

TO CURE

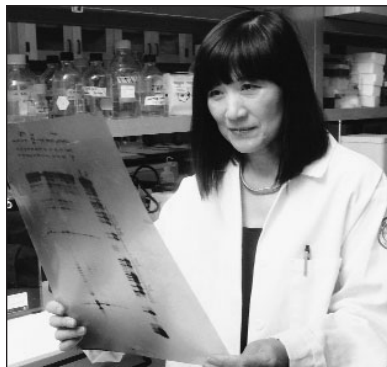
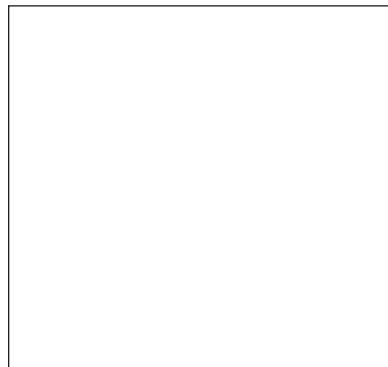
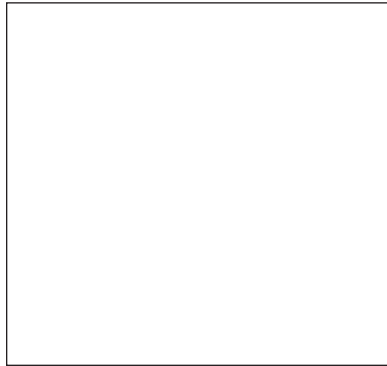
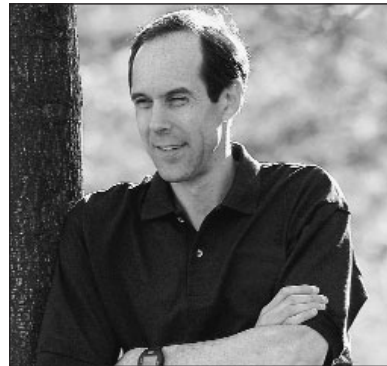
ANNUAL REPORT 2002



**The Leukemia &
Lymphoma Society®**

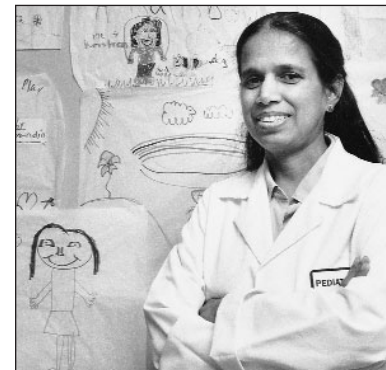
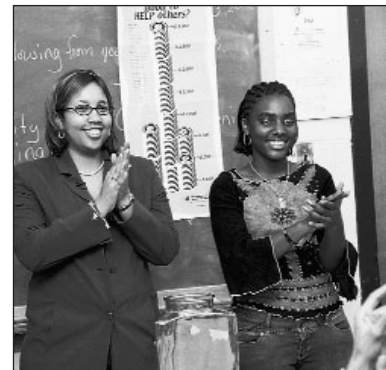
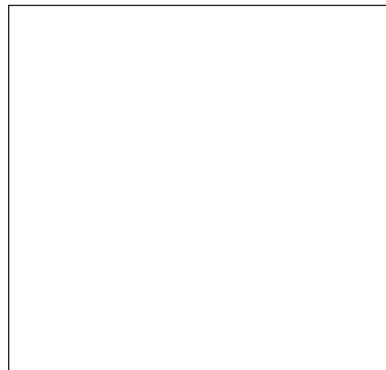
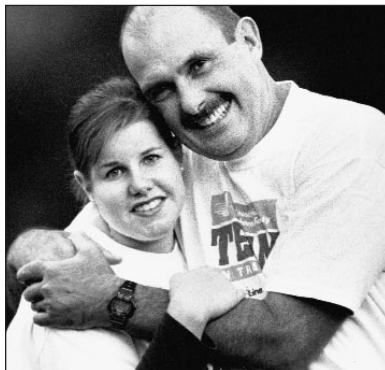
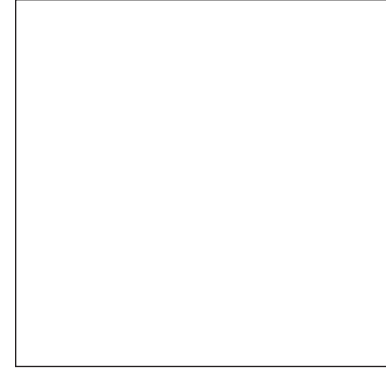
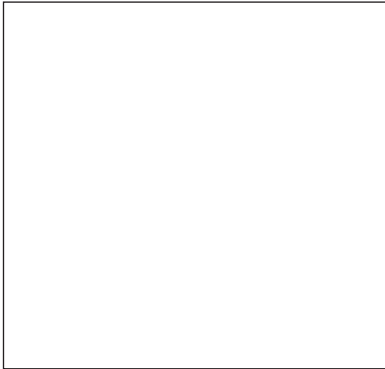
Fighting Blood-Related Cancers

THROUGHOUT THIS ANNUAL REPORT, YOU WILL FIND PICTURES OF SOME OF OUR FAMILY MEMBERS, EACH OF WHOM REPRESENTS THOUSANDS OF OTHERS, ALL WORKING IN DIFFERENT WAYS TO MAKE THE SOCIETY'S GOALS A REALITY.



THE LEUKEMIA & LYMPHOMA SOCIETY IS A FAMILY OF VOLUNTEERS, RESEARCHERS AND STAFF,
DEDICATED TO ADVANCING A COMMON MISSION:

**To cure leukemia, lymphoma, Hodgkin's disease
and myeloma, and to improve the quality of life
of patients and their families.**



Closer to Cures

Our family has a very personal reason for caring about finding cures for blood cancers. We lost a child to leukemia, and nothing can ever compensate for that loss. It is our wish that other families be spared that pain.

Over more than 20 years, I've seen the Society make strides toward a day when our wish becomes reality. Through Society-sponsored research, less toxic, targeted treatments are being discovered that save, prolong and enhance the lives of patients and their families. Every year, through Society programs, more and more patients are being reached with the information and support they need to survive blood cancers. And every year, more patients survive. But not all. Sadly, in the United States alone, we expect blood cancers to cause the deaths of more than 58,000 people this year.

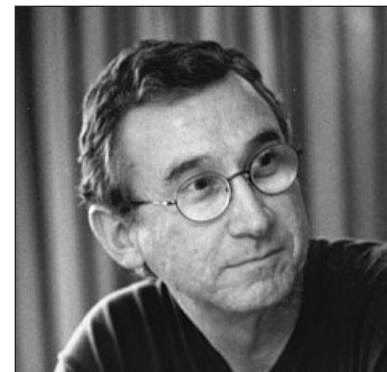
I am proud to lend my name to the Society and its work. Because of the efforts of its volunteers, staff and medical and research partners, we are closer than ever to cures for leukemia, lymphoma, Hodgkin's disease and myeloma. And I have faith that continued support for their efforts is the key to realizing those cures.



Barbara Bush
National Honorary Chair



Barbara Bush, wife to one U.S. president and mother to a second, has been an honorary trustee of the Society since 1972.



Norbert J. Sieber, Chairman of the National Board of Trustees through 2004, has volunteered through the Society's Western Pennsylvania & West Virginia Chapter for more than a decade.

Dwayne Howell and David Weild IV, NASDAQ Vice Chairman, at the opening of trading on April 17, 2002 in New York City.

Advancing our Mission

In Fiscal Year 2002, the Society faced the severe new challenges issued by global uncertainty and economic upheaval. In a suddenly changed environment, our volunteers and staff responded by working even harder and in closer partnership, making creative use of every resource at their disposal to advance our mission. The tests they confronted required unprecedented teamwork, some sacrifice on every front and the benefits of earlier financial planning and technology investments. But at the end of the year the Society emerged stronger than before. Revenues rose slightly to an all-time high of \$151.5 million, and our ability to serve and support the people who rely on us was uncompromised.

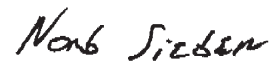
The Society funded \$376 million in blood cancer research this year – a \$1.5 million increase over Fiscal Year 2001 – underscoring our commitment to mission. Investments in research brought the wonderful dividend of less toxic, more life-enhancing and life-prolonging treatments for patients.

Our Specialized Center of Research (SCOR) Program welcomed a new team at the Fred Hutchinson Cancer Research Center in Seattle. There, Irwin Bernstein, M.D., leads a group of investigators studying the *Immunotherapy of Hematological Malignancies*, arming immune cells or antibodies with toxic agents to kill cancer cells without affecting normal ones. These approaches, if successful, will offer hope to thousands of blood cancer patients, whose inability to tolerate non-targeted toxic therapies often leaves them without access to the most effective means of combating their diseases.

The Society made significant strides toward our long-term goal of reaching all newly-diagnosed blood cancer patients, and making our services available to each of them. This year we responded to more than 200,000 requests for assistance through our Information Resource Center (IRC), patient outreach programs in our chapters across the country and our Web site.

Chapter and electronic resources helped us more than double – to 7,500 – the number of advocacy volunteers who work for our organization. On April 30, we attended a “lobby day” in Washington D.C. as part of The Blood Cancer Coalition, and celebrated congressional passage of the Hematological Cancer Research and Education Investment Act that very day.

We would like to express our tremendous gratitude to the members of our board, our volunteers, donors and staff for their resilience and ability to move forward through the winds of change, and persevere. As a result of our teamwork, we’re able to look back on 2002 with a sense of accomplishment at our progress toward cures for blood cancers, and improved quality of life for patients and their families.

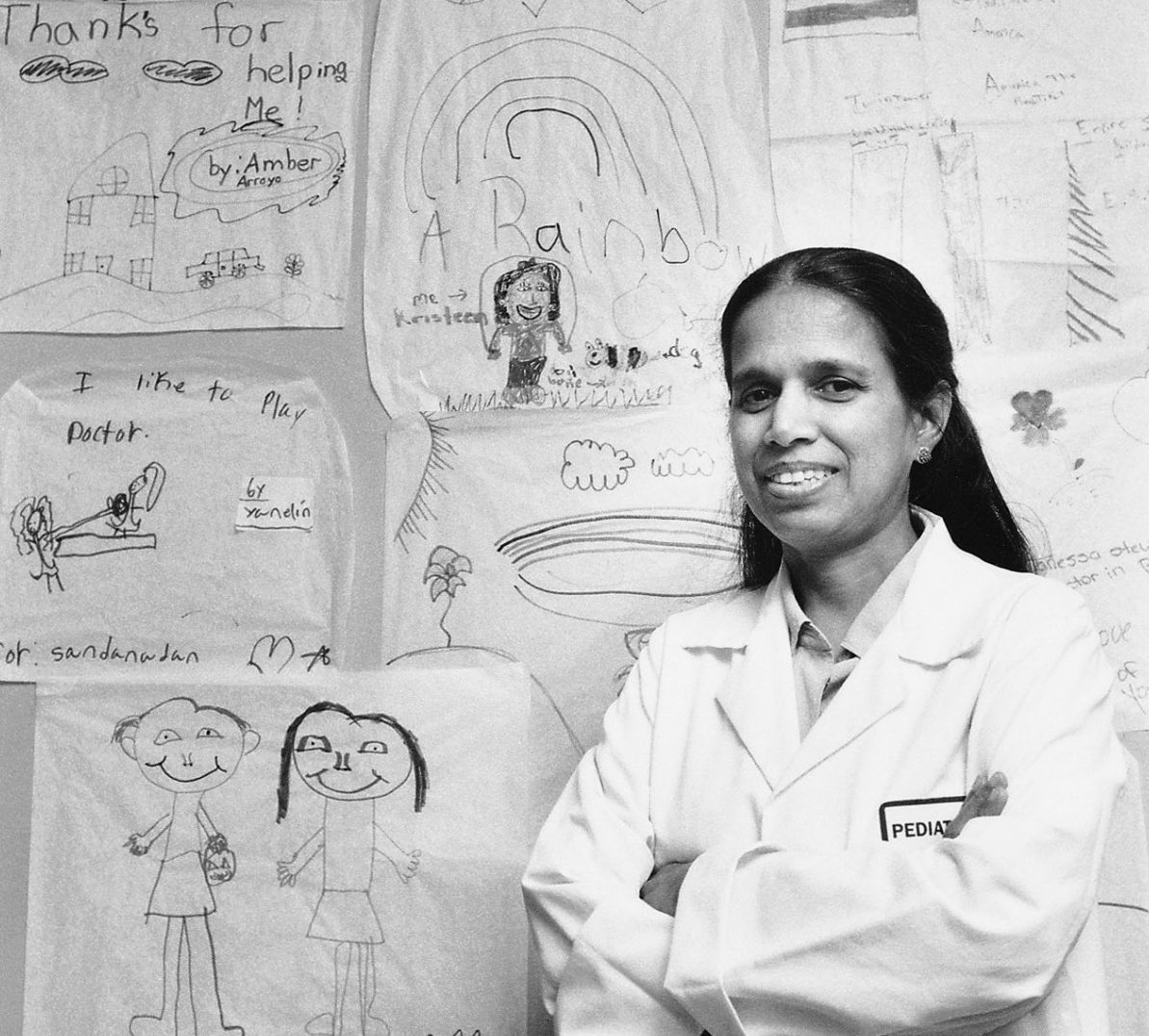

Norbert J. Sieber
Chairman


Dwayne Howell
President & CEO



Dwayne Howell has served as the Society's President and Chief Executive Officer since 1993.





LEUKEMIA

- A malignant disease of the bone marrow and blood
- Common types of leukemia are divided into four categories: myelogenous or lymphocytic, which can be acute or chronic
- Approximately 30,800 new cases of leukemia will be diagnosed in the United States this year
- Leukemia strikes 10 times as many adults as children
- It remains the leading cause of disease-related deaths among children under age 15
- Approximately 21,700 Americans will die from leukemia this year
- The five-year survival rate for children under age 15 with acute lymphocytic leukemia (ALL) is now 85 percent
- The five-year relative survival rate for leukemia is 46 percent

Note: Relative survival rate refers to an estimated percent of patients that would be expected to survive the effects of their cancer.

“We run support groups for inner city teens with blood cancers. We’re more than their doctors – we’re their counselors and confidantes. It’s a thrill to make a difference in these kids’ lives.”

DR. SADANANDAN IS CHIEF OF PEDIATRIC HEMATOLOGY AND ONCOLOGY AT BROOKLYN HOSPITAL IN NEW YORK CITY.

L Y M P H O M A

- A group of cancers that originates in the lymphatic system
- The two main types of lymphoma are non-Hodgkin and Hodgkin lymphoma (also called Hodgkin's disease)
- Approximately 60,900 new lymphoma cases will be diagnosed in the United States this year
- The relative survival rate for patients under age 20 with Hodgkin lymphoma is 93 percent
- In children with non-Hodgkin lymphoma, the five-year survival rate is 78 percent
- Approximately 25,800 Americans will die from lymphoma this year
- Hodgkin lymphoma is one of the most curable cancers; the five-year relative survival rate is now 83 percent
- The five-year relative survival rate for non-Hodgkin lymphoma is now 55 percent

M Y E L O M A

- A cancer of the plasma cells, a type of white blood cell found mainly in bone marrow
- Its cause is unknown and it is the most intractable of the blood cancers with survival at only 30 percent
- Approximately 14,600 new myeloma cases will be diagnosed in the United States this year
- Eighty percent of myeloma cases occur after age 60; it is rarely found in individuals under age 50
- Incidence rates for myeloma are approximately 50 percent higher in men than in women and twice as high for African Americans than for all other races
- Approximately 10,800 Americans will die from myeloma this year

Every day, in the United States alone, more than 300 people learn they have blood cancer. Every nine minutes, someone dies.

THE SOCIETY IS STRUCTURED FOR SYNERGY, SUPPORTING RESEARCH AND PATIENT SERVICES FOR ALL MAJOR BLOOD CANCERS



“As director of the Society Specialized Center of Research for Multiple Myeloma, I coordinate four synergistic teams to investigate the development and control of myeloma. We expect this to lead to new and better therapies for myeloma patients.”

SELINA CHEN-KIANG, PH.D.,
SOCIETY-FUNDED RESEARCHER, WEILL MEDICAL
COLLEGE OF CORNELL UNIVERSITY, NEW YORK, NY

To cure leukemia, lymphoma and myeloma...

Discovering cures through leading-edge research

This year, we continued full speed ahead with advances toward cures. We supported scientists at the forefront of blood cancer research around the world through our Career Development Program, Translational Research Programs and Specialized Center of Research (SCOR) Program, now in its third year.

The Leukemia & Lymphoma Society is structured to provide high potential for superior returns on our cancer research investment. This advantage stems from the scope, magnitude and focus of our funding. Our researchers work across all blood cancers, at levels of funding that create economies of scale. As a nonprofit organization, we fill the void created by government and corporate-funded research by awarding grants to projects with higher risk/reward profiles.

Society sponsored research on leukemia, lymphoma and myeloma this year ranged from basic genomics (gene structure and function analysis) to studies utilizing advanced technologies like DNA microarray chips to diagnose illness and seek cures. Much of the research we support focuses on turning hard science into life-enhancing treatments that increase survival rates and enhance the quality of life of patients and families.

This year, 23 new Translational Research awards were granted and six renewals were made for programs approaching clinical trial stages. Seventy-four new awards went to researchers in our Career Development Program.

\$37.6 million was granted to 481 individual researchers or projects in 15 countries on five continents in 2002.

Making important progress

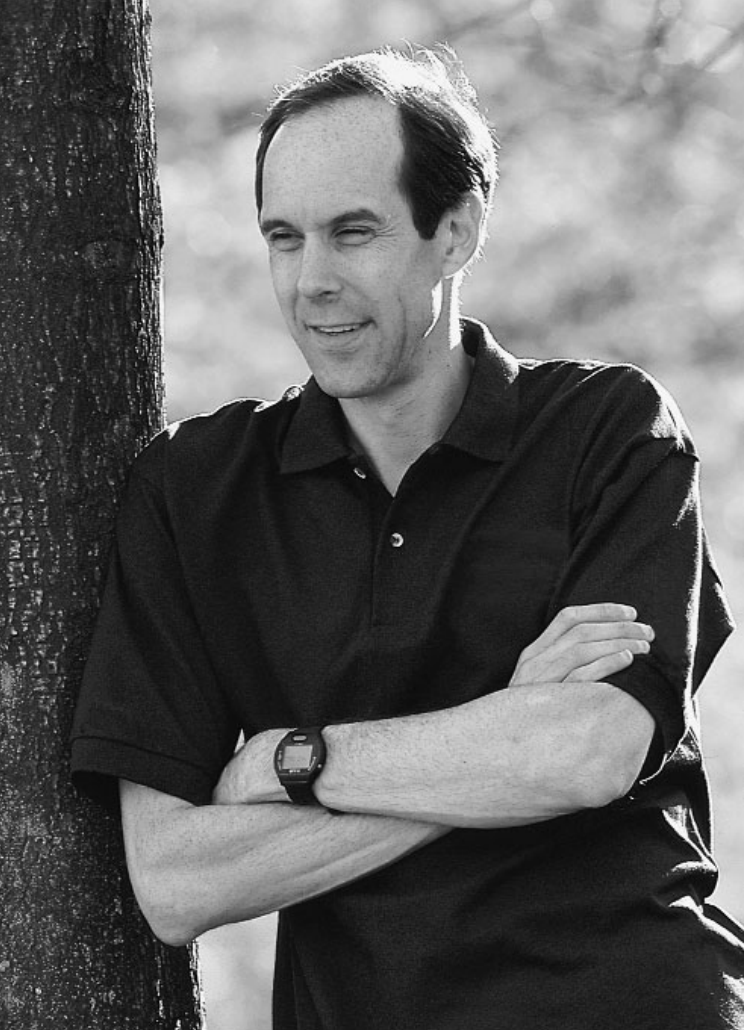
IN 2002, THERAPEUTIC ADVANCES WERE MADE ON ALL DISEASE FRONTS ...

LEUKEMIA – In May, Gleevec™, the breakthrough therapy that kills cancer cells without harming normal ones, was shown to be superior to standard therapies used to treat chronic myelogenous leukemia (CML) patients. Brian Druker, M.D. pioneered the successful application of Gleevec to a smaller group of CML patients who were resistant to other therapies. Along with his Specialized Center of Research team, Dr. Druker is now performing clinical trials of Gleevec in combination with other chemotherapeutic agents to see whether patients can achieve a long-term remission.

Two clinical trials for patients with acute myelogenous leukemia (AML) are being conducted by Society researchers. One is headed by James Griffin, M.D., of the Dana-Farber Cancer Institute and the other by Donald Small, M.D., Ph.D., of The Johns Hopkins University. These trials use new molecularly-targeted drugs that inhibit the growth-signaling molecule, FLT-3. These new therapies may help limit the growth of AML cells without harming normal cells. If so, these drugs could add to the arsenal of more effective, less toxic ways to fight leukemia.

MYELOMA – Robert Orlowski, M.D., Ph.D. is testing a new class of cancer-fighting drugs called proteasome inhibitors. One of these, currently in clinical trials, is PS-341. This drug blocks the breakdown of proteins – a group of large molecules that carry out most of the cell's functions and are the building blocks of the cell. Myeloma cells appear to be particularly sensitive to this drug. Patients are responding with reduced numbers of cancer cells and alleviation of symptoms, including the severe bone loss and bone pain that is a hallmark of this blood cancer. Dr. Orlowski works at the University of North Carolina at Chapel Hill. He is supported by a Translational Research grant from the Society.

LYMPHOMA – Margaret Shipp, M.D. has found a gene that predicts the aggressiveness of diffuse B cell lymphomas. Her research may allow early identification of the more aggressive diffuse lymphomas that do not respond well to current therapies. Those patients who do not respond well to standard therapy are at higher risk for relapse but may be good candidates for early stem cell transplant or more aggressive chemotherapy. Dr. Shipp, of the Dana-Farber Cancer Institute, is supported by a Translational Research grant from the Society.



“The Society funded my research at a critical time in my career and at a crucial point in the development of Gleevec as a treatment for chronic myelogenous leukemia. Now Gleevec is the frontline therapy for all patients with CML.”

BRIAN DRUKER, MD, SOCIETY-FUNDED RESEARCHER, OREGON HEALTH & SCIENCE UNIVERSITY

Leading the way with Specialized Centers of Research

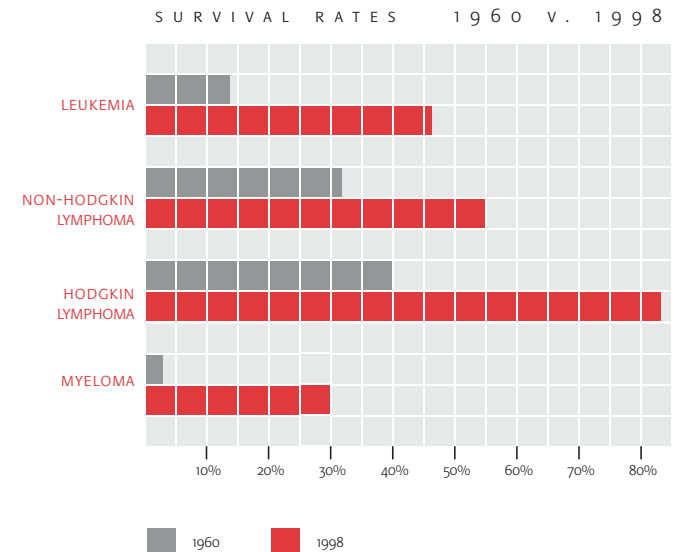
The Society’s Specialized Center of Research (SCOR) program is a one-of-a-kind research initiative. It assembles teams of world class researchers across a range of scientific disciplines and research institutions to accelerate the discovery of breakthrough therapies for leukemia, Hodgkin and non-Hodgkin lymphoma, and myeloma. There are now seven SCORs around the world, with combined, multi-year funding totaling \$52.5 million.

In 2002, a SCOR grant was awarded to Irwin Bernstein, M.D., of the Fred Hutchinson Cancer Research Center in Seattle, WA. His team is studying ways to make effective lymphoma and leukemia therapies less toxic, making them accessible to thousands of patients who would not otherwise be able to tolerate them.

We’re winning the battle...but the war rages on.

The five-year survival rates for leukemia, lymphoma and myeloma display vastly uneven rates of improvement.

- Survival for leukemia patients has more than tripled since 1960.
- Survival for Hodgkin lymphoma has improved dramatically, yet non-Hodgkin lymphoma has not fared as well.
- Myeloma remains the most recalcitrant of blood cancers, with survival rates the least improved over the past 30 years.



TO LEARN MORE ABOUT OUR
ADVOCACY PROGRAM, OR TO
VOLUNTEER, CALL 703.535.6650
OR VISIT OUR LEGISLATIVE
ACTION CENTER AT
WWW.LEUKEMIA-LYMPHOMA.ORG

Building our advocacy to affect public policy

As the need for additional resources became more critical during the year, volunteers reached out to neighbors, friends and family in Society chapters across the nation. The result: We doubled the number of grassroots advocates to more than 7,500, representing almost every congressional district in the country.

In spring 2002, the Society joined other members of The Blood Cancer Coalition to rally legislators to our cause in a "lobby day" in Washington, DC. Over two days, advocates made more than 160 congressional visits and secured scores of commitments for additional support in key areas. Among the Society's advocates was our new International Sports Ambassador, Corina Morariu. The 1999 Wimbledon doubles champion was gearing up for a tennis come-

back just one year after being diagnosed with acute promyelocytic leukemia.

Messages delivered by Society advocates to Congress increased by 250 percent this year. They took action with petitions to representatives on critical issues such as government-supported blood cancer research, Medicare coverage of oral anti-cancer drugs and funding for patient education programs.

During the year, we counted on the continued support of U.S. Sens. Kay Bailey Hutchison (R-TX) and Edward Kennedy (D-MA), and U.S. Rep. Philip M. Crane (R-IL). Our supporters also grew to include U.S. Reps. Deborah Pryce (R-OH) and Edward Schrock (R-VA), who have spearheaded efforts for blood cancer research.

Major milestones included...

- Passage of the *Hematological Cancer Research and Investment Act* authorizing the creation of major blood cancer research and education programs
- A new \$5 million blood cancer research program at the U.S. Department of Defense
- A \$1.5 million proposal to fund public and patient blood cancer education programs

Advocacy went into overdrive in 2002. With the support of volunteers all over the country, the Society's voice for enhanced government-funded research and patient education was heard more loudly in the halls of Washington.



The Leukemia & Lymphoma Society President & CEO Dwayne Howell (left) and U.S. Rep. Philip Crane (R-IL) (right) with President George W. Bush, who signed the Hematological Cancer Research and Education Investment Act.



“Blood cancer research saved my life. I was diagnosed with acute promyelocytic leukemia in 2001. A year later, I began playing tennis again, and added my voice to those of other blood cancer advocates in Washington, D.C.”

CORINA MORARIU, WIMBLEDON DOUBLES CHAMPION AND THE SOCIETY'S INTERNATIONAL SPORTS AMBASSADOR

Ms. Morariu joined the Society and other members of the Blood Cancer Coalition at “lobby day.” Advocates visited members of Congress to build awareness of and support for issues affecting the lives of patients.

To improve the lives of patients and families...

Providing critical information and resources that prolong, enhance and save lives

The Society made significant progress toward the day when our services and support will be available to every person diagnosed with a blood cancer in the United States. Using the powerful combination of technology and human expertise, staff and volunteers made 200,000 contacts with patients and families in need of our help. These contacts were made by patient services managers at Society chapters across the country; by our Information Resource Center (IRC), where master-level professionals – social workers, nurses and health educators – responded to patient questions and concerns; and by our award-winning Web site.

- 41,000 incoming calls to our IRC...recognizing that each call is unique, and there is no formula for providing information and guidance
- Giving patients access to oncology professionals at their local chapters, through programs like *Meet the Expert*
- Handling 92,000 Web site visits to obtain disease information
- Offering hope to people by providing information and guidance on clinical trials through our search service, powered by Hopelink, which received 6,000 visits this year.



“When I learned I had lymphoma, someone who had been through treatment shared information no one else told me – that was invaluable. Now I’m doing the same for others.”

JOAN BAILEY, PHD, PROFESSOR, NEW JERSEY CITY UNIVERSITY, AND FIRST CONNECTION VOLUNTEER

First Connection is the Society’s community based, peer-to-peer support program for patients and survivors.

Helping where it’s needed, with community-based programs in 60 chapters

As part of our patient services programs at chapters throughout the country, we offer the guidance and support of people who best understand the needs of blood cancer patients and families – because they’ve experienced them first hand. Our *First Connection* program provided empathy and information on coping to more than 4,000 patients and family members this year.

**NEED HELP OR KNOW SOMEONE WHO DOES?
CONTACT OUR INFORMATION RESOURCE CENTER AT
800.955.4572 OR VISIT WWW.LEUKEMIA-LYMPHOMA.ORG**



“When you’re diagnosed with cancer, *where* you turn for information can affect whether you live a long and fruitful life. The Society is a ‘full service’ resource for patients with critical information and referrals for *all* blood cancer patients, as well as investments in cutting-edge research leading to cures.”

MICHAEL A. WASHINGTON, ASSISTANT DIRECTOR, NEW YORK BLOOD CENTER,
AND A MYELOMA SURVIVOR

For information on leukemia, Hodgkin and non-Hodgkin lymphoma or myeloma, call 800.955.4572 or visit www.leukemia-lymphoma.org

Sharing information with innovative technology-based educational programs

When blood cancer is diagnosed, treatment information can make a major difference in outcomes. The Society offers patients the opportunity to learn about the latest treatments, find out about clinical trials, ask questions of the experts and hear what others with similar concerns have to say. This knowledge arms people with the information they need to make critical decisions and go forward. A variety of programs became available in Fiscal Year 2002, covering a range of subjects, from specific disease education to issues-oriented topics such as how to cope with a blood cancer diagnosis. A few examples:

- *Myeloma: New Developments in Treatment and Research*
- *New Updates in the Treatment of Chronic Myelogenous Leukemia*, sponsored by Novartis Pharmaceuticals
- *Targeted Therapies for Lymphoma*, sponsored by IDEC
- *Cancer: Keys to Survivorship*, sponsored by Ortho Biotech.

Society Webcasts and teleconferences are archived on our Web site for ongoing access.

Presenting cutting-edge educational programs for medical professionals

Information-sharing is critical to patients because not every oncologist practices at a research hospital or has immediate access to the latest scientific discoveries.

Every year at the annual meeting of the American Society of Hematology (ASH), The Leukemia & Lymphoma Society sponsors a symposium in which investigators working on the newest advances in blood cancer research present their findings. The symposium is attended by more than 8,000 physicians and scientists in the field of hematology from all over the world.

In Fiscal Year 2002, the Society presented *Application of the New Biology to the Diagnosis and Treatment of the Hematologic Malignancies*. The program included information on new treatments for lymphoma and leukemia; the latest molecular diagnostic techniques for drug selection; the importance of proteomic methods for identifying critical targets for new drug development; and, drugs in the pipeline that act on specific molecular targets.



“I expanded our program to include both in-patients and out-patients, and the content is balanced. The first hour is educational and in the second, we deal with patient’s emotional needs.”

SANDY ALLEN-BARD, NP, ANCC, OCN, NURSE ONCOLOGIST AND VOLUNTEER

Ms. Allen-Bard is an Adult Nurse Practitioner at Weill Medical College of Cornell University and New York Presbyterian Hospital, New York, NY

The Society is the world's largest voluntary health organization dedicated to blood cancer research, education and patient services

Advancing our mission through the generosity of others

As a nonprofit, we rely on key members of our Society family — individuals, corporations, foundations and small- and medium-sized businesses — who serve the Society's interests in diverse and ever-growing ways.

While economic circumstances imposed difficulties all around this year, our supporters rose to the occasion. Donors stood fast and even grew in numbers. Community support and spirit was unflagging.

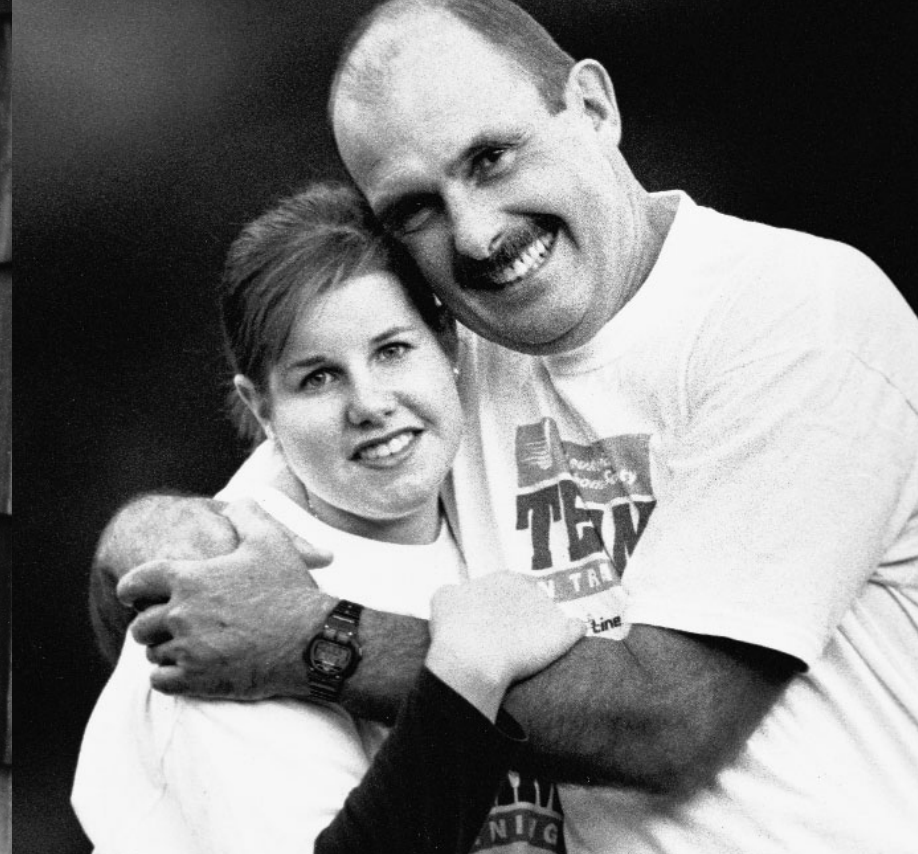
- Our fall Light The Night® Walk events across the country were scheduled during a time of national crisis following the tragic events of September 11. In many cases, re-scheduling or even cancellation was required. In spite of this, the Walks raised more dollars in Fiscal Year 2002 than in the prior year. This was accomplished with the assistance of community volunteers and the generous financial contributions and employee participation from Novartis, Verizon and others.

- Team In Training® (TNT), the world's largest endurance sports training program, faced similar challenges. When national air travel fell by 15 percent, our travel-dependent TNT program was kept from foundering by a quickly-implemented change in focus to events that were within driving distance of the majority of our TNT runners, walkers and cyclists.



“We like to do whatever we can to help. When we tell our friends and neighbors about the research the Society funds and how many people benefit from their services, most are happy to help.”

DAVE & CATHY SWEZEY, NEIGHBORHOOD CAMPAIGN VOLUNTEERS



“We created TNT in 1988 in honor of my daughter Georgia, who was diagnosed with ALL when she was two. Since that was the first year of TNT, we had nothing to follow except our instincts, and a strong desire to help the Society raise funds for blood cancer research.”

BRUCE CLELAND, VOLUNTEER FUNDRAISER AND FOUNDER, TEAM IN TRAINING

The Society's Team In Training is the world's largest endurance sports training program that provides coaching and support for people to participate in marathons, cycling and triathlon events. It has raised \$430 million since its inception.



“Middle school kids can get so involved in their own issues that they fail to see the bigger picture. Part of my job is to help them see the value in doing something that benefits others. School & Youth makes that part of my job easier.”

RANIECE GREEN, SPECIAL EDUCATION TEACHER AT KENMOOR MIDDLE SCHOOL IN LANDOVER, MD, WITH HER EIGHTH GRADE STUDENT, ALEXANDRA RANDOLPH

- Support for our cause came from people of all ages and every corner of the country. Toward the end of the year, multi-platinum recording artist Mandy Moore, the National Honorary Chairperson of our School & YouthSM Programs, visited Orange High School in Orange, CA, to celebrate the school's status as the country's highest School & Youth fundraisers. Students at this school raised more than \$31,000.
- We also relied on the efforts of our team of Celebrity Stars to help build awareness of and support for our causes. Cindy Crawford and Dan Jansen starred in public service announcements on the Society's behalf.

All in all, the Society family pulled together when it counted most.

We would like to express our gratitude to the countless individuals, companies and other organizations who made our achievements possible this year – for their valuable time, financial support, services, employees and products along with their creativity and passion for curing blood cancers.

The Society's vision to find cures for blood cancers is shared by many: the researchers who will unlock the cures, the donors who fund them, a national network of volunteers and the staff that supports their efforts.



“I invest my time and money in the Society because I’m confident that my contributions will have a positive impact on the lives of people with blood cancer, and their families.”

ALEXANDRA MAYES BIRNBAUM, MEMBER, NATIONAL BOARD OF TRUSTEES AND MAJOR DONOR

Our Visionaries See Hope in the Future

Research Grants

Specialized Center of Research¹

Jerry Adams, PhD - 2002
Walter & Eliza Hall Institute
of Medical Research

Irwin Bernstein, MD - 2005
Fred Hutchinson Cancer
Research Center

Selina Chen-Kiang, PhD - 2001
Weill Medical College of
Cornell University

Brian Druker, MD - 2001²
Oregon Health & Science University

James Griffin, MD - 2001
Dana-Farber Cancer Institute

Carl June, MD - 2002
University of Pennsylvania

Stephen Nimer, MD - 2002³
Memorial Sloan-Kettering
Cancer Center

Career Development Program – Scholars

Francisco Asturias, PhD - 2002
Scripps Research Institute

Donald Ayer, PhD - 1999
University of Utah School of Medicine

Ravi Basavappa, PhD - 2000
University of Rochester

Timothy Behrens, MD - 1998
University of Minnesota

Katherine Borden, PhD - 2001
Mount Sinai School of Medicine

James Bowie, PhD - 2002⁴
University of California at Los Angeles

Emery Bresnick, PhD - 1998
University of Wisconsin at Madison

Stephen Buratowski, PhD - 2000
Harvard Medical School

Anthony Capobianco, PhD - 2002
University of Cincinnati

J. Don Chen, PhD - 2001
University of Massachusetts
Medical School

Zhijian Chen, PhD - 2005
University of Texas Southwestern
Medical Center

Genhong Cheng, PhD - 2001
University of California at Los Angeles

Jonathan Chernoff, MD, PhD - 1998
Fox Chase Cancer Center

K.M. Coggeshall, PhD - 1999
Oklahoma Medical Research Foundation

Pamela Correll, PhD - 2005
Pennsylvania State University

Patricia Cortes, PhD - 2002
Mount Sinai School of Medicine

Chris COUNTER, PhD - 2005
Duke University Medical Center

Gay Crooks, MB, BS - 2000⁵
Children’s Hospital at Los Angeles

George Daley, MD, PhD - 2000⁶
Whitehead Institute for
Biomedical Research

James De Caprio, MD - 1998
Dana-Farber Cancer Institute

James De Gregori, PhD - 2001
University of Colorado Health
Sciences Center

Michael Eck, MD, PhD - 2005
Dana-Farber Cancer Institute

Laurence Eisenlohr, PhD - 2000
Thomas Jefferson University

Mark Ewen, PhD - 1998
Dana-Farber Cancer Institute

Susan Forsburg, PhD - 1998
Salk Institute for Biological Studies

Alan Friedman, MD - 1999
Johns Hopkins University School
of Medicine

Xiang-Dong Fu, PhD - 1998
University of California at San Diego

Margaret Goodell, PhD - 2002⁷
Baylor College of Medicine

Jonathan Graff, MD, PhD - 2002⁸
University of Texas Southwestern
Medical Center

Michael Grusby, PhD - 1998
Harvard School of Public Health

Wei Gu, PhD - 2002
Columbia University

Anthony Imbalzano, PhD - 2000
University of Massachusetts
Medical School

Theodore Jardetzky, PhD - 2002
Northwestern University

Dong-Yan Jin, MD, PhD - 2002
University of Hong Kong

Jae Jung, PhD - 2001
New England Regional Primate
Research Center

Mark Kamps, PhD - 1998
University of California at San Diego

William Kerr, PhD - 2005
University of South Florida

1. The Specialized Center of Research Grant Program is funded in part by generous gifts from General Motors & Eli Lilly and Company.

2. The Specialized Center of Research Grant of Dr. Brian Druker is funded in part by generous gifts to the Society from the Bertelsen Family, Cell Therapeutics, Inc. & the Miesel Foundation.

3. The Specialized Center of Research Grant of Dr. Nimer is funded in part by a generous gift to the Society from the John & Shirley Davies Foundation.

4. Dr. Bowie is funded in part by a generous gift to the Society from Parents Against Leukemia.

5. Dr. Crooks is funded in part by a generous gift to the Society from The Gail Cohen Leukemia Fund.

6. Dr. Daley, a Stephen Birnbaum Scholar, is funded by a generous gift to the Society from The Stephen Birnbaum Foundation.

7. Dr. Goodell, a Stephen Birnbaum Scholar, is funded by a generous gift to the Society from The Stephen Birnbaum Foundation.

8. Dr. Graff is funded by a generous gift to the Society from St. Valentine’s Day Luncheon & Style Show.

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9. Dr. Nucifora is funded in part by a generous gift to the Society by Dr. Scholl Foundation.

10. Dr. Pandolfi is funded by a generous gift to the Society from the Reichman Memorial & Altschul Foundation.

11. Dr. Sakamoto is funded by a generous gift to the Society from the Edward Fifer Estate.

12. Dr. Bhatia is funded by a generous gift to the Society from The Chuck Griffin Memorial Research Program.

13. Dr. Byrd is funded by a generous gift to the Society by The Michael Sweig Foundation.

14. Dr. Matthews is funded in part by a generous gift to the Society from the Darcy Valentine Research Fund.

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15. Dr. Imai is funded in part by a generous gift to the Society from Pearl Sellenriek.

16. Dr. Lee is funded by a generous gift to the Society from the Hildegarde D. Becher Foundation.

17. Dr. Reif is funded in part by a generous gift to the Society from the Northern California Division Board & Staff.

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18. Dr. Stanford is funded by a generous gift to the Society from The Karyn Glick Special Fellowship.

19. Dr. Booden is funded by a generous gift to the Society from Pearl Sellenriek.

20. Dr. Cannon is funded by a generous gift to the Society from The Richard D. Frisbee III Foundation.

21. Dr. Ferrando is funded by a generous gift to the Society from the Chris P. Tkalecic Foundation.

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22. Dr. Kim is funded in part by a generous gift to the Society from Delora Sanfilippo in memory of Hank Morine & Bob Stauffer.

24. Dr. Richardson, the GlaxoSmithKline Gertrude B. Elion Fellow of The Leukemia & Lymphoma Society, is

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funded by a generous endowment from GlaxoSmithKline Foundation & GlaxoSmithKline, Inc.

25. Dr. Shah is funded by a generous gift to the Society from the Mary D. Averbook Memorial Research Fund.

26. Dr. Afshar-Kharghan is funded by a generous gift from the Myeloproliferative Disorder Foundation in partnership with The Leukemia & Lymphoma Society.

27. Dr. Banker is funded by a generous gift to the Society from The Chuck Griffin Memorial Research Program.

28. Dr. Cheng is funded in part by a generous gift to the Society from LoveLifeArt for C.J. McKinnis.

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29. Dr. Felix is funded in part by a generous donation from The Gold-Diggers, Inc.

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35. Dr. Tighe is funded by a generous gift to the Society from The Chuck Griffin Memorial Research Program.

36. Dr. van Rhee is funded by a generous gift to the Society from the Kim King Multiple Myeloma Research Fund.

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38. Dr. Weinberg is funded by a generous donation from the Jim Jacobs Charitable Foundation & the Jim Jacobs Endowment Research Fund.

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Hugh Albora	John A. Geoghegan	John & Patty McDonald	Mary-Gail Smith
Peter Alexas	Richard & Jacqueline Geswell	Thomas & Olive McDonald	Mr. & Mrs. Robert Smith
Bruce Allen	Noreen L. Giese	Dorothy McCann	Russell D. Smith
Fay Allen	Heather Girard	Sylvia McGovern	Nicoma Sobolewski
Mr. & Mrs. David Andrews	Wade Goehring	Carolyn E. McKown	John C. Sorrell
James & Eileen Andrews	Richard Goldberg	Joshua Mitchell, MD	Elda Spano
Mr. & Mrs. Jay Barrows	Wilma Gottlieb	Ted Mociun	James E. Sparkes
Claudia & Stephen Barto, Jr.	Rebecca Ann Grajewski	Michael & Tammy Moley	Barbara A. Spiegel
Dennis Beardsley	Ruth Granat	Dennis F. Moore, MD	Thomas & Joanne Spink
Ami Berkowitz	Mr. & Mrs. Forrest Grosvenor	Joan Moran	Mark & Carol Spisak
Alexandra Mayes Birnbaum	Dan & LaDonna Gubitz	Mr. & Mrs. Thaddee F. Moreau	Paula & Phillip Stone
The Stephen Birnbaum Foundation	Mr. & Mrs. Ken Haller	Dennis Morris	Marcie Summerlin
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Lori Blum	Pat Hauer	Rodman N. Myers	Joseph Verdirame, MD
Sally Blume	Kathleen Hays, RN, MSN	Robert J. Myette	Beverly G. Warner
Robert H. & Janet Bohannon	Tom & Wendy Henry	The Honorable Robert H. Newman	Philip F. Warner
James Bolton	Catherine E. Hildreth	Robert C. Niles	Mr. & Mrs. Rubin Wallach
William Boyd	C. Brooks Hoffman	Edward Nofer III	John E. Walter
Wilburn Brewer, Jr.	Larry Hostetler	Jason North	Paul Weiden, MD
Richard Cahill	Beth Hoth	Richard F. Nourie	Vicki Weiland
Mary Carver	Jeanie Hoover *	Carolyn & Jerry O'Hara	Deborah Weinstein
Betty Chalmers	Lynn Hoover	Edward D. O'Malley	Paul & Annie Weiss
Robert Charon	Roy Hovinen	Mrs. Harry O'Toole	Mr. & Mrs. John Wempe
Pasquale R. Cheche	Dwayne Howell	Margaret Olmazu	Dr. & Mrs. Stanley A. White
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Michelle Cromwell	Anne K. Johnson	Jacqueline Anne Palmenberg	
Katherine Wageman-Cook	Harry & Donna Johnson III	Mr. and Mrs. Paul Paluch	Anonymous (101)
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Marianne Cotter	Michael Kerper	Leslea S. Pidgeon	* Deceased
Raymond Cox	Frances Keating	William Pike	
Marilyn J. Crohan	T. Corey Kipp	George Pooley	Members as of June 30, 2002
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Betsy Garrigan	Joan Maves	Irene Skomro	

Independent Auditors' Report

Board of Trustees

The Leukemia & Lymphoma Society, Inc.:

We have audited the accompanying consolidated statement of financial position of The Leukemia & Lymphoma Society, Inc. (the Society) as of June 30, 2002, and the related statements of activities, cash flows, and functional expenses for the year then ended. These consolidated financial statements are the responsibility of the Society's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audit. The prior year summarized comparative information has been derived from the Society's 2001 consolidated financial statements and, in our report dated October 5, 2001, we expressed an unqualified opinion on those statements.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of The Leukemia & Lymphoma Society, Inc. as of June 30, 2002, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

KPMG LLP

October 10, 2002

New York, NY

Consolidated Statement of Financial Position

The Leukemia & Lymphoma Society, Inc.

June 30, 2002

(with comparative amounts at June 30, 2001)

(in thousands)

	2002	2001
ASSETS		
Cash and cash equivalents	\$ 9,628	\$ 7,933
Accounts receivable	849	1,135
Legacies and contributions receivable (note 2)	4,440	4,153
Prepaid expenses	3,537	2,475
Investments, at fair value (note 3)	72,194	74,282
Equipment and leasehold improvements, less accumulated depreciation and amortization of \$4,071 and \$2,357	4,457	4,449
Total assets	<u>\$ 95,105</u>	<u>\$ 94,427</u>
LIABILITIES AND NET ASSETS		
Liabilities:		
Accounts payable and accrued expenses	\$ 11,348	\$ 9,861
Deferred revenue	4,654	3,474
Grants payable (note 4)	40,261	38,584
Total liabilities	<u>56,263</u>	<u>51,919</u>
Net assets:		
Unrestricted	34,903	38,489
Temporarily restricted (note 7)	2,819	2,929
Permanently restricted (note 7)	1,120	1,090
Total net assets	<u>38,842</u>	<u>42,508</u>
Total liabilities and net assets	<u>\$ 95,105</u>	<u>\$ 94,427</u>

See accompanying notes to consolidated financial statements.

Consolidated Statement of Activities

The Leukemia & Lymphoma Society, Inc.

Year ended June 30, 2002

(with summarized totals for the year ended June 30, 2001)

(in thousands)

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total	
				2002	2001
REVENUE					
Campaign contributions	\$ 172,542	\$ 1,714	\$ 30	\$ 174,286	\$ 178,136
Less direct donor benefit costs	(27,747)	-	-	(27,747)	(31,287)
Net campaign contributions	144,795	1,714	30	146,539	146,849
Legacies	4,206	-	-	4,206	2,550
Net interest and dividend income (note 3)	2,010	53	-	2,063	2,965
Net decrease in fair value of investments	(2,819)	(88)	-	(2,907)	(2,990)
Grant refunds	1,607	-	-	1,607	1,052
Net assets released from restrictions	1,789	(1,789)	-	-	-
Total revenue	151,588	(110)	30	151,508	150,426
EXPENSES (NOTE 8)					
<i>Program Services:</i>					
Research	39,172	-	-	39,172	37,700
Patient and community service	41,843	-	-	41,843	42,368
Public health education	28,554	-	-	28,554	26,195
Professional education	7,306	-	-	7,306	7,083
Total program services	116,875	-	-	116,875	113,346
<i>Supporting Services:</i>					
Management and general	10,573	-	-	10,573	10,151
Fund raising	27,726	-	-	27,726	26,108
Total supporting services	38,299	-	-	38,299	36,259
Total expenses	155,174	-	-	155,174	149,605
Change in net assets	(3,586)	(110)	30	(3,666)	821
NET ASSETS					
Beginning of year	38,489	2,929	1,090	42,508	41,687
End of year	\$ 34,903	\$ 2,819	\$ 1,120	\$ 38,842	\$ 42,508

See accompanying notes to consolidated financial statements.

Consolidated Statement of Cash Flows

The Leukemia & Lymphoma Society, Inc.

Year ended June 30, 2002

(with comparative amounts for the year ended June 30, 2001)

(in thousands)

	2002	2001
CASH FLOWS FROM OPERATING ACTIVITIES:		
Change in net assets	\$ (3,666)	\$ 821
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Net decrease in fair value of investments	2,907	2,990
Permanently restricted campaign contributions	(30)	(29)
Depreciation and amortization	1,714	1,217
Changes in assets and liabilities:		
Decrease (increase) in accounts receivable	286	(101)
Increase in legacies and contributions receivable	(287)	(1,555)
Increase in prepaid expenses	(1,062)	(55)
Increase in accounts payable and accrued expenses	1,487	2,219
Increase in deferred revenue	1,180	61
Increase in grants payable	1,677	4,328
Net cash provided by operating activities	<u>4,206</u>	<u>9,896</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchases of equipment and leasehold improvements	(1,722)	(3,188)
Purchases of investments, net	(819)	(9,918)
Net cash used in investing activities	<u>(2,541)</u>	<u>(13,106)</u>
CASH FLOWS FROM FINANCING ACTIVITIES:		
Permanently restricted campaign contributions	30	29
Net cash provided by financing activities	<u>30</u>	<u>29</u>
Net increase (decrease) in cash and cash equivalents	1,695	(3,181)
Cash and cash equivalents at beginning of year	7,933	11,114
Cash and cash equivalents at end of year	<u>\$ 9,628</u>	<u>\$ 7,933</u>

See accompanying notes to consolidated financial statements.

Consolidated Statement of Functional Expenses

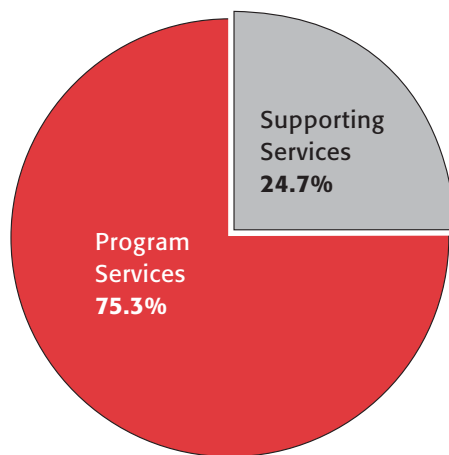
The Leukemia & Lymphoma Society, Inc.

Year ended June 30, 2002

(with comparative totals for the year ended June 30, 2001)

(in thousands)

	Program Services					Supporting Services			Total		Direct donor benefit costs	
	Research	Patient and community service	Public health education	Professional education	Total	Management and general	Fund raising	Total	2002	2001	2002	2001
	Awards and grants	\$37,648	\$ -	\$ -	\$ -	\$37,648	\$ -	\$ -	\$ -	\$37,648	\$36,106	\$ -
Financial aid to patients	-	3,405	-	-	3,405	-	-	-	3,405	4,701	-	-
Salaries	468	17,106	8,519	3,144	29,237	4,081	6,484	10,565	39,802	36,244	-	-
Employee benefits and taxes (note 5)	77	3,489	2,070	711	6,347	912	1,665	2,577	8,924	7,744	-	-
Occupancy (note 6)	19	2,089	1,299	482	3,889	583	927	1,510	5,399	4,793	-	-
Insurance	6	143	99	27	275	38	99	137	412	341	-	-
Telephone	16	995	797	172	1,980	231	1,069	1,300	3,280	3,188	-	-
Travel	25	823	504	182	1,534	229	378	607	2,141	2,601	11,447	15,772
Printing and supplies	170	4,903	6,478	916	12,467	1,798	6,698	8,496	20,963	21,117	4,680	4,622
Equipment rentals and maintenance	7	633	395	144	1,179	178	289	467	1,646	2,057	-	-
Postage and shipping	57	2,175	3,258	431	5,921	547	3,870	4,417	10,338	9,815	-	-
Meetings	228	1,256	564	204	2,252	245	397	642	2,894	3,849	5,077	5,284
Professional fees and contract services	417	3,905	3,963	702	8,987	1,479	5,314	6,793	15,780	14,827	2,665	2,546
Miscellaneous	11	321	195	76	603	90	135	225	828	1,005	3,878	3,063
Depreciation and amortization	23	600	413	115	1,151	162	401	563	1,714	1,217	-	-
Total expenses	\$39,172	\$41,843	\$28,554	\$7,306	\$116,875	\$10,573	\$27,726	\$38,299	\$155,174	\$149,605	\$27,747	\$31,287



Research **25.2%**



Patient and Community Service **27.0%**



Public Health Education **18.4%**



Professional Education **4.7%**



Management and General **6.8%**



Fundraising **17.9%**



See accompanying notes to consolidated financial statements.

Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc.

June 30, 2002

*(with comparative amounts as of and for the
year ended June 30, 2001)*

1. Organization and Significant Accounting Policies

Organization

The Leukemia & Lymphoma Society, Inc. (the "Society") is a national not-for-profit health agency dedicated to seeking the cause and eventual cure of leukemia, lymphoma, Hodgkin's disease and myeloma and improving the quality of life of patients and their families. The Society's principal activities, which are conducted through its local chapters and the Home Office, include: awarding research grants; facilitating psychosocial support groups; providing financial aid to patients; answering phone requests for blood-related cancer information made to the Society's Information Resource Center; and disseminating educational information about blood-related cancers in the form of publications, internet sites and symposia sponsorship for both the medical community and the general public.

Tax-Exempt Status

The Society qualifies as a charitable organization as defined by Internal Revenue Code Section 501(c)(3) and, accordingly, is exempt from federal income taxes under Internal Revenue Code Section 501(a). Additionally, since the Society is publicly-supported, contributions to the Society qualify for the maximum charitable contribution deduction under the Internal Revenue Code.

Principles of Consolidation

The accompanying consolidated financial statements include the accounts of the Society, which encompasses the Home Office of the Society and its fifty-nine chapters, as well as its not-for-profit affiliates, Leukemia Society Research Programs, Inc. and Leukemia Society of America Research Foundation. All significant inter-company and intra-Society accounts and transactions have been eliminated in consolidation.

Net Asset Classifications

To ensure observance of limitations and restrictions placed on the use of resources available to the Society, funds that have similar characteristics have been classified into three net asset categories as follows:

Unrestricted net assets: Consist of funds that are fully available, at the discretion of the Board of Trustees, for the Society to utilize in any of its programs or supporting services.

Temporarily restricted net assets: Consist of funds that are restricted by donors for a specific time period or purpose, as well as amounts relating to term endowment or deferred giving arrangements in which the funds must be maintained intact over the lifetimes of the donors.

Permanently restricted net assets: Consist of funds that contain donor-imposed restrictions requiring that the principal be invested in perpetuity and that only the income be used. Income earned on these funds may be unrestricted or temporarily restricted, depending upon the donor-imposed restrictions.

Contributions and Deferred Revenue

Contributions are recorded as revenue, at their fair value, when received or promised unconditionally. Contributions received with donor restrictions that limit their use are reported as either temporarily or permanently restricted revenue. When a donor restriction is met through the passage of time or fulfillment of a purpose restriction, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Temporarily restricted contributions that are received and expended in the same period are reported as unrestricted contributions. Conditional contributions are recognized as revenue when the conditions have been substantially met.

Deferred revenue includes amounts received for special events that will be held subsequent to the fiscal year-end.

Donated Services

A substantial number of volunteers have made significant contributions of their time to help develop the Society's programs and activities. The value of such volunteer services has not been reflected in the accompanying consolidated financial statements as it does not meet the criteria for revenue recognition.

Cash Equivalents

Cash equivalents consist of money market accounts and short-term investments with a maturity of three months or less from date of purchase, except for amounts held for long-term purposes reported as investments.

Equipment, Leasehold Improvements and Depreciation

Equipment and leasehold improvements are recorded at cost, if purchased, or at fair value at date of donation, if contributed, and are depreciated or amortized using the straight-line method over the estimated useful lives of the assets or the terms of the leases, if shorter.

Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the Society's management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Summarized Financial Information

The financial statements are presented with 2001 comparative information. With respect to the statement of activities, such prior year information is not presented by net assets class and, in the statement of functional expenses, 2001 expenses by object are presented in total rather than by functional category. Accordingly, such information should be read in conjunction with the Society's 2001 financial statements from which the summarized information was derived.

2. Legacies and Contributions Receivable

The Society's legacies and contributions receivable at June 30, 2002 and 2001 consist of unconditional promises to give and legacies for which the underlying wills have been declared valid by the probate court and no other conditions are required to be met. Amounts are scheduled to be received as follows (in thousands):

	2002	2001
Less than one year	\$ 3,649	\$ 3,103
1 to 5 years	600	900
After 5 years	333	333
	<u>4,582</u>	<u>4,336</u>
Less discount to present value		
(discount rate - 5%)	(142)	(183)
Total	<u>\$ 4,440</u>	<u>\$ 4,153</u>

3. Investments

The following is a summary of investments at June 30, 2002 and 2001 (in thousands):

	2002		2001	
	Cost or Donated Value	Fair Value	Cost or Donated Value	Fair Value
Money market funds	\$ 25,341	\$ 25,341	\$ 24,677	\$ 24,677
Corporate notes and bonds	27,518	27,876	32,790	32,572
Common stocks and mutual funds	21,357	18,580	17,151	16,727
U.S. Government obligations	403	339	257	248
Other	58	58	58	58
Total	<u>\$ 74,677</u>	<u>\$ 72,194</u>	<u>\$ 74,933</u>	<u>\$ 74,282</u>

Debt and equity securities are recorded at fair value as determined by quoted market prices. Mutual funds are recorded at fair value using published unit values. Investment expenses of \$305,000 and \$261,000 have been netted against interest and dividend income for the years ended June 30, 2002 and 2001, respectively.

4. Awards and Grants

Awards and grants for research are recognized as expense in the year approved by the Society's Board of Trustees. Multi-year grants, which are generally two to five years in length, are approved on an annual basis and may be terminated at the discretion of the Society's Board of Trustees. In addition to unconditional grants payable of \$40,261,000 at June 30, 2002, the Society has grant commitments of \$63,476,000 that are conditioned upon future events and, accordingly, are not recorded.

5. Pension Plan

The Society has a noncontributory, defined contribution 403(b) pension plan covering all employees meeting age and service requirements. Contributions are based on a percentage of each eligible

employee's salary and years of service. Expense under this plan aggregated \$1,644,000 and \$1,530,000 for the years ended June 30, 2002 and 2001, respectively.

6. Occupancy Expense and Lease Commitments

The leases for premises which the Society's Home Office and chapters occupy expire on various dates through January 15, 2011 and provide for certain payments subject to escalation and periodic rate increases relating to real estate taxes, operating expenses and utilities.

The approximate minimum future annual rental commitments are summarized as follows (in thousands):

Year ended June 30:	
2003	\$ 4,654
2004	4,492
2005	4,040
2006	3,360
2007	2,550
Thereafter	6,050
Total	<u>\$ 25,146</u>

7. Temporarily and Permanently Restricted Net Assets

Temporarily restricted net assets and the income earned on permanently restricted net assets were available for the following purposes at June 30, 2002 and 2001 (in thousands):

	2002		2001	
	Temporarily Restricted	Permanently Restricted	Temporarily Restricted	Permanently Restricted
Research program	\$ 1,640	\$ 1,074	\$ 2,010	\$ 1,046
Patient service and bone marrow donor programs	350	-	292	-
Professional education program	50	46	51	44
Other programs	779	-	576	-
Total	<u>\$ 2,819</u>	<u>\$ 1,120</u>	<u>\$ 2,929</u>	<u>\$ 1,090</u>

8. Joint Costs Allocation

In 2002 and 2001, the Society incurred joint costs for informational materials and activities that included fund raising appeals as follows (in thousands):

	2002	2001
Fundraising	\$ 11,986	\$ 11,407
Patient and community service	1,262	1,608
Public health education	8,060	5,488
Total	<u>\$ 21,308</u>	<u>\$ 18,503</u>

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When individuals are able to make a significant donation, there are many options. Examples are cash or appreciated securities, or inclusion of the Society in a will, trust, insurance policy or other estate

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Please join our Journey of Hope. For more information about how you can help the Society prolong, enhance and save the lives of people with blood cancers, contact us toll free at **888.773.9958**.

Thank you.

* The de Villiers Society is named for our founders, who created the Society in 1949 after losing a child to leukemia.

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