Professional Development Awards for Health Care Workers
- 2005 Appointment of first employee as part time Executive Officer
- 2006 Beverley Collins, Norm Deane and Dr Margaret Baikie - Life Members

- 2007 Comalco at Bell Bay sponsored refurbishment of bathroom at David Collins' House
- 2008 Income from investments and other fundraising totalled \$106,621
- 2009 Purchased equipment valued at \$44,000 for hospitals throughout Tasmania and progressive fundraising exceeded \$3,000,000
- 2010 Reception at Government House to celebrate 30 years and entered partnership with Ponting Foundation
- 2011 Increased "Special Purpose Fund" to \$750,000
State amount of \$22,067 collected on Button Day highest ever
Committed \$80,000 for redevelopment of Oncology Day Centre at St John's Calvary Healthcare to be named "David Collins Suite"
- 2012 \$21,075 for three treatment chairs Outpatients Oncology RHH The Blessing & Opening by Archbishop Doyle AM DD of the David Collins Suite Oncology Day Centre, St John's Calvary Health Care Tasmania
- 2013 2013 Joan Balon presented with Life Membership
Provided Accuvein hand held vein illumination systems to St John's, RHH, LGH & NW Regional Hospitals Oncology Wards valued at \$7,000 each
Provided \$22,000 for 3 x Treatment Chairs to new Oncology Outpatients Unit, RHH
Granted \$45,000 for leukaemia research
Financed Haematology Cancer Care Coordinator at the RHH

Our Patrons

- 1980 - 1994 Sir Donald Trescowthick
- 1995 - 2004 Dr Margaret Baikie
- 2005 - 2013 The Governors of Tasmania

Statewide Button Days

1981-201 - \$378,815

Research Grants

1981 - 2013 - \$1,820,876

Professional Development Awards

2004 - 2013 - \$60,549

David Collins House Accommodation (Occupancy)

2010	2011	2012	2013
111 days	332 days	256 days	267 days

Research Reports



Elizabeth Tegg: Validation of newly identified genes in the pathogenesis of chronic lymphocytic leukaemia

This project aims to further validate specific genes and genetic variation as a predisposition for people who develop CLL. Recruitment for this study has been slower than expected, however approximately 50 of the required number of 100 participants have been recruited. The technical issues with the flow sorter have settled and the cell sorts to obtain disease and non-disease cells are running smoothly at the moment. I have had a major change of personnel on this project with the departure of Dr Des Meyer (to take up a position in Europe), however Susan Wright has replaced her and all is going well. This project is continuing and I envisage that it will be finalised next year.

As part of this project I was able to spend 4 weeks at the Sanger Institute at Cambridge, UK in May this year. The research group where I spent time, are co-ordinating the International Cancer Consortium, which are undertaking whole genome sequencing of all the common cancers around the world. During my time there I gained invaluable access to their data, including data from CLL patients and how they are analysing next generation sequencing data, which I will use for this project.

Dr Elizabeth Tegg
MBBS, FRCPA, PhD
Staff Specialist RHH
Honorary Senior Lecturer University of Tasmania

Jo Dickinson: Identifying inherited factors underlying familial haematological malignancies

Lay Description

Genetic factors are known to contribute to the risk of developing haematological malignancies, however to date the underlying genetic drivers of disease development remain largely unknown. Our study proposes to identify genes that predispose to the development of familial blood cancers. Knowing the causative genes is not only important in understanding the disease process but also provides a range of benefits in the diagnosis, development of tailored treatments, and identification of new targets for therapy. Studying families with multiple cases of these diseases is a powerful approach used to identify the causative genes. We have recruited a number of large families with multiple cases of blood cancers. Genetic analysis of family members with and without disease has been performed with a view to identifying the genes contributing to these cancers.

Significance and outcomes

Research in this field to date has established that multiple genes in a variety of different biological pathways contribute to HMs in different populations, and further that many genes remain to be discovered. Our proposal is designed to detect the rare variants likely to contribute to inherited disease in families. As has proven true for other cancers, the identification of genes contributing to these HMs is also likely to contribute to furthering our understanding of sporadic disease. This work has significant potential to provide new avenues for diagnosis, assist with tailoring current therapies to genetic sub-types of disease, and to identify new molecular targets for therapies for this group of malignancies.

Whilst our work to date has not yet identified a genetic mutation causing disease in these families, our work is continuing with funding secured from Cancer Council Tasmania commencing later in 2013 to continue this work.

Discoveries of genetic changes associated with HMs have been shown to have a significant impact on the development of new, more effective therapies for HMs with significant improvement in survival and quality of life for sufferers.

Academic output

GeneMappers Conference, August 2012. 'Shorter Telomeres in Familial Haematological Malignancies: a role for inherited determinants of telomere length in blood cancers.' Blackburn, Charlesworth, Marthick, Tegg, Banks, Marsden, Srikanth, Blangero, Lowenthal, Foote, Dickinson. (Poster)

Australian Telomere and DNA Repair Workshop, October 2012. 'Shorter Telomeres in Familial Haematological Malignancies: a role for inherited

determinants of telomere length in blood cancers.' Blackburn (Oral Presentation)

BIOTA conference for Tasmanian teachers of Biology and Environmental Science, June 2013. 'Genetic factors underlying blood cancers.' Blackburn (Oral Presentation)

Other comments

Mr Nick Blackburn, PhD student on this project was selected as the winner of the Tasmanian Australian Society Medical Research Student awards in 2012. He also received the poster prize for his presentation at the GeneMappers 2012 conference.

Mr Nick Blackburn was awarded a travel fellowship from the University of Tasmania and will spend 4 weeks training with our collaborators in San Antonio, Texas at the Texas Biomedical Research Institute, acquiring a range of bioinformatics.

Dr. Adele Holloway : Regulation of integrins by RUNX1 in leukaemia

Lay description

Integrins are molecules found on the surface of cells which are important for their growth and development. We propose that RUNX1, a master regulator, which is often disrupted in leukaemia controls the presence of certain integrins on the surface of blood cells. Changes to the integrins found on the surface of cells in which RUNX1 is disrupted, is likely to lead to altered growth, maturation and release of the cells from the bone marrow, contributing to the development of leukaemia.

Significance and outcomes

Aberrant forms of RUNX1 transcription factor are found in a significant proportion of leukaemias. Understanding which biological pathways are disrupted in leukaemic cells and the mechanisms involved is essential in understanding how these diseases develop and progress. This study will investigate regulation of two integrin genes ITGB4 and ITGB5, putative targets of RUNX1. Integrins are proposed to play an important role in blood cell development, particularly in the mobilisation and homing of haemopoietic stem and progenitor cells, and are therefore likely candidate molecules to be involved in the leukaemogenic process.

Professional Development Awards

Each year the Foundation provides Professional Development Awards to young Tasmanian leukemia researchers. There were four awards presented during 2013. (Three reports included.)

3 Judith Drive
Lenah Valley
Hobart 7008

Saturday 26th October 2013

Mr Graeme Petterd
C/- David Collins Leukaemia Foundation
PO Box 372
Hobart

Dear Sir

It is with heart felt thanks, that I write to thank your foundation for your financial support to enable me to attend this years HAA Scientific Conference, Gold Coast, Queensland. This was held on 20th October through to the 23rd October.

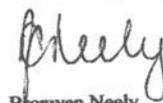
As a reasonably new practitioner to the Haematology speciality, (almost three years now) I can not begin to tell you how valuable this conference has been for me. I was initially invited to attend the PNH Speciality Nurses session. Paroxysmal Nocturnal Haemoglobinuria (*PNH*) is a very rare and debilitating disease of the bone marrow that affects the blood and major organs. This session provided me with a theoretical and physiological education session into the disease. The session was attended by Nurses representatives from each state, and case studies were presented and discussed. It gave be a valuable opportunity to net work with other Nurses interested in this disease, and an valuable contact point for future reference. We will be endeavouring to make this an annual event.

The HAA Scientific conference, although initially overwhelming with the share numbers of delegates, branched off into specific discipline streams. I elected to attend ALL Nursing lectures, workshops and Master classes. The calibre of the speakers was outstanding, with a strong emphasis on Multiple Myeloma. Integral building blocks were established in my knowledge base and once again valuable networking and collegiality was developed between Nurses. Holistic Care made a strong impact with lectures on exercise and mindfulness programmes in the rehabilitation context. Innovative Nurse led programmes were a key theme, with many Nurses developing exciting new programmes to assist their patient groups. Finally, one of my most interesting discussions was with the Director of Nursing from the Cook Islands, based on the Island of Rarotonga. I asked her where they source their chemotherapy from, and she stated that they don't! They have to send their patients abroad to New Zealand to receive their treatment. I was mindful that indeed some of the issues we had listened to were very much from a 1st world perspective.

On return, I feel highly motived and reinvigorated with my chosen profession and specialty. And have indeed decided to continue, once again, with my postgraduate studies, to further my knowledge and career development. I am proud to be a member of HSAZ and feel privileged to be welcomed into their fold. This would not have been possible without your foundations support, and I thank you.

Please find enclosed, an itemisation of my additional expenses with original receipts for reimbursement. As I am about to shift house this week, I think in the first instance the best postal address would be c/- Oncology Outpatients, at the Royal Hobart Hospital.

With kind regards,



Bronwen Neely

David Balon Professional Development Award Terri Kidd

Graeme Petterd,
Executive Officer,
David Collins Leukaemia Foundation

Re: Report back from Conference Attendance partially funded by the David Balon Professional Development Award

Dear Graeme,

Please accept my sincere apology for the lateness of this report, the excuse I will offer is that my personal and professional life has been exceptional busy since my return.

I would like to also profoundly thank the David Collins Leukaemia Foundation for bestowing the David Balon Professional Development Award on me.

The 12th International Symposium on Myelodysplastic Syndromes was a fascinating meeting. Whilst it focused mainly on the molecular aspects of the disease and its genetics, which is not my field of expertise I did gather useful information for my own professional development. It also afforded me to venture outside my comfort zone and promote the work that I had undertaken during my graduate diploma via presentation of my poster. I had several groups of attendees approach me to discuss the poster, one gentleman was an adviser for the Haematology analysers which we utilise in the laboratory at the RHH.

Attendance at the meeting has spurred me into extending the research that I have undertaken and hopefully ethics approval will be forthcoming.

Please advise me if you require any further documentation or discussion from me with regards to this meeting and the opportunity which your organisation helped me attend.

Thank you again for bestowing this award on me, I am extremely grateful to the Balon family for their continued support of Allied Health professional development.

Regards,

Terri Kidd
1 September 2013

Judy Slevin Professional Development Award Sandra Brown

Report to the David Collins Leukaemia Foundation Committee regarding the use of the proceeds of the Judy Slevin Professional Development Award 2013.

Dear Committee,

Please accept my heartfelt thanks for the Judy Slevin professional development award which you kindly granted to me this year. I would also like to pass on you the thanks of Deb Foster CNM – Gibson ward and the nurses on the ward. The award was put to great use as part funding of a series of workshops which were designed to give nurses the skills to communicate effectively with their patients and their families during difficult and challenging times towards the end of life. Communication is at the core of what we do here on Gibson unit, in caring for people with cancer, and also those people and their families', who sadly require care which is palliative in its' approach.

Poor communication can have an adverse effect on how people cope with illness and also on how well families deal with the grieving process so we want to learn and to offer the best nursing practice that we can. The workshops were a huge success and the nurses, despite being anxious about practicing the advanced skills in front of their colleagues, appreciated the sessions immensely! We are all working on instilling what we learned into our every day practice.

Thank you Graeme, for welcoming both groups to the session, speaking of the work that DCLF are involved in and also for expressing your support of the work that we do on Gibson Unit. Please see below a short report on the actual workshops for your perusal.

Planning and implementing the workshop was a joint effort between me, Deb Foster, Cath Youl and Robyn Thomas. Thank you to all.

Workshop title

Advanced Communication Skills presented by Dr. Robyn Thomas and assisted by Sarah, a local actor.

Dates

Group 1 (10 nurses).

Session 1- Wednesday June 5th 08.00hrs – 12.30 hrs (morning tea included)

Session 2 – Friday June 14th 08.00hrs – 12.30 hrs (morning tea included)

Group 2 (10 nurses).

Session 1- Wednesday June 12th 08.00hrs – 12.30hrs (morning tea included)

Session 2 – Friday June 19th 08.00 – 12.30hrs (morning tea included)

Venue and catering

Training room, 1st Floor,

St. Johns Campus,

30 Cascade Rd,

South Hobart 7004.

The first session for each group centred initially on concepts of communication and setting ground rules of the group. The group discussed difficult communication situations that they have experienced in the past and why they had found it difficult. Common issues were:

- Lack of knowledge about a condition and it's trajectory and therefore lack of confidence in talking to people
- Handling patient, family and staff emotion
- Confronting emotions in patients which require management include anger, anxiety, sadness, fear, despair etc
- How to instil hope
- How to manage mismatching of expectations such a person who expects that they may have years of life expectancy when this time will be much shorter
- Communicating with children and the differing level of understanding of illness and death that they may have
- Silence as an uncomfortable feeling
- Dealing with the questions 'how long have I got'?
- Denial

Robyn taught on the theories behind each issue e.g. silence as a therapeutic tool.

We then spent the rest of the sessions working with the actress, Sarah, who role played a young woman with cancer. Her character was tearful at times and withdrawn so that we could practice coping with silence. At other times she was angry that she could not have more chemotherapy. Another scenario was that her character wanted to know how things would be for her when she was dying. Each

nurse was able to repeatedly practice a difficult conversation during which time out was taken in order to receive positive feedback from the group on how to improve the communication. I believe that it was the best education that I have ever had in terms of improving the care that I give to the people that we care for. Thank you.

Kindest Regards,

Sandra Brown.

CNSGibson Unit.



Audit Report

Peter Dawson ABN 90 707 520 914

Chartered Accountant
Business Consultant

Independent auditor's report to members of David Collins Leukaemia Foundation Inc

I have audited the special purpose financial report of David Collins Leukaemia Foundation Inc for the year ended 31 December 2013.

Management Committee's Responsibility for the Financial Report

The Management Committee is responsible for preparation and fair presentation of the special purpose financial report and information contained therein. This responsibility includes establishing and maintaining internal controls relevant to preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

My responsibility is to express an opinion on the financial report based on my audit. I have conducted my audit in accordance with Australian Auditing Standards to provide reasonable assurance as to whether the accounts are free of material misstatement. My procedures included examination, on a test basis, of evidence supporting amounts and other disclosures in the accounts, and the evaluation of accounting policies and significant accounting estimates. These procedures have been undertaken to form an opinion as to whether, in all material respects, the financial statements are presented fairly in accordance with Australian Accounting Concepts and Standards and other mandatory professional reporting requirements (Urgent Issues Group Consensus Views) (where applicable), and statutory requirements so as to present a view which is consistent with my understanding of the Foundation's financial position and the results of its operations and cash flows.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Independence

To the best of my knowledge and belief, there has been no contravention of auditor independence and any applicable code of professional conduct in relation to the audit.

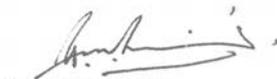
Limitation of Scope

As is common for organisations of this type, it is not practicable to establish complete accounting control over cash received from all of its activities. Verification therefore has been limited to the receipt of funds recorded in the Foundation's financial records.

Audit Opinion

In my opinion, the special purpose financial report of David Collins Leukaemia Foundation Inc presents fairly in accordance with applicable Accounting Standards and other mandatory professional reporting requirements in Australia the financial position of the Foundation as at 31 December 2013 and the results of its operations and its cash flows for the year then ended.

Rendell W. RIDGE



(for Peter DAWSON)
07 March 2014

Office Level 1, 149b Macquarie Street, Hobart
Telephone 03 6224 0803 Mobile 0418 123 815

Email peter@dawsonlienert.com
Fax 03 6285 8056

Financial Report

Key Results in 2013:

- A net profit of just over \$22,000.
- \$81,396 was provided for research, patient care and professional development awards.
- Capital donations of \$180,241 includes \$112,500 provided for the Ponting Foundation
- Despite a slight increase in occupancy patient accommodation revenue was slightly reduced compared to 2012. This was due to the nature of the tenants.
- There was a substantial increase in general donations, memorial donations and bequests compared with 2012.

An agreement with the Cancer Council of Tasmania was established in 2013 to process our financials. This has resulted in a reorganisation of our reporting and financial processes to current best practice.

David Collins Leukaemia Foundation
Income Statement for year ended 31 December 2013

	2013	2012
Income		
Accrued Interest		27,250
Bequests	92,312	7,000
Button Day	18,662	19,360
Donations	25,734	15,168
Investment Returns & Dividends	72,432	61,899
Memberships	203	232
Patient Accom Services DCH	22,812	26,626
Ponting Foundation donation	131,200	18,800
Sundry Income	6,491	579
Tin Collections	2,233	1,639
Total Income	372,078	178,553
Expenses		
Audit, Bookkeeping	1,368	600
Capital Donations	180,241	119,721
Catering	3,742	0
Depreciation	1,524	1,524
Donations	34,008	0
Electricity	1,742	2,066
Finance Brokerage	0	2,499
Fundraising	425	1,905
Insurance	2,409	2,690
Office Supplies	0	1,404
Patient Care	3,426	4,194
Ponting Foundation Payment	0	10,000
Printing	1,526	1,195
Professional Development Awards	4,229	5,801
Property Expenses Other	1,845	1,120
Rates	2,115	1,574
Repairs, Maintenance	82	891
Research Grants	73,741	59,362
Salaries	25,908	24,546
Sundry Expenses	2,509	3,002
Superannuation	1,160	1,860
Telephone, Internet	5,271	4,560
Travel & Entertainment	2,375	2,860
Total Expenses	349,646	253,373
Net Profit (- loss) for year	22,431	-74,820

David Collins Leukaemia Foundation

Balance Sheet as at 31 December 2013

	2013	2012
Assets		
Current Assets		
Cheque Account	5,695	13,867
Suncorp Investments	397,115	426,743
Acuity	36,867	70,452
Accounts Receivable	1,893	2,530
GST Refund Due From ATO	414	1,684
Prepayments	0	960
Accruals	27,250	27,250
General Purpose Investment	242,765	151,812
Special Purpose Investment	750,000	750,000
Total Current Assets	1,461,999	1,445,298
Non-Current Assets		
Building	235,000	235,000
Furniture, Fixtures	15,244	15,244
Deduct Accumulated Depreciation	-14,759	-13,235
Total Non-Current Assets	235,485	237,010
Total Assets	1,697,484	1,682,307
Liabilities		
Superannuation Payable	2,236	1,076
Trade Creditors	0	8,415
Total Liabilities	2,236	9,490
Net Assets	1,695,249	1,672,817
Equity		
Asset Revaluation Reserve	177,853	177,853
Retained Earnings	1,494,964	1,569,784
Current Year Earnings	22,431	-74,820
Total Equity	1,695,249	1,672,817

The Foundation
expresses its

SINCERE APPRECIATION

**To all Donors of money,
effort and time during the year.**

Donations of \$2 or more are TAX DEDUCTIBLE

For further information please contact:
David Collins Leukaemia Foundation of Tasmania
PO Box 372
Hobart Tasmania 7001
Telephone: +61 1300 728 533
Website: <http://www.leukaemia-tasmania.com.au>