

reACT-Believe

Spring 1993, Volume 6, Issue II

AIDS Committee of Thunder Bay P.O. 3586
Thunder Bay, Ontario P7B 6E2 (807)345-1516
AIDS Infoline 345-SAFE

OAN Gathering in Thunder Bay

The Ontario AIDS Network (OAN) will hold its quarterly meeting in Thunder Bay on July 16-18.

The network is made up of more than 30 community-based AIDS organizations. If recent attendance patterns hold true, 100-150 people will participate in the weekend gathering.

This will be the third time ACT-B has hosted the OAN, having previously done so in 1987 and 1990. Member organizations take turns hosting, so the meetings move to various cities in the province.

A special part of the agenda for this meeting will be the election of the OAN's first board of directors. This is the culmination of two years of work, leading to the incorporation of the OAN and election of the first board.

A local committee of volunteers has been hard at work since February, planning the hosting details. This is a major event and will require dozens of volunteers to help it run smoothly. We will need minute-takers, information-hosts, chairpersons for meeting sessions, and there will be opportunities for volunteer work in the office before the OAN arrives.

If you can assist us with hosting the OAN, please give Sheila Berry a call at 345-1516.



Federal Government Announces Renewed Commitment in the Fight Against AIDS

For the past nine months, community-based AIDS organizations across the country have been hammering at the door of Health and Welfare Minister Benoit Bouchard. The federal funding for AIDS, including funding to local groups through the AIDS Community Action Program (ACAP), was due to expire on March 31, 1993.

Our efforts included meeting with local MPs to request their support for a renewed and enhanced commitment to federal funding. As well, a blizzard of correspondence was aimed at key

cabinet ministers and Minister Bouchard.

The Canadian AIDS Society, in partnership with the Canadian Public Health Association, the Canadian Hemophilia Association and the Canadian Association of Health Researchers, met with the Minister and presented a detailed analysis of the current level of funding and the requirements to meet the minimum needs as we proceed into the '90s. The amount needed was set at \$55.3 million. The current level of funding was set more than three years ago.

On March 11, just weeks before the expiration deadline, Minister Bouchard announced a renewed federal commitment at \$42.2 million. This commitment will extend over the next five years. The amount represents an increase of \$3 million. While any increase is beneficial, this amount is woefully inadequate, particularly because it must address the needs of the all federal AIDS strategies.

A new application process for ACAP funds means we do not know whether the ACAP program will be enhanced in Ontario, nor whether ACT-B will be assured of ongoing funding.

We wish to thank all those who assisted in the national advocacy campaign. In particular, we are grateful to Iain Angus, MP, Thunder Bay-Atikokan and Joe Comuzzi, MP, Thunder Bay-Nipigon, for their efforts on our behalf.

Michael Sobota

Volunteers: "A chance to change tomorrow"

This phrase will be displayed on the banner to be strung at the usual Southward location on North May Street this year.

The Volunteer Centre has chosen this slogan to encourage people to sign up this year and get involved in one of the more than 50 non-profit agencies in the city. It is action oriented and gives the impression that one person can make a difference!

Whether you volunteer at one project (task oriented), or give hours on a regular basis, or work on a call basis, what you give is valued. Given the cuts in spending and budgets from both the province and the feds, volunteers will pick up the slack and allow agencies like ours to continue to fundraise and keep the level of services at a high level.

Here at the AIDS Committee, we think our volunteers are exceptional. Every individual volunteer contribution is valued and appreciated. On April 19, at the Multicultural Hall on North Court Street, we will be honouring you, our dedicated volunteers for your support over the last year. The power of One, times 300 (the number of volunteers who supported us last year) helped the AIDS Committee accomplish these events; flea markets/yard sales, bingos, pancake breakfast, Healthy Sex Cabaret, **make a difference!** Candlelight Vigil, office support, newsletter production and distribution, mail campaigns, making of bedroses, sale of posters, mugs, pins, educational displays, Fun Run/Walk, plant a tree (third annual), **make a difference!** officially open our new office, answer phones, provide rides and support to clients and their families, **make a difference!** help change attitudes about HIV/AIDS, bring the Canadian AIDS Quilt to Thunder Bay, add three local panels to the Quilt, help re-organize the Resource Library, strengthen our various committees -- Fundraising, Support, Education --

make a difference!

The AIDS Committee celebrates your contribution to confronting HIV/AIDS in our community! Whether it was a one time volunteer activity or regular volunteering, collectively you logged 5777 volunteer hours last year! We the staff and Board salute each of you.

NATIONAL VOLUNTEER WEEK this year runs from April 18 to 24. The Thunder Bay Association of Volunteer Administrators (T.B.A.V.A.) will display photos of volunteers from all the non-profits. A number of draws will take place from ballots provided to volunteers. However you must bring the ballots to the mall on Friday, April the 23rd or Saturday the 24th. T.B.A.V.A. who host this annual recognition of volunteers, has chosen the theme, "VOLUNTEERS-the Heart of our Community". So stand up and be prepared to be recognized.

Sheila Berry



New Staff

Hello, my name is Ian Ritchie. I will be working with Daryle as a support services worker. I am originally from Ottawa but I have been in Thunder Bay for four years, now. I am a sociology graduate from Lakehead University and I am looking forward to working with ACT-B.

PLANNED GIVING

Are you aware of the concept of Planned Giving? Would you like to give more than you are able to afford? You plan your earnings, would you like to plan your giving? To use life insurance as a means of planned giving you will need:

- a) a donor
- b) an irrevocable beneficiary
- c) an agency

The donor purchases a Life Insurance Policy and makes the beneficiary the "Charity of his/her choice". Some of the advantages of this gift are:

- 1) The donors net donation could be much larger than he/she can afford to give in cash.
- 2) The death benefit is TAX FREE to the charity.
- 3) It does not pass through the donors estate, thus avoiding any potential problems and costs related to probate.

NOTE: You must be insurable in order to do this, eg: healthy and able to afford it. There are also other possible options such as a bequest, will or annuities. To inquire further about planned giving please call 345-1516.

Sexual Healing

The physiological changes characteristic of sexual arousal boost the immune system as well as the circulating levels of hormones and endorphins, so people feel better and heal faster, says Miriam Stoppard, author of *The Magic of Sex*. "It's a double whammy to be ill and deprived of sex." Dr. Stoppard advises that sex should not be too strenuous and the positions not too demanding, and tells readers to choose a position in which the sick partner does the least work. *Source: Glamour Magazine*

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The AIDS Committee of Thunder Bay acknowledges and thanks our various funders:

- : Ontario Ministry of Health
- : Health Promotions Branch of Health and Welfare Canada
- : Ontario Trillium Foundation
- : All of the people involved in general fundraising, which includes the local community, businesses and many individual donations.

Join us. Become a member!

Members set our course at Annual Meetings.
They are kept up-to-date about our work. They elect the Board of Directors who keep that work on track.

Membership form.

Name: _____

Address: _____

Postal Code: _____

Telephone: _____

Enclosed is: _____ \$ 10 Membership Fee
 _____ \$ 25 Supporting Membership
 _____ \$ Donation

Mail to:

AIDS COMMITTEE OF THUNDER BAY
P.O. Box 3586
Thunder Bay, Ontario
P7B 6E2

To be eligible to vote at the Annual General Meeting, your membership must be up-to-date (30 days prior to the meeting). The A.G.M. is in November. Please renew your membership now.

Please address any comments on reACT-Believe to:

P.O. Box 3586
 Thunder Bay, Ontario
 P7B 6E2

(807) 345-1516
 9:30 a.m. - 5:00 p.m.

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The opinions and medical information offered by reACT-Believe are those of the individual authors and not necessarily those of the staff or Board of Directors of the AIDS Committee of Thunder Bay. Medical information offered by reACT-Believe should be used with your own discretion. Please consult your doctor.

TAK MAK TACKLES HIV

by Steven Minuk

This article is reprinted with permission from Lexicon, an Arts and Science Magazine published eight times a year. Mailing address: 251 Harbord Street Apt. A, Toronto, Ontario M6G 1G1.



Tak Mak is an internationally-known Cancer and AIDS researcher at the Ontario Cancer Institute in Toronto. He has published more than two hundred papers on AIDS, cancer and virology and, some believe, is a future Nobel Laureate.

Credited with discovering the receptors on the immune system's T cells, he is now focusing his attention on the virus that apparently destroys them: HIV. We spoke to him about his research activities and some of the controversies now unfolding in the AIDS research field.

You recently made another discovery about T cells?

In our laboratory, we recently have been working with mice who have no T-4 cells. Surprisingly, we discovered that even when we removed all those cells, the mice still could mount an immune response. Now we're trying to determine what agent(s) in the mice were responsible for this alternate immunity, and whether an equivalent kind of cell is found in AIDS patients.

Were you surprised by the recent announcements about AIDS patients who have no trace of HIV in their blood?

No, I'm actually not surprised. I'm pretty sure that this kind of AIDS has been around for years, but since its incidence is so low, and since HIV-

related AIDS is a recent phenomenon, it didn't receive any attention. You can acquire an immune deficiency by infection with HIV, or, at a much lower incidence, through exposure to environmental factors or as a result of a congenital defect.

Because HIV-induced AIDS has become such a major health problem, and received so much media and scientific attention, these other AIDS cases became a prominent news event. In the past, they probably would have been buried in some doctor's files or reported in some scientific journal.

So you don't think these non-HIV AIDS cases mean anything?

No, I don't. I think these cases merely weren't reported before and there will always be a few people who become immunosuppressed due to environmental or other reasons.

Remember, these HIV-negative AIDS cases are spread out all over the world with no epidemiological connections. They've never seen each other, they've never shook hands, they've never exchanged body fluids, and so we have no reason to believe that they are linked. They're just spontaneous events and probably happened at the same frequency before HIV-related AIDS occurred.

Surely, evidence that you can get AIDS without infection by HIV

wouldn't be news the research community and the drug companies would want to hear. There's big reputations and money invested in the current model.

Remember, that, while there have been a few reported cases of non-HIV AIDS, millions are getting HIV AIDS. All this isn't going to change the accepted conclusion that every single one of these people is contracting AIDS through some type of fluid, be it semen or blood. All these cases can be explained using epidemiologically sound arguments and an infectious agent.

How do you respond to scientists like Duesberg who argue that retroviruses are harmless and that HIV couldn't possibly be the culprit it's claimed to be?

Duesberg likes to argue the point that HIV need not be the "cause" of AIDS. I think we all agree that HIV is not the sole cause. I believe that there are co-factors. I think that HIV is necessary but not sufficient for AIDS, but that doesn't mean HIV isn't the cause. It's part of the cause.

Most hemophiliacs who have HIV take a lot longer to develop AIDS than, say, prostitutes in Central Africa, who have a very short latency period. I think the difference is due to the fact that prostitutes in Africa get exposed to a lot of bacterial, fungal and parasitic infections.

I think, then, co-factors play a critical role and that HIV by itself does not cause AIDS like the Polio virus causes Polio after a very specific incubation period.

Why is it taking so long to produce a viable vaccine against AIDS? We've produced one for the Polio virus.

HIV has the capacity to change its protein coat with a very high frequency. The same individual may have thousands and thousands of different variants of the virus. Even though you can suppress one or two, you can't suppress them all. We know that HIV can change up to twenty-five percent of its outside coat. You don't see that extreme type of variability with the Polio virus.

If you were able to make a vaccine against one strain of HIV, that wouldn't protect you against all the other ones that can mutate.

If what you are saying is true, then there could be a lot of people out there who are infected with HIV but test negative because the test relies on a specific antibody for a specific strain.

I can't rule that out. I don't think it's likely, simply because the incidence of the disease hasn't really changed. As yet, there's no AIDS epidemic where the people affected test seronegative. We have those handful of people in the States, but they aren't epidemiologically related. HIV can change its coat to some extent, but it can't become, say, a Polio virus. We would be able to detect a mutant-strain epidemic.

What do you think of the recent hypothesis that AIDS is an autoimmune disease where the immune system essentially cannibalizes itself?

It's entirely possible that AIDS is, in part, an autoimmune disease. After all,

the virus attacks your immune system cells and your immune system then treats these infected cells as alien and tries to destroy them.

Why do antiviral drugs like AZT lose their effectiveness eventually against HIV?

AZT inhibits reverse transcriptase, which is the enzyme the virus uses to replicate its genetic code and multiply. This enzyme is, unfortunately, susceptible to mutation. As HIV alters its genetic code, at some point an "escape mutant" develops that is resistant to the drug. This is a very clear demonstration of how the evolution of a particular gene can occur.

Has AIDS research led to any new discoveries about cancer?

AIDS research has led to an interesting conclusion which we were uncertain about in the past. It's clear now that the immune system plays a pivotal role in checking the growth of cancer. Many patients who have AIDS, if they had normal lifespans, would develop a lymphoma, which is a cancer of your immune cells.

Do people who have AIDS develop cancer because they are immunosuppressed or because HIV appears to be carcinogenic?

I believe that people who have AIDS develop cancer because they are immunosuppressed. There's no evidence that HIV is a carcinogen. On the other hand, the majority of cancers in otherwise healthy people are not clearly related to immune dysfunction, and we think are a result of mutations on genes called oncogenes. Immune dysfunction is a sufficient, but not necessary, factor to develop cancer.

As a medical researcher, do you think world governments are doing enough to fund AIDS research?

This is a difficult question to answer. I think if you take the data as it is -- the number of individuals in North America affected by HIV per dollars spent -- the numbers I have, suggest we are spending forty times more on AIDS per patient than we are on breast cancer. On the other hand, if you treat AIDS as a potential timebomb that can decimate an entire population, you might say that we should spend a lot more time and money trying to conquer this disease.

In Canada, it is true that we don't spend anywhere close to what they are spending in the US per patient. At the same time, I think what is also lacking is not just money, but leadership in the area of medical research.



Book Reviews

AIDS the Spiritual Dilemma
by John E. Fortunato
Harper & Row Publishers
Copyright 1987

When I finished reading *AIDS the Spiritual Dilemma*, I felt as though I had made a new friend. John Fortunato's warmth comes through on every page. His own experience as a psychotherapist, a gay man and as an unordained leader in the Episcopal Church, are presented with clarity, sensitivity and frankness.

Although he naturally speaks from his own experience as a Christian, Fortunato does not preclude other paths on the spiritual journey, which he refers to as "the journey of the soul toward union with God". I was impressed with his sense of ecumenism, as well as his use of inclusive language throughout the book.

Fortunato looks at the many aspects of spirituality as they relate to those affected and effected by AIDS. His approach to sexual/spiritual wholeness is refreshing and enlightening. The author speaks of our need to re-embrace the sanctity of our sensuousness, to celebrate that which is God-given. He also states clearly, his belief that the church has not done well in responding to AIDS and has especially failed to help gay and lesbian people on their spiritual paths. This is addressed further in another of John Fortunato's books entitled "*Embracing the Exile: Healing Journeys of Gay Christians*".

The author's approach to the "Why AIDS?" question is one of stark honesty. This is the dilemma - how and why would God allow this horror to exist in the world? There are not now, nor have there ever been any simple answers to this question. In Fortunato's words, "... if there is no ready answer, no logical explanation for the pain of those dying, for the fear of those who are ill, for the grief of those left behind - if there is no answer, there is for us assuredly a *response*. Simply

stated, this response is love.

"Loving - loving as a verb, the act of loving - is the only way I know to bear the pain."

Overall, I would highly recommend John Fortunato's book. It is enjoyable reading and has a conversational feel. The only fault I could find is that the AIDS terminology is somewhat dated. Considering the book was written in 1987, I suppose this is to be expected. Even so, the message is timeless and powerful.

Susan Ivany

"The Essential HIV Treatment Fact Book"

by Laura Pinsky and Paul Harding
Douglas with Craig Matroka, M.D.,
P.H.D.

Published by Pocket Books, c1992
429 pages

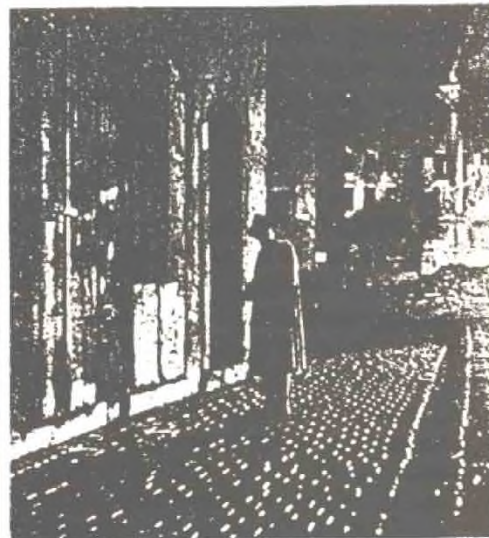
The Essential HIV Treatment Fact Book is a thoroughly researched guide to understanding HIV. The particularly wonderful thing about this book is its readability: one doesn't need to have a medical background to understand the content.

The book is divided into four sections: Early Interventions, Managing Complications, Understanding the Science and Practical Matters. Each section deals with specific issues and covers everything from antibody testing, antiviral drugs, how to work with your doctor, symptoms and diagnosis, and what you can expect emotionally. It provides practical information not only to PHA's and their caregivers, but for medical personnel, counsellors and anyone interested in getting a better understanding of the virus.

This book has already proved to be a valuable resource in my work with PHA's. I have recommended it to my clients and their doctors, and anyone looking for the definitive book on HIV.

Daryle Dollan

**ANONYMOUS TESTING IS
AVAILABLE
IN THUNDER BAY:
PHONE 625-5981**



You can now find out your individual health status concerning HIV. Anonymous HIV testing is available in Thunder Bay.

The process is simple. All you have to do is phone 625-5981 to set up an appointment. During this initial phone call, you will be asked for a first name in order to book an appointment. No other identifying information will be asked for.

At the appointment, you will receive information to explain just what the test means. During your appointment, you will receive appropriate counselling relevant to your own personal needs. A blood sample will be taken and you will be given a date and time to return for your test results. It may take 3 weeks before results are ready.

If you have any questions about anonymous testing, please call us at ACT-B: 345-1516.

Accurate, candid and up-to-date information coupled with sensitive pre- and post- test counselling is what you should receive if you choose to be tested. We're here to help assure you receive that.

ACT-B ON TELEVISION

Over the past few months, the AIDS Committee of Thunder Bay (ACT-B) has been using television to promote compassion and increase awareness of AIDS in Thunder Bay. Working with Maclean Hunter Cable TV, staff and volunteers have produced a series of informative programs airing monthly on Channel 7.

The first show in November included an introduction to ACT-B, a review of AIDS Awareness Week, and a look at the international context. The December show was a moving documentary of the "CANADIAN AIDS QUILT DISPLAY" in Thunder Bay last fall, including local panels. "THE FACES OF AIDS", aired in January, explored the impact of HIV/AIDS through the personal stories of local individuals. A live phone-in show on "HIV ANTIBODY TESTING" broadcast in February. This lively half-hour prompted a number of questions from callers. The March feature was "GOING HOME", a powerful docudrama in which four members of a rural family describe their reaction to AIDS in the family. Originally produced by the AIDS Committee of London, this program speaks eloquently and directly to the audience.

The final show of the series will be another live phone-in show on Tuesday, April 27, at 8:00 pm. This is an excellent chance for viewers to ask questions, or express their views on "THE FUTURE OF AIDS". Don't worry if you missed a show. Call 767-5511 and Maclean Hunter will air these programs as part of Viewer's Request. Copies of the programs are also available in the resource library.

The television series has been a demanding, exciting and frustrating experience. The time and effort required to put together a monthly show has been enormous, and while we started with a team of volunteers, this dwindled to a group of three. The shows that have aired have contained good material, and

there is excitement in being part of that creative process. The frustration comes from the lack of feedback about the shows. The live show on testing is the only one that has prompted any amount of viewer response.

It is clear that television has been a very important medium for the dissemination of HIV/AIDS information. Is it a medium that we as an agency should continue to use? As the producer of the shows, I have mixed feeling, and evaluation of this year's project will determine whether we continue in the future.

You can help us out with this evaluation. Please give us a phone call, and give us your feelings on the following questions.

1. Have you seen or heard about any of the ACT-B TV shows?
2. Did you gain anything from the show(s) you saw?
3. Do you think ACT-B should continue to produce TV Shows?
4. If yes, do you have any suggestions for content?

Thank you for your help in assessing this part of our programming.

David Belrose

LIBRARY RESOURCES

Over the past months, we have acquired a number of valuable educational resources for the library. If you haven't been in recently, here is a sampling of some of the new titles. Most are available for loan, but some are for reference use only.

FOR LOAN

***The Essential HIV Treatment Fact Book** by Laura Pinsky and Paul Harding Douglas

(review elsewhere in this issue)

***AIDS Video Series for Family Physicians**

six videos covering HIV management

Part 1 - Overview

Part 2 - Pre Post Test Counselling

Part 3 - Management of the HIV+ Patient

Part 4 - Oral & Gastrointestinal Manifestations

Part 5 - Dermal & Respiratory Manifestations

Part 6 - Neuropsychiatric Manifestations

***Dr. Bernard Bihari - Forum on HIV Treatment and Strategies (video)**

presentation by leading physician - two parts

***RETROVIR: Living with HIV** video on using AZT (zidovudine)

put out by Burroughs-Wellcome features Dr. Alex Klein of Toronto

***HIV AIDS Education For Nurses Practice Issues and Curriculum Guidelines**

produced by Canadian Nurses Association

***AIDS: The Drug and Alcohol Connection**

What Health Care Professionals Need To Know

especially for chemical dependency caregivers

***AIDS-PROOFING YOUR KIDS**

A Step by Step guide for parents and educators

***HOMOPHOBIA: How We All Pay The Price**

by Warren Blumenfeld

includes section on running antihomophobia workshops

***AIDS AND CANADIAN LAW**

explores range of legal issues from Canadian perspective

***TIME OUT: The Truth About HIV, AIDS and You (video)**

Magic Johnson and Arsenio Hall

VIDEOS FOR REFERENCE USE ONLY:

***DEGRASSI TALKS: SEX**

***DEGRASSI TALKS: SEXUALITY** videos/books explore issues including safer sex and sexual orientation

***LONGTIME COMPANION**

powerful feature film follows groups of friends through the 80's

Come in and take a look, or give us a call. We may have what you need.



Cabaret Sex Acts, Healthy Fun

The last Saturday in March marked the performance of the Fifth Annual Healthy Sex Cabaret. And, indeed, it included all three: health, sex and cabaret.

This year's production was hosted by the eminent and painfully hilarious Dr. Bill, who was assisted by his nurse Cloris Labeea (known internationally for her interpretive dance and apparently too, as a notorious theatre reviewer).

Dr Bill was surprisingly organized (for a doctor) and under his direction, the show was an orgasmic success. The Cabaret was brimming with extraordinary talent and a healthy variety of acts.

One of the first, Henry the Dancer, was spectacular in his gorgeously daring costumes. He looked better in a skirt than most women and, certainly, better than Nurse Labeea.

However, on this front, he was in close competition with the Pointless Sisters. Their act was well choreographed, well lip-synched and steamy. Sayble and Sue, a regular act with the annual event, again graced the Cabaret with their euphony. Their voices blended beautifully in the racy hits "Lesbians Who Wear Lipstick" and, my personal favorite, "Captain Penis."

And, speaking of euphony, Kim Erickson - stunning as always - captivated the audience with jazzy tunes by Fats Waller, George Gershwin and Billie Holiday. Her accompanist, Jamie

Philps, is deserving of the highest praise for adding a whole new dimension to the performance.

Of course, the Cabaret wouldn't be the same without the Tiny Sex Theatre, a regular feature of the show. We were also fortunate enough to see the Rubber Made's rendition of a Pulitzer Prize-winning script, revolving around a sequin-clad mystery woman, a clerk and the small, but significant, Vanity Might. The cast was no less than marvelous. "Rub," especially, was Oscar material.

"Desert Norm" Sponchia gave the evening a special kick with his musicianship. His program included a new, breathless version of "Safe Sex I" and a new composition "Give My Erection a Direction."

The Sexperts provided the intellectual portion of the evening. Dr. Bill acted as moderator and delivered an array of thought-provoking questions fielded from the audience. The Sexperts were ever-ready with a wise reply and insights into intimate sexual matters. Much was gleaned in their answers to questions, addressing issues ranging from the cunnilingual nature of Thunder Bay to the recommended sexual positions for those with a pacemaker.

A Cabaret must - Deb Patterson - came (so to speak) all the way from Winnipeg to perform. Clothed in a backless accordion, she dazzled the crowd with her lyrics and music. Deb contributed a delightful selection of her new songs, in addition to some old favorites.

All in all, the audience was treated to an exemplary show that could only leave them thirsty for more. See you next year!

Carmen Klassen



Fundraising News

The last few months have been busy ones for the fundraising department. We have been negotiating to have a convenience store sell Nevada tickets for ACT-B. Hopefully, by the time this newsletter hits the streets, the tickets will be available. This promises to be a very lucrative venture.

Also, in the planning stages are a major concert at the Community Auditorium, and an evening with comedians Romanofski and Phillipps for early in the Fall.

February saw our first recreational ski event. It was at the Lappe Ski Centre, on a beautiful spring-like day. Though the turnout was a little disappointing, we did manage to turn a small profit. We also met some people associated with the Ski Centre, who were impressed with our efforts and want to work with us to make next year's event more successful.

All on the same day in March, we had a Flea Market and our annual Cabaret. The Flea Market at Trinity Hall was another small success, except for those who shopped... they got the best deals in town.

Now, the Cabaret is a different matter. Thanks to William Roberts who coordinated the evening and to all the performers, it was a phenomenal success. Grand entertainment from some of the most talented people in Thunder Bay.

April marks the beginning of a new fiscal year. Preceding it, there has been a great deal of thought and planning focused on the budget for the coming year. The fundraising goal for the 93 fiscal year is \$75,000 (net). The Fundraising Committee thinks that with good planning and the help of our friends and volunteers, it is a reasonable goal.

To help us track our progress, we will record money coming in on a Fundraising Thermometer in the reception area of the office.

John Books