Colorectal Cancer Coalition’s Mission
To win the fight against colorectal cancer through research, empowerment and access.

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Dear Friends,

The Colorectal Cancer Coalition was founded in March 2005 with the dream of making the world a better place for people living with colorectal cancer. In 2010, we marked five years fighting against the disease.

We set out to create a force that worked on behalf of cancer patients; to fight for better research, to increase funding so that more research could take place, and to make sure patients were getting the best, most scientifically-sound information available. We planned to fund research, inform patients, and push legislation on Capitol Hill that would increase survival rates for those with colorectal cancer. That is exactly what we are doing to this day.

We enjoyed some great success in 2010, and we have you to thank.

In 2010, the Coalition gave away our 100,000th dollar to a talented colorectal cancer researcher examining pathways that might bring new hope to patients with a mutated KRAS gene for whom current epidermal growth factor receptor inhibitor drugs do not work. In this day and age of dwindling research money, innovation is hurting. In the research community, money is tight so the scientists with the cutting-edge ideas—the ones that could lead to a cure someday—are not getting the funding they need. The Coalition has made a commitment to support that kind of research until that innovative idea becomes the new standard of care.

We celebrated our biggest legislative victory to date this year. Our work on Capitol Hill directly resulted in millions of dollars for colorectal cancer research through the Department of Defense’s Peer Reviewed Cancer Research Program. That victory came thanks to our phenomenal staff that made inroads with congressional staff, our Medical Advisory Board who made phone calls to key legislators and our Call-on Congress advocates who marched up to Capitol Hill and said, “Fund this.”

I am so very proud of the advocates, volunteers and staff at the Colorectal Cancer Coalition. So many people are working together to win the fight against colorectal cancer, and they all have compelling stories to tell. That’s why the theme of this Annual Report is The Faces of Colorectal Cancer. On the following pages, you’ll learn more about some of the people who help us get the job done, and who drive us to do better.

You’ll see your donation at work in their faces and in their stories. Know that you have their and our gratitude for your support.

Together we will win the fight against colorectal cancer.

Sincerely,
Carlea Bauman
President
Education & Awareness

Our message is striking in its simplicity: Colorectal cancer can be cured in its early stages, treated successfully in later stages and, most importantly, prevented entirely through early detection.

In other words, timing is everything.

Appropriate and diligent screening makes early detection of benign polyps possible before they can grow into cancer. The goal is to find these polyps and remove them during a colonoscopy instead of waiting several decades when treatment will likely require the big guns: surgery, radiation, chemotherapy.

For many people, awareness of colorectal cancer really begins the day they hear their own diagnosis. From that day forward, the Colorectal Cancer Coalition is there for them. We answer questions, present information about treatment options, offer connections to clinical trials and explain the latest research. We share the stories of others who are fighting—all with the goal of offering hope and inspiration. We make full use of a variety of media, printed and electronic, to reach colorectal cancer patients from the newly diagnosed to those entering later stages of the disease.

Eric and Rose Hausmann of New Jersey have turned to the Colorectal Cancer Coalition many times during Rose’s ongoing struggle with colorectal cancer. They use the website regularly, consult the Answer Line about Rose’s cancer, and are participants in the annual lobbying event, Call-on Congress. They speak highly of the Coalition’s community and staff they’ve come to know and love. “It’s comforting to me to know they are out there, doing what they do to help patients and prevent others from having to suffer from this disease,” Rose said.

We share the stories of others who are fighting—all with the goal of offering hope and inspiration.
The Faces of Colorectal Cancer

Answer Line to the Rescue: A Human Voice
Corinne Capolino was not happy when her insurance declined to cover her colonoscopy. As a Lynch syndrome patient, she is vulnerable to many kinds of cancer and knows the importance of screening and surveillance. She turned to the Colorectal Cancer Coalition’s Answer Line (877-4CRC-111) for help.

“The Answer Line left no stone unturned and empowered me to challenge the denial with resources that were reliable and credible,” she reports. “As a patient with a problem, I don’t want generalities. I want information that is specific to my case.” The Answer Line provided exactly that, giving Corinne ideas on how to work within the system to get the colonoscopy covered.

Seven hundred callers were helped by the Answer Line in the past year. And word is spreading. The calls in the second half of fiscal year 2010 were 181 percent higher than the calls in the first half of the year.

Website and Facebook: Electronic Help 24/7
When Roger Rojas first learned he had colorectal cancer, one of the first places he turned was the Colorectal Cancer Coalition website at www.FightColorectalCancer.org.

“I didn’t know much about colorectal cancer and I needed to find as much information as I could, to try to grab control of the situation.”

For Roger, www.FightColorectalCancer.org was the place to go. More than 250,000 unique visitors touched base with the Colorectal Cancer Coalition website this past year and found timely, informative news posts from Kate Murphy, the Coalition’s Director of Research Communication. If the website is the site to go to for information and education, the Coalition’s Facebook page is the place to connect with new friends, find a sympathetic ear and network with others affected by colorectal cancer.

Momentum, the newsletter
How do we know the Momentum newsletter is being read? Our readers frequently take the time to tell us. Kathleen Green, Surgical Coordinator with Dr. Robert B. Noone in Wynnewood, PA, responded on behalf of her clinic after receiving just a few issues: “We certainly appreciate receiving Momentums in our offices in order to provide up-to-date colorectal cancer information to pass on to our many patients. Kindly continue to send us Momentums!”

More than 10,000 copies of Colorectal Cancer Coalition’s newsletter Momentum are distributed free of charge four times each year to subscribers, oncology offices, clinics and cancer centers throughout the country.

In addition to stories highlighting diagnosis, treatment, screening and prevention, Momentum also reports on grassroots advocacy and fundraising as well as the latest in research, policy, and medical developments that directly impact colorectal cancer patients and their families.
Research

We at the Coalition believe that the patient’s voice is vital when scientists and clinical specialists make decisions about research. “I view patient advocates as the customers of cancer research—and who develops a product without involving the customers?” explains Nancy Roach, founder and Board Chair of the Colorectal Cancer Coalition.

The Coalition puts a high priority on placing respected research advocates at every level of decision-making about research.

Nancy is often the first in the room to ask “Why do we do it that way?” A former systems analyst, she can determine when research methods serve traditional hierarchy or habit rather than patients. She sits on a committee advising the National Cancer Institute director about ways to move science faster from lab “bench to bedside.” In September 2009, she was the only patient advocate invited to a gathering of 50 elite researchers at Oxford University to discuss “sensible guidelines” for clinical trials.

Pam McAllister, the Coalition’s most senior research advocate, is often quiet in meetings. But when she speaks, researchers listen: A PhD researcher in cell biology before a rare gastrointestinal cancer forced her into retirement, she brings both scientific and patient perspectives to the national level. She worked on the American Cancer Society task force updating screening guidelines, serves on panels overseeing multisite clinical trials and is on committees monitoring patient safety in clinical trials.

Kate Murphy, the Coalition’s Director of Research Communication, is a Lynch syndrome cancer survivor. She holds in her head and heart 30 years of wisdom about both the latest science and daily realities of living with cancer. She too sits on multiple national committees and also is a familiar face at the top medical conferences every year. Most importantly, Kate is the “pipeline” back to consumers, twittering breaking news from research conferences and blogging research alerts from meetings and medical journals.
Research Actions in 2010

As both the number and seniority of Coalition advocates increase on clinical, industry and governmental advisory boards, their impact grows on the nation’s research and regulatory system. This year’s highlights included:

Founder and Board Chair Nancy Roach was invited to join the panel that set priorities and reviewed initial proposals for the Defense Department’s new research program into colorectal and other cancers. Also the Coalition obtained a grant to conduct a six-part web-based training program for those wishing to apply as future consumer reviewers.

The Coalition is active on multiple levels with the National Cancer Institute (NCI):

• NCI has 12 Cooperative Groups, which include researchers, cancer centers and community physicians. Each Cooperative Group oversees large-scale, multisite clinical trials whose findings typically define new “best practices” in cancer care. Coalition advocates serve on committees that focus on gastrointestinal cancer.

• Coalition advocates worked on supervisory committees of three SPOREs (Specialized Programs of Research Excellence) this year. These are NCI-funded programs across the U.S., chosen as innovative tests of ways to move research (laboratory, clinical or epidemiologic) faster into actual cancer treatment, diagnosis, detection or prevention.

• The Coalition was represented on NCI’s Gastrointestinal Steering Committee that helps organize Phase II and III clinical trials proposed by Cooperative Groups, as well as key disease-specific Task Forces, the NCI Patient Advocate Steering Committee, and the Steering Committee for the NCI-American Society of Clinical Oncology Clinical Trial Accrual Symposium.

Coalition-trained research advocates worked on several Food and Drug Administration (FDA) groups including the FDA Patient Consultant Program (where advocates participate in the drug approval process), and the FDA-Duke Clinical Trial Transformation Initiative (CTTI) which is defining ways to streamline the clinical research process. Also the Coalition testified before the FDA-National Institutes of Health Joint Leadership Council about how the agencies could better collaborate to translate research into approved diagnostics and therapies.

The Coalition is part of an advisory group for the new Center for Medical Technology Policy—a nonprofit organization where patients, clinicians, payers, manufacturers and researchers work together on comparative-effectiveness studies of new technologies.

“As a researcher, I know first-hand how difficult it is to secure funding for innovative cancer research. The $15 million in funding for a new peer-reviewed cancer research program will not only help attract new researchers but it will play an important role in developing new treatments for colorectal cancer.”

Dr. John Marshall

“Colorectal cancer is the third most commonly diagnosed cancer and the second leading cause of cancer death in both men and women in the U.S. However, federal funding for colorectal cancer research has lagged behind funding for other diseases, and I was pleased to support the creation of a peer-reviewed cancer research program that will help to address this disparity.”

Rep. Kay Granger (R-TX)
Dr. Rona D. Yaeger, a fellow at the Memorial Sloan-Kettering Cancer Center, was the 2010 recipient of the Lisa Dubow Research Fellows grant, administered in partnership with the American Association for Cancer Research. Yaeger is doing two-pronged research: laboratory analysis of the KRAS mutation in cancer cells, trying to inhibit specific growth-stimulating proteins and a Phase II clinical trial of a protein inhibitor found in patients with normal (unmutated) KRAS. Yaeger’s goal is to rapidly translate basic science advances into actual treatments for advanced cancer.

The Coalition’s Lisa Fund honors Lisa Dubow, who credited cutting-edge research and clinical trials with enabling her to survive late-stage cancer for nine years.

2009 Recipient: Jeffrey Chou, MD, Ph.D
Fred Hutchinson Cancer Center

Epigenetic modulation of colorectal cancer stem cells for immunotherapy

An urgent need exists for the development of better systemic therapies that target the colorectal cancer stem cell. Therefore, as the recipient of the 2009 Lisa Dubow Research Fellows grant, Dr. Jeffrey Chou studied ways to make colorectal cancer stem cells more vulnerable to the body’s own immune system.

Dr. Chou worked with both cell cultures and specially-bred mice to see if the drug decitabine could increase levels of a specific protein that induces a strong immune response. If successful, Dr. Chou’s basic research with colorectal cancer cells and mice may lead to effective vaccine therapies for colorectal cancer, killing the stem cells that keep it from being completely eliminated by conventional treatments. A combination of decitabine and a vaccine against that protein might be an effective treatment for advanced colorectal cancer.

“The Coalition and the Lisa Fund have been invaluable in supporting my project to develop an immune therapy for colorectal cancer. The grant provided supplies and technical assistance that otherwise would have been difficult to support. The data generated from the grant project allowed me to successfully apply to a three-year fellowship grant from the Cancer Research Institute to further my scientific development. I plan to continue studying the immunobiology of colorectal cancer in the hopes that this will lead to new immunotherapies which can be brought to clinical trials. For the next few years, I will continue with Dr. Edus H. Warren as my mentor as I transition towards becoming a more independent cancer researcher.”

—Dr. Jeffrey Chou
The 2008 Lisa Dubow Research Fellow, Dr. Yaguang Xi, examined the idea that a micro-RNA made colorectal cancer cells more sensitive to 5-FU and also predicted which cells, and potentially which patients, respond best to treatment with 5-FU. Knowing which patients respond best to 5-FU and then increasing its effectiveness could target therapy in both early and advanced colon and rectal cancer and improve their outcomes.

If cells from tumors with high levels of micro-RNAs don’t respond well to these drugs, it could indicate that reducing the amount of these micro-RNAs in cancer cells may increase the effectiveness of chemotherapy, thereby identifying a promising new method to improve treatment for colorectal cancer.

In addition, Dr. Xi’s research looked for micro-RNAs in the tumors of hundreds of people with stage II or III colorectal cancer who had a recurrence and attempted to determine if the presence of specific micro-RNAs correlate with a favorable or unfavorable patient outcome. This study could one day provide markers to identify patients who need aggressive adjuvant treatment after surgery to prevent recurrence.

“This project is the first one I have led as an independent private investigator. It has been an invaluable venture for me to learn and understand the strategies to successfully develop and accomplish a project. It has helped me accomplish the transition from trainee to trainer, and the experience earned from this grant will encourage me to continue pursuing success in my career as a cancer researcher.”

—Dr. Yaguang Xi
Policy & Advocacy

For the past five years, the Colorectal Cancer Coalition has been at the forefront of advocating for men and women diagnosed with colorectal cancer. As the national voice on Capitol Hill, we have played a significant role in raising the level of funding allocated for research into colorectal cancer and raising the profile of the disease. We walk the halls of Congress bringing the voice of patients to their legislators. We work with the National Cancer Institute, the Centers for Disease Control, and the Department of Defense—helping to connect policy makers and researchers with patients and survivors. The voices of our advocates have been, and will continue to be, a leading voice in the fight against colorectal cancer.

Grassroots Advocacy

The Colorectal Cancer Coalition teaches everyday people how to effectively bring their personal stories and passion to key legislators and policymakers at the national, state and community levels. We empower our national network of grassroots advocates so that they can mobilize at a moment’s notice.

Leading this national network is our Grassroots Action Committee—a group of committed, engaged volunteer advocates who take action when asked. This distinguished group of survivors and caregivers helps us continue the push for research funding, awareness, access to screening and treatment coverage.

The current and previous Committee members comprise the heart and soul of our advocacy community—inspiring, educating and empowering all our advocates and volunteers across the nation.
Grassroots Advocacy

Call-on Congress

Every March during Colorectal Cancer Awareness Month, patients, caregivers and health professionals leave their everyday lives to gather in Washington, D.C., at the Colorectal Cancer Coalition’s “Call-on Congress.” They meet face to face with elected officials to tell their personal stories and lobby for legislation to fight this disease.

For Coalition staff, it’s the culmination of a year’s worth of efforts in education, awareness, policy and advocacy. For Call-on Congress participants, it’s a chance to make friends while making a difference. Josh Wimberly discovered that in 2009 and again in 2010 when he returned with his wife Kimberly.

Young social workers from Alabama, Josh and Kimberly are passionate about social justice. They believe strongly in advocating to right wrongs.

In August 2007 at age 30, Josh was diagnosed with stage III rectal cancer. Almost without missing a beat, even while fighting Josh’s personal medical battles (six surgeries in two years, radiation, and four rounds of chemotherapy) the young couple added colorectal cancer to their list of causes. They linked arms with the Coalition and became powerful advocates.


On a personal front, Josh reports that he’s off all medications and only sees the doctor twice yearly. He is thankful, happy and “cautiously optimistic,” he says. “But part of moving on and surviving is remembering that not everyone has those outcomes.”

His wife Kimberly agrees. “People without insurance are much more likely to die from colorectal cancer,” she points out. “That’s a great injustice that needs to be changed. I see Call-on Congress as a great opportunity to change that for everyone.”

Congressional Butt-in

In 2010, the Coalition’s annual Congressional Butt-in phone blitz generated calls from every state, the District of Columbia, and Puerto Rico to more than 240 Members of Congress.

The Coalition provided both facts and a toll-free phone number connecting callers directly to their representatives’ offices, so each could tell a personal story and urge support of colorectal cancer screening legislation (H.R. 1189).
Policy Actions in 2010

• Worked with Defense Appropriations Committee leadership in both the House and Senate to secure funding for colorectal cancer. This victory is the first time the Department of Defense has ever funded colorectal cancer research. The final defense appropriations bill included $15 million in funding for research into colorectal cancer and seven other diseases.

• Worked with Congressional leaders to increase support for legislation creating a national colorectal cancer screening program for low-income, under- and uninsured people aged 50 to 64.

• Worked with both House and Senate committee leadership to increase funding for the National Cancer Institute and the Centers for Disease Control and Prevention’s programs in cancer control, colorectal cancer screening and educational outreach.

• During the health care reform debate, the Coalition worked with both Congress and the Administration on provisions affecting colorectal cancer patients, such as elimination of pre-existing condition exclusions, protections from annual and lifetime insurance limits, increased reimbursement for clinical trials participants and increased screening coverage.

• The Coalition hosted two forums; one a Congressional briefing to provide Congressional members and their staff with information about colorectal cancer and another at the National Press Club in partnership with Olympus, bringing together leading physicians and agency staff to discuss the current trends and realities in colorectal cancer screening.

• Regularly weighed in with federal agencies regarding proposed rules and regulations affecting the colorectal cancer community. For example, the Coalition filed comments with the Centers for Medicare & Medicaid Services (CMS) regarding coverage of routine patient care costs for those enrolled in clinical trials and filed comments with the Food and Drug Administration’s (FDA) ongoing transparency task force.

Collaboration

Because power comes in numbers, we work with many other advocacy organizations in the cancer community to bring the patient’s voice to every table that matters. We actively partner with other coalitions including: the National Colorectal Cancer Roundtable, the Cancer Leadership Council, One Voice Against Cancer, Alliance for a Stronger FDA, the Partnership to Improve Patient Care and the Coalition for the Advancement of Medical Research.
Fueling the Fight Against Colorectal Cancer

FightColorectalCancer.org/donate

In 2010, according to the National Cancer Institute, it is estimated that nearly 150,000 men and women in the U.S. were diagnosed with colorectal cancer.

The Colorectal Cancer Coalition staff and advocates work every day to impact the fight against colorectal cancer — and the generous support of our donors provides the fuel that makes our fight possible. The Coalition also strives to make sure that every dollar invested by our donors results in action and impact.

The Coalition is grateful that individuals choose to contribute financially and support our efforts in a variety of different ways:

Individual Gifts
Individual donations ensure the Coalition’s ongoing financial strength and ability to expand efforts in research, policy and education & awareness. Donations can be unrestricted or designated for a specific program.

Memorial and Tribute Gifts
Memorial gifts, in honor of individuals who lost their personal battle, are a powerful way to keep their spirit alive. Tribute gifts celebrate and support individuals currently fighting and surviving this deadly disease. Many gifts honor a birthday or anniversary. The Coalition recognizes those individuals honored and memorialized in each issue of the newsletter Momentum.

Lisa Fund Donations
The Lisa Fund provides an annual grant to a researcher working on treatments for late stage colorectal cancer. 100 percent of every donation to the Lisa Fund goes directly to the research grant, which is administered by the Coalition and the American Association for Cancer Research. The Coalition is incredibly grateful for the numerous individual fundraising efforts that are done to benefit the Lisa Fund. More information about Lisa Fund grants can be found at FightColorectalCancer.org/LisaFund.

Workplace Giving
Many employees, in both the public and private sectors, can give to chosen charities through convenient payroll deduction. Employees of the federal and local government as well as members of the military can designate the Coalition through the Combined Federal Campaign (CFC #78265). The Coalition is a proud member of Community Health Charities National Capital Area. Non-government employees can designate the Coalition through their Charitable Employee Giving Program.

Many companies also match their employees’ charitable gifts, effectively doubling or tripling your contribution. Ask your employer’s human resources office about their matching program or contact the Coalition if one does not exist.

Corporate Sponsors
Corporations and foundations generously fund the Coalition through program grants and event sponsorship. These grants and sponsorships play a major role in the Coalition’s ability to continue our efforts in the fight against colorectal cancer.

Individual Sponsorship Efforts
Each year, Coalition volunteers get more and more creative. A survivor organized a walkathon on the beach in Florida; multiple individuals raised money as part of their marathon or triathlon participation; a survivor organized a county-wide softball tournament; and a five-year-old girl remembered her uncle by setting up a lemonade stand. The Coalition website makes it easy for supporters to share individual stories, honor and remember loved ones, and give friends and family an easy and effective online way to express their support. Personal fundraising pages can be viewed or created at http://advocacy.fightcrc.org/personal

Planned Giving
Planned gifts provide possible tax benefits for you and predictable long-term funding for the Coalition. Donors can bequeath money or assets at their death, or set up an investment fund so the donor receives benefits during his/her life with remaining funds then bequeathed to the Coalition. Planned giving is future funding, ensuring the Coalition’s long life.

Questions? Contact Ben Basloe at (703) 548-1225 x17 or Ben@FightColorectalCancer.org.
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Jillian Gardner-Dammers
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Julie Gart
Sharon Gass
Nicole Gatti
Joe Gatto
Irene Gellen
Marie Gemmell
Diane Getz
Stacy Gianino
Monique Gibson
Lesley Gillis
Arlene Gimovsky
Sheila Ginsburg
Frank Giusto
Jessica Gleckel
Nicholas Gliserman
Martin Gold
Norma Goldblatt
Barbara Golden
Vicki Goldman
Linda Goldstein
Bernice Goldstein
Miriam Goldstein
Cheri Goldstein
Connie Goodman
Phyllis Goodman
Megan Gordon Don
Paula Gorney
Eileen Goss
Charles Gould
Monica Grabowski
Joyce Grace
Barbara Grangeia
Amy Grangeia Paridy
Jody Graves
Sue Gray
Meaghan Green
Patricia Green
Mark Grillo
Ryan Griswold
Phil Groff
Sherry Gualtieri
Jennifer Guest
Rosalie Guico
Cindy Gunja
Selma Guren
Barbara Gutmann
Brooke Haase
Karen Haase
Arianna Haft
David Haire
Robert Hale
Elka Halligman
Wendy Hammond
James Hanlon
Scott Hanlon
Michael & Judy Harfenist
Roger Harman
Julia Harrnet
Gail Harris
The Harrison Family
Linda Harrow
Teresa Hartley
Veta Hartman
Judy Hawkins
Stacey Hazeltown
Carole Heinze
Betty Heller
Louise Heller
Marilyn Heller
Joshua Henne
Molly Herman
Valerie Herrera
Angela Herctica
Bruce Hesse
Linda Heup
Maxwell Hewes
Joan Hewitt
Matthew Hibler
Robert Hickey
Kimberly Higgins
JoAnn Hinchee
Lauren Hinchee
Rachel Hitchcock
Alex Hnatov
Andrew Hoffman
Judith Hogue
Cathy Hollenbach
James Holley
Wendy Homer
Joy Hood
Sandra Horowitz-Reiff
John & Lynn Hostetler
Linda House
Leigh Howe
Tonya Hunt
Jamie Idolberg
Jaine Igleshart
Stacey Ince
Genee Isberto
Robin Iwai
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Diane Jolicoeur
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Louise Jones
Robert & Linda Jones
Lesha Jones
Gail Kadetsky
Debbie Kanh
Leah Kaier
Lawrence Kaminsky
Marlene Kanner
Anita Kaplan
Barbara Karison
Lynne Karmen
Regina Kaufman
Beth Keil
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James Kenyon
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Amy Kielkowski
Beau & Donna Kilien
Stephen Kilian
Jane Kingseed
Alden Kirkman
Katie Kleeman
Martha Klein
Shelley Klein
Benjamin Knapik
Maggie Kneip
Deanna Knobloch
Janet Knol
Kay Knoll
Jeffrey Koval
Amy Kowsalski
Michelle Kral
William Kramer
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Roger & Diane LaWarre
Ronald Lawhorne
Guy Lawrence
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Shirley Leff
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Michael Levinson
Noma Levitt
Beth Levy
Dawn Levy
Miriam Levy
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Niels Lindgren
Anders Lindgren
Maria Lindsey
Geraldine Linke
Emily Lisbon
Lucy Lodge
Rita Logan
Claudia Logston
Henry Lombard
Megan Lombard
Wendy Lopez
Jamie Lord
Dean Loughridge
Charlene Loop
Laura Lovaski
Victoria Lynott
Amy Maberry
Suzanne Macaulay
Rob MacIntyre
Lisa Macyda
David Magid
Kathleen Mahar
Christina Maiorini
Fadzi Makanda
Patrick Maloney
Gary Mankoff
Lydia Mann
Yolanda Marin
Miriam Markman
Michael Martin
Christopher Martin
Cynthia Lynn Martinez
Stella Marzot

Lora Dinardo
Doris Dingott
Kristi Dinner
Jerry Dobkin
Florence Doi
Anne Don
Alice Donadio
Patricia Donatello
Anne Donal
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Ryan Dougherty
Mercedes Dougherty
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Katherine Entwisle
Kathryn Eriksen
Sandra Erwin
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Sheila Evans
Dorlaina Fabiano
Mary Falls
Family of Lori Heflin
Elizabeth Farrell
Sherri Fedman
Deborah Fenoglio
Constance Ferrante
Robin Feuchtwang
Kimberly Field
Janet Fine
Deborah Firebaugh
Christy Fiscalini
John Fischer
Scott Flanders
Emily Flynn
Sallie Forman
Ginger Francian
Don Frank
Jessica Frieden
Tara Friend

16 COLORECTAL CANCER COALITION ANNUAL REPORT 2010

Ann Matalon
GE Matt
Ellen Matt
Diane Mazauskas
Doris Mazer
Kim Mazuzzo
Sue McBride
Joanne Cambridge
Beverley McCann
Alison McCool
Carolyn McCormack
Elizabeth McDermott
Jed McDonald
Mindy McDonald
Melanie McGuire
Lori McAlfferty
Robert McLean
Linda Bree
McLaughlin
Rick McLean
Gerard McRen
Eileen McMonagle
Anne McMullen
Angela McNab
Roseanne McNeil
Allister McRae
Jeff Meeker
Marti Miers Mefford
Stella Mendoza
Tsipi Mercurio
Kim Merendino
Marilyn Meyer
Jim & Debbie Meyers
Paul Meyris
Kristen Michalski
Tanya Milbrod
Virginia Miller
Caitlin Miller
Catherine Miller
Mary Miller
Bennett Minton
Mitchell Mintz
Maura Miraglia
Brittny Mitchell
Margery Mitnick
Deborah Mohamed
Gary Molnar
Charles & Maria Mongelli
Dara Mongelli
Rebecca Montgomery
Jennifer Montgomery
Jackie Montoya
Jerri Lyn Mooney
Carol Moran
Jane Mordhorst
Elizabeth Morgan
Catherine Morley
THANK YOU TO OUR DONORS (JULY 1, 2009-JUNE 30, 2010)

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2009/2010 Financial Highlights
Audited Statement of Activities for year ending June 30, 2010

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<td><strong>$918,982</strong></td>
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<td><strong>Total Supporting Expenses</strong></td>
<td><strong>$177,797</strong></td>
<td><strong>$177,797</strong></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td><strong>$925,571</strong></td>
<td><strong>$925,571</strong></td>
<td></td>
</tr>
<tr>
<td><strong>CHANGE IN NET Assets</strong></td>
<td>$(6,589)</td>
<td>29,300</td>
<td>22,711</td>
</tr>
<tr>
<td><strong>NET Assets, Beginning of the year</strong></td>
<td>476,605</td>
<td>47,748</td>
<td>524,353</td>
</tr>
<tr>
<td><strong>NET Assets, End of Year</strong></td>
<td><strong>$470,016</strong></td>
<td><strong>$77,048</strong></td>
<td><strong>$547,064</strong></td>
</tr>
</tbody>
</table>
This Annual Report is dedicated to the memory of former Board Member and the Coalition’s dear friend, Dr. Andrew Giusti.