



# **2020 Annual Report**

Acoustic Neuroma Association of Canada

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## President Report, Rebecca Raghubeer

I am writing to you with the greatest of admiration and appreciation for all that you have done, and continue to do, to ensure that the Acoustic Neuroma Association of Canada (ANAC) can continue to provide high quality programs to the hundreds of people and families across Canada who depend on our support and resources. It is only through your donations and support that ANAC exists.

2020 - 2021 will go down in the books as the time the world was turned upside down and many of us were forced to pivot and

adapt accordingly. No one expected a pandemic, but here we are. The good news is there is light at the end of the tunnel.

When the pandemic began, organizations across the globe were faced with a new reality that would impact how businesses functioned, challenging them to find new ways to operate and survive. ANAC was no different. As an organization, we were forced to evaluate and identify new initiatives to help us grow, sustain, and provide continued support to our members.

"You have brains in your head. You have feet in your shoes. You can steer yourself in any direction you choose."

Dr. Seuss

Today, it is with great gratitude I share with you ANAC's accomplishments over the span of the last year-and-a-half, including our 70 new members! The pandemic has allowed us to expand our reach to support more Canadians with acoustic neuromas than ever before through virtual group chapter meetings and the use of web conferencing.

This past May, the Toronto chapter recently celebrated 17 years - and we continue to grow! ANAC is pleased to announce we will be starting an Eastern Canada chapter in the coming months which will allow us to support even more Canadians.

I would like to extend a heartfelt thank you to our support group leaders, who volunteer their time and efforts to make everyone feel welcomed. Our support groups would not be possible without you!

Another huge accomplishment was ANAC's first virtual walk to raise awareness for acoustic neuromas which generated more than \$15,500. The theme for last year's event was "No one with acoustic neuroma should walk alone." All donations raised go back to our member support services. It was truly special to see everyone come together, share their personal stories to inspire others and generate awareness for ANAC. I am excited to reveal ANAC will be hosting our second annual virtual walk at the end of this summer. Our goal is to surpass funds raised last year! Stay tuned for upcoming details.



Though we saw success with our virtual walk, the event reinforced something we already know: ANAC is virtually unknown. We are a small but mighty organization. The decision was made that ANAC needs to be rebranded to help increase awareness. Presently, we are in the preliminary phase of redesigning our logo. Our new logo will represent our core values: sharing, caring, educating, and supporting.

This year is a transformational year for ANAC. We continue to look for innovative ways to continue to increase brand awareness and generate revenue to support individuals and family members impacted by an acoustic neuroma. The board recently reviewed all our existing policies and bylaws and made the necessary amendments to ensure ANAC is operating to the highest standards of governance. This year we will look at applying and securing grants.

ANAC continues to make improvements to our website and populate our Facebook page with relevant content. The website includes treatment information, resources, personal blog experiences and the ability for you to renew your membership and donate. Our Members' Forum will soon become fully operational, allowing members across the country to communicate with one another by directly sharing their questions and experiences.

Before I conclude my President's Report, I would like to acknowledge our Executive Director, board members and our Scientific Medical Advisory Committee chaired by Dr. Gelareh Zadeh. I strongly believe our team is made up of complementary skillsets and a genuine passion for ANAC's best interests. We are dedicated and understand the importance of growing and sustaining ANAC, so we continue to provide programs and resources to the communities we serve.

Each of you are at the centre of ANAC and the reason we can help so many people. Thank you! I encourage each of you to continue to spread awareness about acoustic neuromas and the value of ANAC.

Stay well and be safe,

Rebecca Raghubeer

"What you do makes a difference, and you have to decide what difference you want to make." Jane Goodall

The Acoustic Neuroma Association of Canada (ANAC) was founded in 1983 by acoustic neuroma (AN) patients Virginia Garossino, Velma Campbell and Linda Gray. Based out of Edmonton, the three women underwent acoustic neuroma surgery within a year of each other. The women had very different experiences in terms of post-treatment complications and courses of recovery. Through their challenging journey they discovered there was little information and support for Canadians dealing with the rare, benign cranial tumor. Finding strength within each other, the three established ANAC, a charitable organization designed to support the complex needs of individuals with an acoustic neuroma across Canada.

Today ANAC is a highly regarded, membership-based organization that supports acoustic neuroma patients and their families through the helpful nature of support groups and a Peer Database Registry. It is through ANAC's goal of information sharing and public education that early diagnosis may result in successful treatment for all patients. ANAC supports ongoing research of the cause, development and treatment of acoustic neuroma and other benign cranial tumors as well as promoting peer and community support.

### **VISION STATEMENT**

A World that Understands

### **MISSION STATEMENT**

To provide accurate up to date information and ongoing support to individuals with acoustic neuromas and their families to help improve their quality of life

### **GUIDING PRINCIPLES**

Guiding principles describe the broad philosophy that guides ANAC throughout its life in all circumstances, irrespective of changes in goals, strategies, etc.

- To provide support through its peer-led program to individuals who are impacted by an acoustic neuroma
- To furnish information and strategies to cope with headache, balance, vertigo, eye and facial issues experienced by those with an acoustic neuroma
- To help individuals diagnosed with an acoustic neuroma to feel comfortable making informed decisions about treatment and their health
- To collaborate with leading researchers and diagnostic and surgical experts on acoustic neuromas to ensure members receive optimum care
- To provide relevant information about symptoms of an acoustic neuroma to promote early diagnosis and successful treatment

## Organizational Governance Board of Directors



President Rebecca Raghubeer



Director Anna Gurdon



Vice - President Judy Haust



Director Nicholas Kucharew



Treasurer Adam Rochacewich



Director Americo Meneguzzi



Secretary David Tsang



Director Chrissie Rejman



**Executive Director Carole Humphries** 

## Scientific Medical Advisory Committee



### Chair

Gelareh Zadeh, MD, PhD, FRCS(C), FAANS;

Director of Krembril Brain Institute at Toronto Western Hospital, which is the largest neurosurgical department in Canada and and is considered a world leader in advancing neurosurgical care

Head of Neurosurgery at the University Health Network

Wilkins Family Chair in Brain Tumour Research

Chair and Professor, Neurosurgery Department, University of Toronto

Senior Scientist at Princess Margaret Cancer Centre

Chair of ANAC's Scientific Medical Affairs Committee

## ANAC Chapters Heart of Acoustic Neuroma Association of Canada

People diagnosed with an acoustic neuroma and their loved ones, often find help through the friendly nature of an acoustic neuroma support group. Support groups are a gathering of people who share emotional support and information through similar life experiences. Within the safety of a support group, many people are able to share the details of their experience, fears, concerns about the future, and the day-to-day challenges encountered.

ANAC currently has five active Chapters across Canada and one Chapter that provides one-onone peer support on as-needed basis. Chapter meetings which in the past were held at various locations, due to Covid 19 have been held virtually. Using technology available today has expanded ANAC's reach and facilitated participation at meetings. The focus of the Chapter groups is to share stories, exchange information, resources and offer hope and support to others.



Chapter Leaders include:

Alberta: Edmonton – Mary Jane Hradowy

**British Columbia: Courtenay/Nanaimo** – Evalyn Hrybko and Caroline Bradfield

**Manitoba: Winnipeg** – No longer meets due to low attendance Faye Gorenson will respond to inquiries

Ontario: Kitchener/Waterloo – Linda Darkes and Helen Horlings

Ontario: Toronto – Linda Steele and Kathryn Harrod

Saskatchewan – Robynne Smith

"Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has." Margaret Mead

## Achieving Our Mission Member of the AN Quarter-Century Club!



### Neil Davis MD, Montreal, Quebec

May 8<sup>th</sup>, 2021 will mark 25 years since the surgery that saved my life.

I was 21, pursuing a psychology degree at McGill and not yet sure what I wanted to do with my life, having considered medicine, dentistry, optometry, law, and even becoming a rabbi. I had broken up amicably with a long-

term girlfriend and was focused on another young lady who sat next to me in one of my classes. Aside from the fact that for some reason I couldn't hear as well in my left ear as I could in my right, life was good.

Then one morning in mid-March, my professor's voice became suddenly quiet and was replaced by an overpowering ringing in my left ear. I had experienced tinnitus before but never like this. As the day progressed, the tinnitus subsided but the hearing never returned to baseline. That night I reported the problem to my father, a medical doctor, who asked one of his ENT colleagues if he'd mind seeing me right away.

Hearing my story of years of progressive, one-sided hearing loss, the ENT referred me for an audiological assessment, and a CT scan. With the diagnosis of a 2.8 cm acoustic neuroma (AN), my life changed. The next seven weeks of MRIs, medical appointments, a trip to Providence, Rhode Island, to meet with Dr. Georg Noren, a pioneer of the then brand-new Gamma Knife treatment (not yet available in Canada) and, of course, studying for my final exams.

My last exam was on Monday, May 6<sup>th</sup>, and the following morning, I checked into the Montreal Jewish General Hospital. To this day, I'll never forget what my roommate who was in his 80's said: "For me, the heart surgery bought me a bit of bonus time, but that's about it; for you, the operation you're having tomorrow will buy you an entire future which will be yours to enjoy. Remember that as you go in."

Post-op I remember my father standing over me saying "complete success" and asking for a confirmatory symmetrical smile. I regained my balance enough to walk while in hospital, although it remains suboptimal to this day. I can cycle and ski but walking in the dark is still a challenge, as was getting used to being completely deaf in my left ear and the host of issues that presents.

The Acoustic Neuroma Association of Canada (ANAC) was a critical resource after my diagnosis and throughout my recovery. I paid it forward by joining ANAC's Board of Directors for two years until I began medical school in 1999. I also spent a year doing ANAC-related research at McGill while applying to study medicine. Not a day goes by that I don't feel grateful for the support of my family, friends and a long list of medical professionals, and for the good fortune of having been born into an era of modern medicine.

## Achieving Our Mission Lessons Learned



### Anna Gurdon, Woodbridge

Arriving at an Acoustic Neuroma (AN) diagnosis often requires the "Squeaky Wheel" approach. After a boating accident in 2012, I developed tinnitus and muffled hearing on my right side. Aside from a concussion, there was no official diagnosis by my family physician and an ENT. However, by 2016, my hearing and tinnitus was much worse, and I was getting regular headaches. A second ENT noted hearing loss, but no further investigation was done.

In January 2019, I told my family doctor emphatically, "I feel like I have a bad day every day" and wanted a referral to a third ENT. Like most, I was overwhelmed with the diagnosis. My AN was 2.2 cm. The ANAC website was helpful in explaining the issue to my children and family, and my workplace was extremely accommodating. Thankfully, also I reached out to Carole Humphries, ANAC's Executive Director and that same week attended a support group meeting, which helped me better understand my prognosis and options.

I elected to undergo translabryinthine surgery, although accepting single-sided (SSD) deafness was a hard pill to swallow. I prepared for surgery by exercising daily, preparing freezer meals, and arranging a support system to help with the kids while I was recovering. I'm forever grateful to Sunnybrook's team of surgeons, nurses, and medical staff. One-week post-op, I developed mild facial paralysis, with difficulty blinking my eye and a sloped smile. I was advised it was temporary and would go away with warm compresses and massaging. At four-weeks, I made a turnaround, and our family celebrated on New Year's Eve.

My recovery consisted of lots of power walking and returning to the gym, along with gentle yoga and engaging in social activities with friends and family. Eventually, I started to re-gain my balance with the help of a vestibular therapist. The SSD has taken time to get used to, but I've learned to: use an earplug in noisy situations; selectively pick my seat in social settings; and, be honest with colleagues and friends, telling them upfront about my SSD.

This experience has taught me some valuable lessons:

- 1) Be an advocate for your own health and get a second, and sometimes third opinion
- 2) Use a support system of family and friends, and be thankful for their love and support
- 3) ANAC is an excellent resource with invaluable services
- 4) We are lucky to live in Canada where we have access to excellent health care

Most important, embrace the change, do your research, and find your new normal. It won't be easy but please remember, there is support! "When you learn, teach. When you get, give." — Maya Angelou. It is for that very reason I joined the Board and reach out to support others.

## Achieving Our Mission Docs Team Up for a Kid: Rare Cases Call for Rare Measures



### Ben Espey, Uxbridge

It all started while listening to music in grade nine and not hearing much in my right ear. For the next few months, I only ever used the left headphone, assuming the right must be broken. Finally, I realized the problem was my ear, which I thought might just be plugged because of a cold or allergies. Boy was I wrong!

After a hearing test and a referral to an ENT, an MRI revealed a 2.5 cm mass. An acoustic neuroma (AN) was a term I'd never heard before but one I'd become far too familiar with. I just kept thinking, "How can this be possible? I'm a kid!"

As I was still a minor, I was sent to SickKids to confirm the diagnosis. The doctors explained that although the tumour was benign, it was extremely rare in children and could be very serious. I returned every three months for monitoring.

My mom discovered ANAC and reached out to its ED, Carole Humphries, who suggested she attend the 2018 World of Acoustic Neuroma Symposium. There she'd have an opportunity to approach Dr Gelareh Zadeh, head of neurosurgery at the University Health Network, who was brought on to work with a team of doctors at SickKids.

Being an active 15-year-old kid, I went on with my life -- going to school, playing hockey, and hanging out with friends – and my hearing never got much worse. The scary part was knowing I would need surgery, but not knowing exactly when. It wasn't until I was 17 that the doctors at SickKids and Toronto Western agreed we should go ahead with surgery. I had come to terms with the fact that I would most likely lose some, if not all, of my hearing in my right ear, but there were many other complications that could occur, and that was scary.

On the day of the surgery, I tried to stay as calm as possible; on the inside, I was freaking out. Conversations with the nurses in the minutes leading up to my 10-hour surgery were reassuring. When I woke up, I was first tested for loss of facial function, then taken to the recovery room where my mom was waiting for me. As my surgery was done during the Covid-19 pandemic, I was allowed only one visitor at a time, so my mom and dad alternated 24-hour shifts with me! Three days later, I was discharged and three months post-surgery, I felt almost 100 percent except for my loss of hearing. "I'm learning to live with it" and look forward to going to university to attain a business degree.

I am very thankful to all the doctors and nurses who helped me through this process and, of course, to my parents for going the extra mile to support me. I was blessed to come out of this surgery with very few issues. What I have learned is that by staying positive and surrounding yourself with positive people, you can get through anything.

## Achieving Our Mission My Acoustic Neuroma Experience



### Bill Wood, Oakville

Having experienced four episodes of horizontal double vision over two years while driving, I consulted an optometrist in 2012, who found no eye-related problems. MRI testing at a stroke prevention clinic detected an acoustic neuroma (AN) in my right ear about the size of a pea. With only mild symptoms, I opted to Wait and Scan. The double vision was later found by a neuro-ophthalmologist to be caused by mild sixth cranial nerve palsy, apparently not connected to the acoustic neuroma. To alleviate the problem, a prism was added to my eyeglasses.

In 2013, I became more symptomatic, and was afraid of losing my balance. I had increased dizziness, and an audiogram confirmed my hearing in my AN-affected ear had deteriorated. With a second MRI showing considerable AN growth, I was encouraged to consider treatment options. I had poor hearing in my left ear from a childhood accident and the acoustic neuroma affected my good ear. As surgery would have resulted in the loss of hearing in the good ear, I was referred to the Gamma Knife Centre at Toronto Western Hospital for a consultation.

Meanwhile, I discovered ANAC and have remained a member since 2013. Participating in the Toronto Chapter support meetings, has helped me tremendously as members share their experiences and given me reassurance along my journey.

In September 2013, I underwent Gamma Knife, experiencing only minor pain for a few days where the pins were used to attach the frame. Working with a vestibular therapist and continuing exercises to address my balance issues have been beneficial, as has a Bicros hearing aid, where a microphone transmits sound to a hearing aid on the better side.

My understanding is that Gamma Knife is effective in stopping acoustic neuroma growth in the majority of cases. Although follow-up MRIs in 2015 and 2016 showed that the tumour was getting smaller, an MRI in 2018 indicated regrowth. New symptoms included occasional facial twitching and a change in taste sensation, and balance problems and dizziness were becoming somewhat worse. A second Gamma Knife treatment took place in November 2018, with a follow-up MRI the following spring, showing that the tumor was shrinking. This was confirmed by an MRI in 2020. The facial twitching has since disappeared, and using a cane and Nordic poles has been helpful to maintain my balance when walking.

My understanding is that if the tumor starts to grow again, I would be a candidate for a third Gamma Knife treatment if required, although third treatments are not common. Overall, I feel fortunate.

## **2020 Financial Statements**

david b campbell CHARTERED PROFESSIONAL ACCOUNTANT

519.942.7837 of 519.941.4438 fi

13 Purple Road, Mono, Ontario L9W 3R3

#### Notice to Reader

I have compiled the statement of financial position of the Acoustic Neuroma Association of Canada as at December 31, 2020 and the statements of operations for the year then ended from information provided by management. I have not audited, reviewed or otherwise attempted to verify the accuracy or completeness of such information. Accordingly, readers are cautioned that these financial statements may not be appropriate for their purposes.

David B. Campbell Chartered Public Accountant, CA Licensed Public Accountant

May 10, 2021 Orangeville, Ontario



#### **Statement of Financial Position**

(Unaudited - see Notice to Reader)

As at December 31,		2020		2020		2019
Assets						
Current Asset						
Bank	\$	23,212	\$	15,155		
Accrued interest receivable		309		837		
Taxes recoverable		8,336		6,579		
Prepaid expenses (Note 6)		94		94		
		31,951		22,665		
Other Assets						
Term Deposits and Savings Bank (Note 3)		105,523		109,806		
	\$	137,474	\$	132,471		
Liabilities						
Current Liabilities						
Accounts payable and accrued liabilities (Note 7)	\$	2,658	\$	4,327		
Net Assets		134,816		128,144		
	\$	137,474	\$	132,471		

Approved by the Board:

Director

Director

(The accompanying notes are an integral part of these financial statements.)

### Statement of Operations and Changes in Net Assets (Unaudited - see Notice to Reader)

Year ended December 31,		2020		2019
Revenue				
Donations	\$	51,616	\$	24,437
Memberships	Ψ	9,540	φ	7,415
Fundraising		5,540		1,911
Interest		1,764		2,370
		62,920		36,133
		02,020		00,100
Expenses				
Administration contract		28,800		28,820
Advertising and promotion		35		
Bank and credit card charges		2,040		963
Fundraising		680		239
GST/HST expense		2,384		3,276
Insurance		750		750
Meetings and conference		165		1,063
Office		2,327		2,839
Professional fees		2,021		1,966
Postage		2,661		1,924
Printing		7,246		7,772
Telephone		835		689
Website		6,304		1,164
		56,248		51,465
Excess of Revenue over Expenes		6,672		(15,332
Net Assets - Beginning of Year		128,144		143,476
Net Assets - End of Year	\$	134,816	\$	128,144

(The accompanying notes are an integral part of these financial statements.)

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#### **Acoustic Neuroma Association**

#### **Statement of Cash Flows**

(Unaudited - see Notice to Reader)

As at December 31,		2020	2019
Cash Flows From Operating Activities:			
Cash receipts from donations	\$	51,616 \$	24,437
Cash receipts from memberships	•	9,540	7,415
Interest income received		2,292	2,448
Cash receipts from fundraising		2,252	1,911
Taxes recovered (receivable)		(1,757)	1,162
Cash paid to suppliers, government and contractors		(57,917)	(51,182)
		3,774	(13,809)
Cash Flows From Investing Activities			
Cash Flows From Investing Activities: Redemption of (additions to) term and savings deposits		4,283 4,283	(2,921)
Redemption of (additions to) term and savings deposits		4,283	(2,921) (2,921) (16,730)
Cash Flows From Investing Activities: Redemption of (additions to) term and savings deposits Increase (Decrease) in Bank Bank at Beginning of Year		4,283 4,283	(2,921)

Bank

**\$ 23,212** \$ 15,155

(The accompanying notes are an integral part of these financial statements.)

#### Notes to the Financial Statements

(Unaudited - see Notice to Reader)

#### Year Ended December 31, 2020

#### 1. Nature of operations

The Acoustic Neuroma Association of Canada is incorporated under the laws of the Canada. Its principal activity is a charitable organization and operates as a not-for-profit corporation.

Information, research, public education and member support is provided for the treatment of acoustic neuromas (schwannomas) or other benign tumors affecting the cranial nerves. Information is made available, as well, to physicians and health care personnel on early diagnosis, treatment and rehabilitation of patients.

#### 2. Summary of significant accounting policies

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations and include the following significant accounting policies:

#### **Financial instruments**

The Corporation records its financial assets and financial liabilities at fair value when acquired. The Corporation subsequently measures its financial assets and financial liabilities at amortized cost. Transaction costs incurred on acquisition are charged to the financial instrument. At the end of each reporting period, financial instruments are assessed for impairment if there are indicators of impairment.

#### Capital assets

All capital assets are expensed when acquired.

#### **Revenue recognition**

Donations and memberships are recognized upon receipt. Interest and other revenue are recognized as revenue when earned.

#### Use of estimates

The preparation of financial statements in accordance with Canadian accounting standards for not-forprofit organizations requires directors and management to make estimates and assumptions that affect the reported amount of assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenditures during the reporting period.

Actual results may differ from their best estimates as additional information becomes available in the future and adjustments, if any, are recorded as that information becomes known.

#### Contributed services

Directors and members volunteer their time to assist in the Corporation's activities. While these services benefit the Corporation considerably, a reasonable estimate of their amount and fair value cannot be made and accordingly, these contributed services are not recognized in the financial statements.

#### **Acoustic Neuroma Association**

#### Notes to the Financial Statements

(Unaudited - see Notice to Reader)

#### Year Ended December 31, 2020

#### 3. Term deposits and mutual funds

Term deposits are recorded at cost. Accrued interest at the year end was \$309.

	2020	2019
IA Clarington Money Market Fund	14,986	-
Haventree Bank Canada	90,537	-
Equity Financial Trust		78,267
Bank of Montreal		25,000
Hollis Wealth	<u> </u>	6,539
	105,523	109,806

#### 4. Related party transactions

No remuneration was paid to directors and officers during the year and they had no interest in any transactions of the Corporation. Management, in addition to management fees, is reimbursed for certain administrative costs. These transactions were in the normal course of operations and were measured at the amount of consideration established and agreed to by the related parties.

#### **Financial risks**

The Corporation's financial instruments consist of cash, interest receivable, term deposits and accounts payable. It is the opinion of the Board that the Corporation is not exposed to significant interest rate, currency or credit risks arising from its financial instruments.

#### Credit risk exposure

The corporation is exposed to credit risk in the event of non-performance of donors in connection with its pledges made to the charity. The Company does not obtain collateral or other security to support the pledges subject to credit risk but mitigates this risk by dealing only with what management believes to be financially sound donors and accordingly, does not anticipate significant loss for non-performance. There were no outstanding pledges at year end.

#### Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in interest rates. The Corporation is exposed to interest rate risk on renewal of its fixed term investments.

#### Liquidity risk

Liquidity risk is the risk that the Corporation will not be able to meet its financial obligations on a timely basis or at a reasonable cost. The Corporation manages its liquidity by monitoring its operating requirements.

#### **Acoustic Neuroma Association**

#### Notes to the Financial Statements

(Unaudited - see Notice to Reader)

#### Year Ended December 31, 2020

#### 5. Foreign currency risk

The Corporation is exposed to foreign currency risk when it buys certain materials and supplies in US dollars. The Company will convert its Canadian funds into US dollars on a periodic basis as required.

#### 6. Prepaid expenses

The balance in prepaid expenses includes the following:

)20	2019
94	
	94

### 7. Accounts payable and accrued liabilities

The balance in accounts payable and accrued liabilities includes the following:

	2020	2019
Accounting accrual	1,570	1,419
Suppliers	1,088	2,908
	2,658	4,327

## ANAC Leadership Giving Society

Our donors are a dynamic group of individuals who invest their compassion, gifts and leadership to help fulfill our mission at the Acoustic Neuroma Association of Canada. They also contribute needed financial resources and time to efforts that allow them to achieve their own personal missions – to connect individuals diagnosed with an acoustic neuroma (AN) and their families and caretakers with the best possible care to treat their acoustic neuroma and make informed decisions about their health.

If you already have a desire to help others, or are looking for tangible ways to help, join us. Need an example?

### **Giving to ANAC**

Our Leadership Society offer many donor levels, opportunities and benefits to members. Donors may make a pledge and pay over a designated time period or make an immediate gift. Every dollar makes a difference.

Here's how you can contribute:

Leadership Society	\$ 1,000,000 +
Dream Builder	\$100,000 - \$999,999
President's Circle	\$10,000 - \$99,999
Director's Circle	\$5,000 - \$9,999
Benefactor	\$1,000 - \$4,999
Smile Maker	\$250 - \$999

## **DIRECTOR'S CIRCLE**

Donatelli Family and Friends Linda Gray Family and Friends Jim and Lyna Newman Foundation

## **BENEFACTOR**

Martin Downie Espey Family Peggy and James Kay David Riske

### Linett Wealth Management



Wealth Management

## **SMILE MAKER**

Paul and Linda Darkes Dinnage Family David and Heather Ellison Bill and Judy Haust Carole Humphries Suzanne Klukas Eric Loe Kathleen McCrone Mitzi Jo Perritt Barbara Reed Raghubeer Family

### A Heartfelt Thank You to Our Donors

### A Heartfelt Thank You to Our Donors



Philip Allan Scott Allan Dr. Ryojo Akagami Maged Alshohadi Sarah Anderson Dianne Angus Karine Arciszewski Margaret Arseneau Norma Balcombe

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Elaine Cox Janice Daly Stuart David Neil Davis Tim Dempster Trish Denhoed Kathryn Dingwall Beth Dobson Bonnie Dobson Alain Doom

Adrienne Dunn Shannon Edgar David & Heather Ellison Eileen Evans Elizabeth Ewashkiw Diana Farquharson Zenia Ferreira Art Finlayson Moira Forester Laura Formusa





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Don Goings Faye Goranson Roumen Grozev Anna Gurdon Imogen Hadfield Mark Hammond Victoria Hand Marian Harvey Lillian Harwijne Marie Hren

Andrew Haust Deborah Haust Peter Henderson Denise & Bob Heatherington Jane Hillier Donna Hobson Marcia Hocking Elizabeth Gay Hooper Alice Horner Evalyn Hrybko

### A Heartfelt Thank You to Our Donors



Dr. Edsel Ing Robert Jacobs Sandy Jeeves Joyce Johnson Suzanne Johnston Daryl Jorgenson Catherine Kaczmarek Kamala Kanhoye Nina Kanhoye

Phulmatie Kanhoye Ken Karalash Brian Kent Kathy Kernohan Leanna Keyes Ernest Kirsh Shirley Kolanchey Carol & Al Kozun Nicholas Kucharew Ron Lawrence

Mark Le Blanc Wingchee Lee Ernie Lem Selena Light Eric Loe Pat Lucier Lelia Lynch Matthew Madott Leo Malamas





Fraser Mann Anne Mara Eva Markslag Hazel Martin Lynel Martinuk Abbie Matier Sandra McCance Kathleen McCrone Steve McDougall

Kim McGowan Jennifer McLellan Dave & Erika McMullen Joan McMullin Alex Medjessi Susan Meech Arlene Melmer Americo Meneguzzi Vendalyn Mill Judith Montgomery

Ed & Shirley Morrisey Barbara & David Morrow Melanie Mullins Kathleen Mullrooney Lucille Narun Jenn Neale Oaula Ney Twila Niemi Athir Nuaimi



- Patricia Otto-De Athe Annamaria Palffy Vanda Palter Mike Paternaude Catherine Paterson Mitzi Jo Perritt Karen Petersen Ann Pickett Teresa & Frank Pomposo
- Kim Poole Tracy Porco Val Poultney Kelly Powell Alex Pyper Louise Rachlis Christian Radder Susan Rankin Barbara Reed Susan Reid
- Sherry Renick Tom Riglar Adam Rochacewich Margery Roden Kevin Rollason Suzanne Rosart Norma Russell Marilena Rutka John Salloum

### A Heartfelt Thank You to Our Donors



Cindy Sandsmark Bruce Scheifele Mary Shirkie Gary Scott Paula & Tim Scott Muriel Shaw Katherine Shortall Warren Sikorski Annie Sjogren

Terry Slator Ann Sloan Barb Smaha Mark Smallbones Robynne Smith Colette Stack Dolores & Les Stack Gale Stack Karley Stack

Kelly Stack Noreen & Darcy Stack Sylvia Stack Tracey Stack Bozena Staznik Linda Steele Trudy Stephen Willett Stevenson LeAnne Stitt Dr. Charles Tator





Todd Thornton Patricia Thurgood Lyall Tom Eileen Traynor David Tsang Andrea Waserman Chris Washkau Valerie Wasylishen Leonard Wert

Dr. Brian Westerberg Christina Wharton Elizabeth White Suzanne Willems Valerie Wicks Ken Wilson William Wood David Wowk Elizabeth Wray

*In Memory of John Perry George Farnworth Frank Perry Nevile Perry Bill Woodward* 

**Others** Benevity Charities Aid Foundation

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In Memory of Temmy Bernstein Paula Abramczyk Tara Abrams Lorne Berman Joanne Bernstein Marvin Bernstein Mathew Bernstein Elizabeth Dheuy Francine Gilbert

Lisa Goodman Gershon Growe Jeffrey Farber Simon Farley Tony Katz Robert Kingstone Quenby Mahood Steven Pearl Sammy Roth

Elana Samra Kerry Salsberg Beverley& Stan Salsberg Noreen Shulman Maureen Simmons Blake Whiting & Classmates Gwen Yacht Shelley Yampolsky Rhonda Yarin

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