

NOTICE IS HEREBY GIVEN THAT THE 53RD ANNUAL GENERAL MEETING OF THE WAIKATO/BAY OF PLENTY DIVISION OF THE CANCER SOCIETY OF NEW ZEALAND INCORPORATED WILL BE HELD AT 12.30PM ON TUESDAY 20TH SEPTEMBER AT THE CANCER SOCIETY'S LIONS LODGE, CORNER OF LAKE ROAD AND TAINUI STREET, HAMILTON. **BUSINESS** 1. Notice calling the meeting 2. Apologies 3. Confirmation of the minutes of the 52nd Annual General Meeting of the division held on Tuesday 8th September 2015 4. Matters Arising 5. Presentation of Annual Report and audited Statement of Accounts for the year ended 31 March 2016 6. Election of Officers - nominations must be lodged with the Chief Executive before Friday 2nd September 2016 and must be signed by the proposer, seconder and nominee. 7. General Business Judy Gould Chief Executive

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VISION

To be the leading organisation dedicated to reducing the incidence of cancer and ensuring the best cancer care for everyone in New Zealand.

MISSION

The Waikato/Bay of Plenty Division of the Cancer Society of New Zealand Incorporated is committed to minimising the impact of cancer in the community through the provision of support services, health promotion, research, advocacy and information services.

OBJECTIVES

We seek to achieve this through:

- Providing quality support services to people affected by cancer
- Conducting educational and health programmes that promote early detection and how to reduce the risk of cancer
- Supporting research into the causes, prevention, detection and treatment of cancer
- Providing an accessible and authoritative source of information on cancer
- Advocating for the best services for people affected by cancer and influencing policy that reduces cancer risks

The Cancer Society of New Zealand is a non-governmental, not-for-profit organisation funded by caring New Zealanders.

PRESIDENT'S REPORT

WE ARE NOW BETTER POSITIONED AT BOTH A NATIONAL AND REGIONAL LEVEL TO MEET OUR OBJECTIVES AND FULFIL OUR MISSION.

On behalf of our executive committee, I am pleased to share with you the accomplishments of Waikato/Bay of Plenty Cancer Society this year. Having completed my 15th year on this executive committee, I still get great satisfaction in seeing the improvements made each year to ensure vital supportive care, services and programmes are offered to those in need in our region.

The Cancer Society of New Zealand operates under a federal structure and as such, has a national board representing the views of the six divisions throughout the country, as well as a national office to provide support to these divisions. I am privileged to have been chosen to represent our division on this national board and this year we have streamlined a number of operations, resulting in greater efficiency and transparency.

A key role within the Cancer Society of New Zealand is that of our medical director. In August we were thrilled to appoint Dr Christopher Jackson to this position. Founder of Mercy Cancer Care in Dunedin, he is a consultant medical oncologist for the Southern Blood and Cancer Service at Dunedin Hospital and a senior lecturer at the University of Otago. He is also chairperson of the Colorectal Cancer Tumour Standards working group, and a member of the National Bowel Cancer Work group.

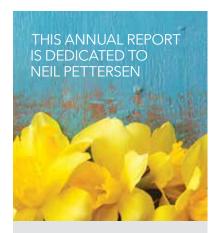
Chris is undisputedly a leading medical authority on cancer in New Zealand. However, it has also become increasingly apparent to all of us at the Cancer Society that he is also absolutely tenacious in his advocacy for cancer patients and their rights, urging transparency and accountability at every level of government policy-making, funding and decision making.

I would like to acknowledge the members of our executive committee and subcommittees for volunteering their time and expertise as stewards of governance this year. Thank you also to our chief executive and her staff and volunteers for their dedication, commitment and contribution to the Cancer Society.

Once again it has been a privilege and a pleasure to fulfil the role of president of the Waikato/Bay of Plenty Cancer Society.

9.-

Murray Loewenthal



On Saturday 24 August 2015, Neil Pettersen, vice president of the Waikato/Bay of Plenty Cancer Society's executive committee, passed away at Waipuna Hospice after a short illness.

Neil was married to Jeanette, whom many involved with the Cancer Society would have met over the years at AGMs and other functions. In a final show of support for the organisation that Neil truly believed in and gave his time to, his family asked that in lieu of flowers, donations be made to the Waikato/Bay of Plenty Cancer Society. We are most grateful for this final gesture.

Neil was dedicated to the Cancer Society and the people we served; he was generous, principled, forthright and compassionate. Neil joined the executive committee in 2008 and his absence from our meetings is still very noticeable. It goes without saying, Neil Pettersen made a difference.

CHIEF EXECUTIVE'S REPORT

THIS YEAR THE PEOPLE OF OUR REGION JOINED TOGETHER, GAVE MORE GENEROUSLY AND SUPPORTED ONE ANOTHER LIKE NEVER BEFORE TO HELP US REDUCE THE IMPACT OF CANCER IN OUR COMMUNITIES.

The incidence of cancer continues to grow, making it imperative for us to do more and to do it better; and I am pleased to say that this is exactly what we have done this year.

- An exciting part of this commitment saw us purchase a property in Taupo. Set to open in early 2017, the newly built office will enable us to reach out to those in the more remote parts of our region.
- We supported more people through our liaison nurse service (up nearly 13% from last year) by identifying geographical areas in need and improving how we deliver our support services programmes.
- Hundreds of our existing volunteers were given refresher training and many others were recruited and trained to ensure those in remote and rural areas particularly do not go without vital support.
- Our occupancy rates at the Cancer Society's Lions Lodge have increased, following an initial decline after the Kathleen Kilgour Centre opened in Tauranga in October 2014.
- We funded additional meals for people and their carers from Tairawhiti District Health Board staying at the Cancer Society's Lions Lodge.
- One of our health promoters was selected to present a paper at the World Indigenous Cancer Conference in Brisbane, giving us the opportunity to highlight to an international audience the work we do with the at-risk group of Māori and Pasifika men over the age of 40.
- We were thrilled to achieve the highest rate of accreditation in the country for the SunSmart Schools Accreditation Programme – keeping our primary school students safe in the sun.
- Daffodil Day brought in a record \$694,946. The wonderful branch staff of our major sponsor and Daffodil Day principal sponsor ANZ contributed a whopping 30% of this total.

- We donated more than half a million dollars towards cancer research both nationally and locally. We also contributed \$20,000 to the Waikato Regional Cancer Centre towards their upgrade of the oncology department in the Lomas Building.
- The Cancer Society's new and greatly improved website www.cancernz.org. nz went live in May 2015 making current, relevant information more easily accessible than before.
- The Lions Clubs of Districts 202L and 202K reached the \$2million milestone toward their \$3million target for the Cancer Society's Lions Lodge. We were delighted to hold a celebration event to thank them for their incredible efforts and ongoing support.

These are just some of the highlights that we were able to achieve this year with your help.

I want to thank all of our wonderful sponsors, supporters, donors, volunteers, staff and fundraisers for making it possible to do this work. I am also grateful to our executive committee for their guidance and governance.

I am confident that if we continue to work with a focus on innovation, resourcefulness and determination, together we will succeed in our mission.

That Cana

Judy Gould



COMMUNITY SERVICES REPORT

THIS YEAR WE FOCUSED ON FOLLOWING THROUGH ON LAST YEAR'S OBJECTIVES THAT IDENTIFIED ADDITIONAL WAYS TO CONNECT WITH OUR COMMUNITIES AND ENSURE THAT THE SUPPORT SERVICES WE DELIVER, AND HOW WE DELIVER THESE, ARE MEETING THEIR NEEDS.

To achieve this, our team identified geographical inequities, reviewed programme delivery and the wider support group's networks. During the year we strived to extend our reach in the community to those who were geographically or socially isolated.

The utilisation of the liaison nurse service grew a further 12.8% in client referrals from last year, i.e. from 722 to 815. This was a great effort and a reflection on the support that clients dealing with cancer want to receive. The service is planning on developing additional and sustainable strategies to continue reaching those people not aware of our services. This year there has been a push into the Coromandel and Whangamata areas that has garnered tremendous support for clients, caregivers and the volunteering community.

It is evident from client feedback that our support programmes are a 'jewel in the crown' of the society. These programmes act as a gateway of opportunity for people with cancer and their carers to experience other areas of support and collegiality thanks to our highly skilled and professional team of cancer liaison nurses.

The community services team is working more closely with the society's health promotion team to reach the male population. Of the 815 clients we provided support to last year, 32% were male and 68% female. There are a number of reasons behind the lower numbers of men who either self-refer or are referred to our service, but this could also be a reflection of the diagnosis types with breast cancer accounting for 30% of referred clients.

Bicultural initiatives remain key in reaching our Māori population in the region through a programme called Kia ora E te lwi. The purpose of the programme is to deliver support to Māori and whānau coping with cancer in a way that embraces kaupapa Māori in cancer education. Since Kia ora E te lwi was launched in 2012 the programme has had a variable uptake but with the support of the Midland Cancer Network and local primary providers we

are confident we can raise the profile and gain a far wider reach to provide the necessary support.

This year we continued to offer our flagship supportive care programme 'Living Well'. This programme has been offered in the division for more than 12 years, and focuses on client wellness and information soon after diagnosis and treatment.

"If I could improve this wonderful programme I would be mightily impressed. Terrific people, wonderful support and extremely helpful." – Participant, Living Well programme.

We also developed two more programmes, 'Living Mindfully' and 'Living your Life', in partnership with experienced facilitators, and will offer these for the first time this coming year.

The cancer support groups continue to go from strength to strength and provide a large number of clients the opportunity for positive, social interaction and engagement during a difficult time.

Other core services that play a key role in our network of support include our therapeutic massage service, exercise sessions, counselling, transport to treatment driving service and frozen meals. Some clients and their carers do not always want the full suite of supportive care and the society respects their choices, supporting clients in the services and programmes they consider best suit their wants and needs. In the coming year we are looking to expand the therapeutic massage into more rural areas – another change that is being driven by the society's commitment to reduce inequities and improve wellness for a wider group of clients. This year we began a review of our therapeutic massage service, as well as practical ways to be able to provide frozen meals to clients in areas that are more geographically dispersed from the three main centres.

The team is very excited about the challenges that the new financial year brings. We recognise the need to continue reaching out to the rural and lower



Massage therapy

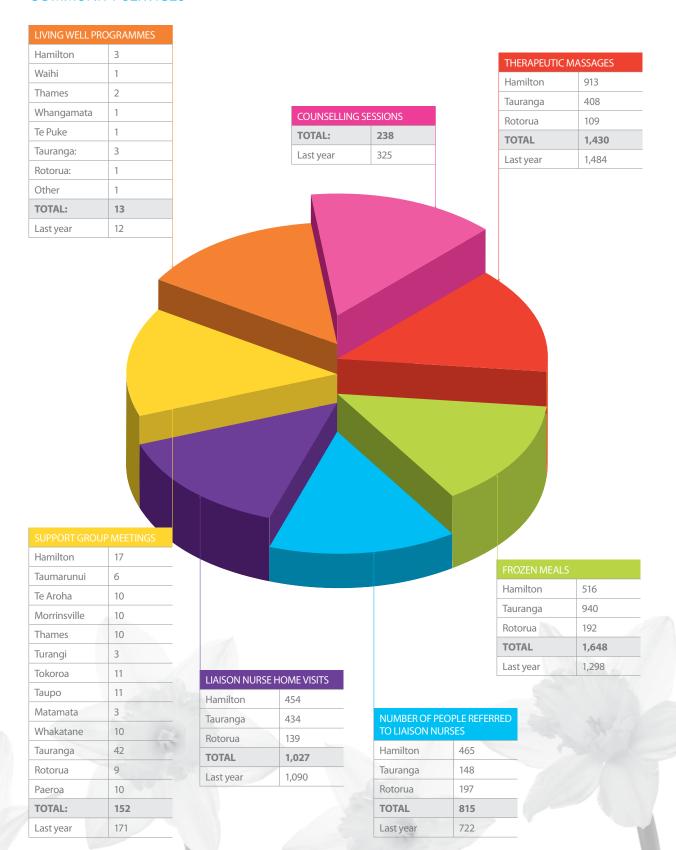


Liaison nurse Penny Parsons

socioeconomic clients that appear to have fewer opportunities to learn about our support services. Logistically the team needs to focus more on how we receipt client information to balance client confidentiality but also be able to gain a more accurate understanding on how our clients are benefiting, or not, from our service offerings. Without this type of information we cannot always see our opportunities for improvement.

Lastly, not only do we want to thank our clients for sharing their journey with us and allowing us into their lives but also their carers and support networks that are key to clients' ongoing welfare.

COMMUNITY SERVICES



CANCER SOCIETY'S LIONS LODGE REPORT

THE CANCER SOCIETY'S LIONS LODGE CONTINUES TO PROVIDE ACCOMMODATION FOR GUESTS FROM THE WAIKATO, LAKES, BAY OF PLENTY AND TAIRAWHITI DISTRICT HEALTH BOARDS WHO REQUIRE SPECIALIST TREATMENT AT THE WAIKATO REGIONAL CANCER CENTRE.



Celebration for Lions Clubs at the Lodge

The Lodge measures occupancy in terms of 'bed nights', i.e. one person assigned to a bed for one night.

The difference in bed nights from 2015 can still mostly be attributed to the opening of the Kathleen Kilgour Centre in Tauranga in October 2014. The shortfall this financial year has been somewhat alleviated with the increase in Tairawhiti bed nights.

Most of our guests are from the greater Waikato area, followed by Lakes, Tairawhiti and the Bay of Plenty.

We continue to look at ways to increase occupancy, as well as more innovative public relations and promotions activities to build greater awareness of the Lodge.

A dedicated team of 13 permanent staff ensures the Lodge is always presented to a high standard, with nothing being too much trouble for our guests. Our focus is on making our guests' journey as enjoyable and as comfortable as possible. Feedback received in our anonymous surveys of guests following their stay in the Lodge is overwhelmingly positive.

"I would encourage other cancer patients to use these facilities. You come away with a great sense of wellbeing and a feeling of peace and contentment. Highly recommended."

"I cannot express fully my admiration for the care and attention I received in my relatively short stay. Thanks a million, everyone!"

The therapeutic massage service continues to be very popular with guests and others in the community with cancer.

The ongoing development of Lodge networks has seen a number of new programmes being run from the Lodge



10,623 occupied bed nights provided (12,201 in 2015)



 507 people going through cancer treatment and their supporters (658 in 2015).



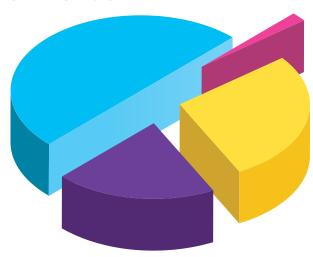
More than 24% increase in Tairawhiti bed nights



 74% average monthly occupancy overall

DHB GUESTS STAYING AT THE LODGE FOR YEAR END

31 MARCH 2016



	DHB	NUMBERS
50%	WAIKATO	254
2%	ВОР	11
28%	LAKES	142
20%	TAIRAWHITI	99

this year. Our state-of-the-art boardroom now accommodates monthly meetings of oncology health professionals, Sweet Louise and other community support groups, as well as the Look Good Feel Better programme. Consultations are done on site by Wigs by Hair Creations every Tuesday and by request.

Guests do not pay for their accommodation while staying at the Lodge so we rely heavily on our volunteer workforce. The Riverside Lionesses, a baking group known as 'GBB' and many individual volunteers supply the Lodge weekly with fabulous home baking. The delicious cakes, slices and cookies are always well received by guests and their supporters.

There are many other volunteers who provide fantastic services such as

manicures, lunch preparation and service, support for housekeeping staff, shuttle driving, knitting beanies, socks and scarves, helping the cook in the kitchen etc. In the last financial year volunteers have given a combined total of 3,564 hours of service to the Lodge. Without this voluntary support, the Lodge would not function as well as it does.

We are very grateful and appreciative of ongoing financial support from the Lions Clubs of Districts 202L and 202K who continued to champion the Lodge through various fundraising initiatives this year. The Lions also treated our guests to a coach trip, breakfast and a close up view of the Balloons over Waikato spectacle in March 2016. This was very well received, and provided some great memories for our guests. We were also thrilled that the

Lodge was chosen as the venue for the Cancer Society's celebration of the Lions when they reached a \$2million fundraising milestone for this facility.

There are a number of other organisations that have contributed financially to the Lodge through sponsorship, tournaments, fashion shows, sponsored bike rides etc. this year. We have also been fortunate to receive bequests and donations from very generous people in our community who have a connection with the Lodge or with someone who has stayed here. It is because of all the support we receive from donors, fundraisers, volunteers and others that we are able to continue to provide such a wonderful service from this beautiful, nurturing environment.

AGE RANGES OF LODGE GUESTS



HEALTH PROMOTION REPORT

THE HEALTH PROMOTION TEAM HAS GROWN OVER THE PAST YEAR WITH THE ADDITION OF TWO NEW HEALTH PROMOTERS TO WORK ACROSS OUR KEY AREAS OF SUNSMART, TOBACCO CONTROL AND MEN'S HEALTH.

With health promotion staff now located in each of our three divisional offices – Hamilton, Tauranga and Rotorua – we have the capacity to increase our delivery of health programmes to the wider community, provide more information and resources, as well as continue our work with councils and other organisations on policy change and development.

SUNSMART

This year has been incredibly busy with events across the region. Our trained SunSmart ambassadors attended 85 events ranging from Teddy Bears' picnics in Papamoa and Hamilton, to the Waikato Nesian Festival and Santa Parades. Our relationship with Hamilton Gardens also 'blossomed' and ambassadors handed out free sunscreen and SunSmart advice to visitors at events throughout summer. Of course our SunSmart star Undercover Cody was at all the events to say 'hi' to his younger fans and remind them it's cool to be SunSmart.

We revamped Undercover Cody's website and fan club to encourage more schools, children (aged 2-8 years), parents and early childhood centres to participate in SunSmart activities. Schools and early childhood centres can now book an Undercover Cody visit online and view a snippet of Undercover Cody's show. This year we filmed the shows in both English and Te Reo Māori so that schools and nga kura across the region can watch the SunSmart shows online. Cody visited 187 schools and early childhood centres across the region as part of his annual roadshow, presenting his book, "Hiss, Pop, Splat".

"It (the roadshow) was outstanding. The girls were super energetic and friendly; confident to engage with our young audience, and really drew them into the performance."

"We were really happy with the show; the children loved it, and it reinforced our sun safe message and what we do each day."

"They were organised and prepared, friendly and engaging with the tamariki – love the natural use of Te Reo Māori." Our Tauranga health promoter has extended our SunSmart Schools accreditation programme (SSAP) to include early childhood centres in the Tauranga area, ensuring they have the infrastructure and resources to keep staff and students safe from the sun. We will gradually roll out the programme across the region during 2016-2017.

Teaming up with BestStart Education and Care Centres in Tauranga was a strategic partnership that enabled us to work with and accredit 19 of their 22 centres in the Tauranga area. The Waikato/Bay of Plenty Cancer Society still leads the way with almost 67% of our schools accredited; the highest percentage of school accreditations in the country.

The summer beach promotions at holiday hotspots in the Coromandel saw the ambassadors (and Cody) deliver around 26 litres of sunscreen during the two-week promotion from Boxing Day to 11 January. They also provided information, games and activities to visitors at Hahei, Whangamata, Mount Maunganui and Pauanui beaches.







Health promotion ambassador Shem sharing the SunSmart message at the Papamoa Teddy Bears Picnic



MEN'S HEALTH

This year we welcomed a new men's health promoter, based in Hamilton, to the team. Our other men's health promoter is based in Rotorua and together they delivered four Stand up, Bro/Tane Takitu Ake programmes this year. In addition, the Rotorua-based health promoter was selected on behalf of the division to present the programme to delegates at the World Indigenous Cancer Conference in Brisbane, giving us an opportunity to profile the programme to an international audience and share learnings from around the world about the cancer pathways from diagnosis to treatment for indigenous peoples. Our work in men's health is focused on direct engagement; working with men's health groups and organisations, facilitating the Stand up programme, delivering presentations and providing resources to raise awareness of the importance of men's health in a fashion that is both supportive and empowering to men.

In the tradition of our attendance at the annual New Zealand National Agricultural Fieldays at Mystery Creek we again used the event to promote men's health. Along with men's health, our 2015 display saw the return of the 'Colossal Colon'; ever popular with visitors, the colon fits well with national men's health promotions and Bowel Cancer Awareness Month in June. The colon was on show the entire month of June; not just with Fieldays and other displays but with a promotion at the Papamoa Plaza organised in partnership

with University of Waikato events and communication management students, making it the first time the colon has been to a shopping mall. The colon was very well received by the shopping public and generated a great degree of interest and publicity.

TOBACCO CONTROL

Nationally big changes were announced in tobacco control that bring us closer to our Smokefree Aotearoa 2025 goal of less than 5% of the population active smokers. Our activities were aimed at reducing the visibility of smoking around young people so that they do not start smoking, and supporting existing smokers to quit by making smoking less visible. The government announced that plain packaging on cigarettes could be introduced in New Zealand. The Cancer Society supports this move and remains a strong advocate for smokefree outdoor areas, particularly in areas where children play.

The health promotion team continues to support South Waikato District Council, which last year expanded the district's smokefree areas to include sports and recreation spaces after we submitted and presented to Council on the issue. The team is working with local health promoters and schools to create signage with positive messaging to support these new smokefree areas where children play sport.

Colossal Colon on show at the Papmoa Plaza. Photo courtesy of the Bay of Plenty Times.

In addition, many proprietors of outdoor dining areas are conscious of the fact that around 85% of their patrons do not smoke, and have created smokefree outdoor dining spaces for their cafés and restaurants. Our team and the local smokefree coalition continue to encourage and support cafés to take the step to a more pleasant, healthier outdoor dining experience for the majority of customers who are smokefree. This also helps make smoking 'less visible' to those wishing to quit.

Through our partnership with the University of Waikato and Hamilton City Council last year we were able to deliver our "Fresh Air Zone"/smokefree campaign in Hamilton's Garden Place in the lead up to and after World Smokefree Day. This initiative was part of our ongoing support for Hamilton City Council's Smokefree outdoor policy, which we worked with Council to introduce in 2012. University of Waikato students created and delivered a series of unique, fun, family friendly events within the Fresh Air Zone in the two weeks prior to and including World Smokefree Day. Events included an outdoor movie screening, smokefree mini-film, mini golf, arts and crafts and a variety of games and competitions all focused on creating healthy (smokefree) outdoor spaces in Hamilton. We were thrilled with their hard work and the results were amazing!

FUNDRAISING REPORT

FUNDRAISING CONTINUES TO BE AN INCREASINGLY COMPETITIVE FIELD. TO REMAIN A CHARITY OF CHOICE THE WAIKATO/BAY OF PLENTY CANCER SOCIETY MUST CONTINUE TO OFFER EXCITING OPPORTUNITIES FOR SUPPORTER ENGAGEMENT.



Hamilton Girls High School at Relay For Life.

Whether it be increasing the information available about how our supporters can get involved, offering exciting events popular with a wide range of participants in the community, or improving technology to aid fundraising – we are always looking at ways to improve our supporter journey.

As the Waikato/Bay of Plenty Cancer Society receives no direct government funding, we rely heavily on recruiting, supporting and engaging the community to raise crucial funds and awareness to support Kiwis affected by cancer. We are extremely lucky to be recognised as one of the most trusted charities in New Zealand, and fundraising through iconic campaigns such as Daffodil Day is invaluable to reaching our financial goals.

We had a number of highlights this year including a successful Daffodil Day campaign. Relay For Life Hamilton was one of the first established events in the country to trial a new 12-hour format. The popularity of community fundraising continues to gain momentum, with a variety of unique events being held in our aid. The Lions Clubs of Districts 202K and 202L continue to display a genuine commitment to raising funds for the Cancer Society's Lions Lodge, and a

celebration was held in September 2015 in recognition of reaching a \$2million milestone with their fundraising efforts. Individual and corporate donors, sponsors, trusts and foundations all maintain their commitment to the Waikato/Bay of Plenty Cancer Society and we simply could not do what we do without their continued support. Whatever way our supporters choose to be involved, we continue to create opportunities for them to feel that they are making a difference within our community.

The 25th anniversary of Daffodil Day was celebrated on Friday 28 August 2015. Stunning weather around the region truly reinforced the symbolism of daffodils being a sign of hope after a long winter. A 25-year relationship between a principal sponsor and a charity is something to be proud of, and ANZ did not disappoint raising \$213,274 as a result of branch fundraising efforts within our division.

Unseasonably frosty weather leading up to Daffodil Day meant that our fresh daffodil supplier was unable to fulfil our full order of over 170,000 fresh daffodils. This highlighted the need to engage a sub-contractor along with our usual fresh flower supplier to mitigate the risk of a shortfall in the future. Collection box and

school income were the two key areas for growth across the division, along with increases in the Hamilton and Rotorua pre-sell campaign. Call centre students at NZMA were utilised to make the warm telemarketing calls to the businesses in Hamilton who had supported the fresh flower campaign previously. This meant that Hamilton volunteers could concentrate on the cold calling which led to an overall increase in sales. Divisional Daffodil Day income for 2015 was \$694,946.

Relay For Life Hamilton was held on 12 March. Non-stop entertainment and activities across two stages throughout the new 12-hour format included appearances from Midge Marsden and Late 80's Mercedes. This, along with survivor celebrations and health promotion opportunities, created a lively atmosphere for people to celebrate, remember and fight back! Given the close proximity to the holiday period the uptake from schools and corporate groups was slow, which in turn had a direct impact on fundraising. Sponsorship continues to keep operating costs to a minimum; major sponsors included The Southern Trust, Mystery Creek Events Centre, New Zealand Sound Reinforcement and Mediaworks. A total of \$141,697 was generated at Relay For Life Hamilton 2016.



We have experienced substantial growth in community fundraising income with \$125,308 generated; 67% more than forecast in the budget. Community fundraising describes fundraising done by an individual, group or independent organisation. The person or group organising the fundraiser plans and delivers the event, then donates the proceeds to the Waikato/Bay of Plenty Cancer Society. The majority of these events require minimal resources, so the fundraising team can focus on established events and campaigns.

Community fundraising events range in size and success and included individuals organising a sponsored head shave, concert, participation in organised events such as the Rotorua Marathon or Round the Bridges in Hamilton, a successful Guinness Book of World Records attempt for the longest continual game of lawn bowls, and a charity luncheon. Online fundraising utilising the Everyday Hero peer-to-peer fundraising platform continues to be an effective way of soliciting donations.

Direct mail campaigns ran four times throughout the year and showcased our services through our newsletter *With Your Help* and client stories. Segmenting our donor data means that we can identify groups of people who need to be communicated to in a slightly different way. We continue to invest in Raiser's Edge, our donor database, to ensure we are communicating with the right constituents in a meaningful and efficient way. Direct mail campaigns generated \$253,012.

A new member has been recruited to the fundraising team to implement a strategy for donor relationship management. Stewarding high level donors, bequest prospects and sponsors, as well as identifying trusts and foundations for funding will maximise this largely underutilised income stream.

We continue to be humbled by people's generosity. In an increasingly time poor society we need to continue to develop ways in which we can connect with our supporters in the digital space. We are entering an exciting time with fundraising and it is fortuitous that we continue to create opportunities to facilitate this engagement.







VOLUNTEER DEVELOPMENT REPORT

IT'S BEEN ANOTHER PROGRESSIVE YEAR FOR THE VOLUNTEER DEVELOPMENT TEAM AS WE CONTINUED TO GROW OUR SERVICE TO MEET DEMAND IN OUR COMMUNITIES.

One of our biggest challenges is ensuring that every New Zealander has access to our services no matter where they live; we strive to achieve this through hundreds of dedicated volunteers across the Waikato/Bay of Plenty region. Volunteers provide many hours of work so the Cancer Society can deliver its free services, and are the key providers of support service programme delivery in some of our rural areas.

The Waikato/Bay of Plenty Cancer Society has more than 350 regular volunteers who provide support to those affected by cancer. Our volunteer numbers increase significantly around Daffodil Day to more than 750.

On a daily basis our volunteers work tirelessly in a variety of roles supporting our free services across the region. Their support includes assisting patients at hospital oncology departments, driving people to and from cancer treatment and medical appointments, providing practical support to people affected by cancer, assisting at the Cancer Society's Lions Lodge, and helping with administration in our offices.

This year we focused on increasing our numbers of volunteers and reengaging with our existing volunteers. To achieve this we provided more training opportunities for our volunteers and taking these out into our communities. With the planning phase complete we should see these programmes in operation in the coming year.

We held four orientation days in Hamilton throughout the year, providing training for new volunteers and employees, and inviting existing volunteers to attend a refresher course. We received wonderful feedback about the professionalism and benefit of these programmes.

"I have been privy to many training sessions in my career and this session has been up there in regards to information, professionalism and keeping upbeat despite the subject."



Sue Worth (front left), volunteer driving coordinator with some of the Hamilton volunteer drivers at the

The staff of the Kathleen Kilgour Centre in Tauranga identified a need for a more welcoming environment for patients attending treatment, so this year we established a new group of volunteers specifically to provide support at the centre. The Cancer Society was asked to provide a 'meet and greet service' where our volunteers would be the smiling face to welcome patients to the centre, offer tea, coffee and a chat and, most importantly, a listening ear. This is a wonderful collaborative service, which is receiving amazing feedback from Kathleen Kilgour Centre patients, staff and volunteers. One patient said he received 'the Rolls Royce treatment' from our volunteers, and the volunteers said they feel helpful, useful and able to make a difference.

VOLUNTEER DRIVING SERVICE

Our volunteer driving service enables our clients to get to and from their cancer-related medical and clinical appointments.

The service is greatly appreciated by people who have to make the trips, often feeling unwell and not confident driving in a city. Being driven to an appointment without the hassle of finding a car park, and knowing a friendly face will be there to collect you after treatment, provides our clients with comfort at a time in need.



Number of volunteer drives undertaken =

3,500

Number of volunteer hours recorded this year = 7,500

ONCOLOGY SUPPORT VOLUNTEERS

We have oncology support volunteers in Hamilton, Rotorua and Thames Hospitals and at the Kathleen Kilgour Centre in





In front of the Hamilton office before and after the garden makeover.

Tauranga. These volunteers provide a supportive environment for cancer patients and their families and caregivers, assisting them when they attend their assessment, treatment and follow up appointments.

CANCER SOCIETY'S LIONS LODGE

Our Lodge volunteers provide support to guests staying at the facility, creating a 'home away from home' environment and assisting the staff where needed. We are proud of the positive feedback we receive about our Lodge volunteers.

"There is nothing that I could possibly fault about the Lodge. We are very lucky to have access to such a wonderful facility, staff and volunteers." - a quest

"Amazing facility, lovely people, a real eye opener, a great day and looking forward to being a part of the volunteering service."

- a volunteer

AREA COORDINATORS AND LOCAL AREA VOLUNTEER SUPPORT GROUPS

We are continually inspired by the work carried out by these groups and the support they provide to people in their local communities who have received a cancer diagnosis. Area coordinators and local area volunteer support groups assist in a variety of ways including transport, companionship, providing information, and responding to a range of other requests for assistance.

EXECUTIVE COMMITTEE, MEDICAL ADVISORY SUBCOMMITTEE AND FINANCE AND EMERGENCY SUBCOMMITTEE

All committee members are volunteers and continue to provide commitment,

experience and strong contributions in their areas of expertise and governance, ensuring the success and supporting the direction of our division.

EVENT-BASED VOLUNTEERS

Volunteers also provide support to our other functions including health promotion, fundraising and community services, with hundreds of volunteers coming out in support of Daffodil Day and Relay For Life every year.

AWARDS AND RECOGNITION

The Cancer Society's Hamilton driving team was placed runner-up in the Volunteering Waikato 2015 team excellence awards in June. We were thrilled to see our dedicated volunteer drivers acknowledged.

The oncology support volunteers of the Cancer Society of New Zealand were winners of the 2015 Minister of Health award for 'outstanding achievement community or NGO health service volunteer team'. These volunteers provide a supportive environment in the oncology departments of nine hospitals across the country including Waikato, Rotorua and Thames Hospitals.

This year we introduced a 'volunteer of the month' award to acknowledge volunteers that have gone above and beyond in their roles. This award came about after Peter Banks and his team from STIHL Shop Te Rapa transformed and replanted the overgrown garden at the front of the Cancer Society's Hamilton office; an area that had needed attention for many years. This award was a small way of showing our appreciation. Peter went on to present this project at STIHL's international conference in Australia.

We are working hard to make sure that our volunteers know how much we appreciate

them and all the wonderful work they do. It is an ongoing pleasure to meet volunteers across the region, supporting them in their roles while they support clients and their families on the cancer journey. In short without the spirit, knowledge and passion of our many volunteers we simply could not do what we do.



THANK YOU, ANN BOWRON

This year we said a heartfelt thank you to Ann Bowron, who retired from volunteering after an incredible 23 years with the Waikato/Bay of Plenty Cancer Society. Over the years Ann helped with a variety of roles including the volunteer driving service, oncology and community support, and helping out with Daffodil Day and our Living Well programme.

Ann was part of the group that started a fresh flower delivery service at Ward 25 at Waikato Hospital, and she even used her powers of persuasion to get the district health board to re-paint the foyer to make it a more pleasant experience for patients!

SUPPORTING RESEARCH AND CANCER PROFESSIONALS

MY SABBATICAL FROM APRIL TO JULY 2015 WAS AN AMBITIOUS BUT VALUABLE AND PRODUCTIVE PROGRAMME INVOLVING TRAVEL TO AUSTRALIA, NORTH AMERICA (BUFFALO, TORONTO, CHICAGO), THE UNITED KINGDOM, AND BARCELONA, SPAIN.

The sabbatical largely revolved around two major oncology conferences and my investigator-initiated research programme, focused on using statins, cimetidine or selenium compounds in conjunction with standard cancer treatment to improve outcomes and reduce toxicity.

My aims for this sabbatical were to:

- visit research institutions to further develop collaborative support of clinical trials that I have initiated, with a view to international collaboration in phase 3 trials, specifically:
 - randomised placebo-controlled phase 2 trial of perioperative cimetidine in colorectal cancer
 - randomised placebo-controlled phase 2 trial of simvastatin concurrently with chemoradiation in rectal cancer
 - randomised controlled phase 2 trial of simvastatin with adjuvant radiation in breast cancer
 - selenium with chemoradiation in head and neck cancer
- learn how to use OpenClinica, a free open-source clinical trials database system, with a view to possibly implementing it at Waikato Hospital Cancer Trials Unit (during an attachment at the NHMRC Clinical Trials Centre in Sydney)
- visit major cancer centres to increase my clinical and scientific knowledge of practice in my subspecialty interests
- analyse and write up projects I have conducted, submit manuscripts for publication, and write HRC grant applications for some of the proposed trials

It was very interesting to see how other cancer research centres in Australia, the United States, Canada and the United Kingdom operate and what models and learnings could be applied in New Zealand. Quite simply, most of these centres I visited saw research as a priority, part of their core business and an integral part of their management of cancer patients. This is in the context of national health policy regarding research as an integral part of patient management and improving outcomes, usually with nationally-funded health research infrastructure. This is in stark contrast to New Zealand health policy of research not being "core" district health board business, and not to incur any costs for DHBs.

The standard operating procedures in the Waikato Hospital Cancer Trials Unit compare well to those I saw in action at these overseas centres but we operate on a relatively small scale and we have scope to greatly increase our productivity if we can improve resourcing of research in our DHB. We collectively need to see research as a core clinical activity that can improve the health of our patients, rather than an activity that takes a lower priority when we are under increasing clinical pressure.

Much greater productivity from our various research units could potentially be achieved through having a research "hub" at Waikato Hospital, especially for those research units that need clinical space for patient assessment, infusions, blood sampling and processing with storage in dedicated research fridges and freezers. This could be co-located with "wet bench" laboratory space for registrars undertaking laboratory studies as part of their research and training.

Other trials-specific facilities could usefully include dedicated space for clinical trials pharmacy, file storage, database management and a dedicated administrator and/or receptionist. Two other important components would be the provision of a person skilled in developing industry-compliant databases for investigator-initiated trials, and significant biostatistician time (for support in developing and analysing research, as well as teaching about statistics). On a national level, better collaboration



Dr Michael Jameson – medical oncologist, Waikato Hospital

between DHBs could also improve the range of clinical trials available to New Zealand cancer patients (currently cross-boundary flow of patients to participate in trials is usually not permitted).

Many clinical trials were presented at the conferences I attended; some trials use currently-funded chemotherapy or targeted therapies to much better effect than current practice, and these trials will change management of patients in New Zealand. However, most trials involved expensive new drugs with activity varying from minimal to staggering, but all with drug costs that are simply unaffordable in the New Zealand healthcare environment. In this context, my ongoing research focus on using inexpensive drugs to improve cancer outcomes continues to be extremely relevant.

This sabbatical has been invaluable in enabling me to progress and strengthen existing research (and develop new projects) with New Zealand, Australian and other international collaborators. These projects take time to bear fruit but I am grateful for the opportunity to invest this substantial amount of time in them.

WAIKATO REGIONAL CANCER CENTRE REPORT

ON BEHALF OF THE WAIKATO REGIONAL CANCER CENTRE, I WOULD LIKE TO TAKE THIS OPPORTUNITY TO THANK THE WAIKATO/BAY OF PLENTY DIVISION OF THE CANCER SOCIETY OF NEW ZEALAND FOR THE OPPORTUNITY TO REPORT ON OUR LAST YEAR'S ENDEAVOURS.

The past year has been another busy one. Similar to the year before, we saw approximately 4,500 patients a month; many of these are patients who are requiring multiple visits as part of their cancer management. It is with this in mind that we continually strive towards providing our patients with the high quality support that is required.

We have implemented a number of initiatives that aim to improve the quality of care that we provide to our patients, and some of these initiatives have demonstrated tangible benefits to our patients. Most pleasing is the recent employment of clinical psychologists to supplement the Ministry of Health's Faster Cancer Treatment (FCT) programme. The new roles are intended to build on and support existing services in the Midlands region to meet the psychological and social support needs of cancer patients and their family/whānau.

It is also pleasing to note that Waikato Hospital has also seen a steady improvement in meeting the FCT target. In our provisional 2015/16 quarter four results the Ministry has noted "impressive progress which reflects the commitment and programme of activity at Waikato DHB". Our achievement for quarter three of 77% shows a steady and sustained improvement over the calendar year 2015-2016. Activities continue to be undertaken to improve Waikato's performance against this target.

Waikato District Health Board (DHB) does not work in isolation. Instrumental towards effective patient outcomes is a partnership approach, and engagement, with the wider Midlands community. We are engaged in a collaborative manner with the Midlands Cancer Network, working on national and regional strategic aims, ensuring that these are implemented

in a sustainable and sage manner. We are further enhancing our links with our Midland district health board partners; Tairawhiti, Bay of Plenty and Lakes ensuring that the journey of patients from a Midland context are streamlined and smooth across all services and DHBs.

The importance of the Cancer Society's Lions Lodge and the role that it plays in supporting patients and their whānau cannot be underestimated. Many of our regional patients enjoy this "home away from home" as they undergo various treatments at Waikato Hospital. Similar to last year, the feedback from many patients and their whānau is that this is an invaluable service for them while they undergo treatment.

The oncology unit at Waikato Hospital has undergone a transformation over the past few months. We would like to thank the Waikato/Bay of Plenty Cancer Society for their financial support of this much needed transformation. As a result of your generosity, we have painted and had new carpet installed in our oncology clinic area. Both staff and patients have positively commented on the new look.

Our service could not operate as smoothly and efficiently as it does without the support, hard work and dedication of so many people and we would like to take this opportunity to thank everyone who has contributed to the provision of this ongoing care. We would especially like to thank our wonderful Cancer Society volunteers. Your hard work, commitment, and dedication to our patients and staff alike are truly inspirational and we are very proud and privileged to be the benefactors of such a wonderfully skilled and dedicated group of volunteers.

On behalf of all the staff and patients at the Waikato Regional Cancer Centre, I would like to again thank the Waikato/Bay of Plenty Division of the Cancer Society for their ongoing support. We look forward to continuing our close relationship in the years to come.

Gabby Reynolds Nurse Manger Oncology

WAIKATO BREAST CANCER REGISTER REPORT



Left to right: Heather Flay (research nurse), Sasha Taipari (data entry support, WBCR), Jenni Scarlet (research nurse), Rachel Shirley (coordinator WBCR) and Fiona Johnson (PA & fundraising coordinator WBCT). WBCR = Waikato Breast Cancer Register and WBCT = Waikato Breast Cancer Trust.

NATIONAL CONSOLIDATION PROJECT

The Waikato Breast Cancer Register (WBCR) collects data on all breast cancers in the Waikato region since 1991.

This key resource is used to help understand and improve breast cancer outcomes and treatment for Waikato patients. Similar breast cancer registers operate in three other regions – Auckland, Wellington and Canterbury. These combined registers collect data on 63% of New Zealand's breast cancer registrations – approximately 1,600 cases per year.

The four registers are in the process of consolidation into a national breast cancer register (NBCR) under the guidance of the New Zealand Breast Cancer Foundation (NZBCF), Ministry of Health (MOH), and the National IT Board. Dendrite Clinical Systems Ltd (UK) - developers of the new NZ Cardiac Surgery Registry - was selected

to create a web-based database (clinical data repository) which will be securely stored at the Ministry of Health alongside similar clinical registries. This new database may be online by August 2016.

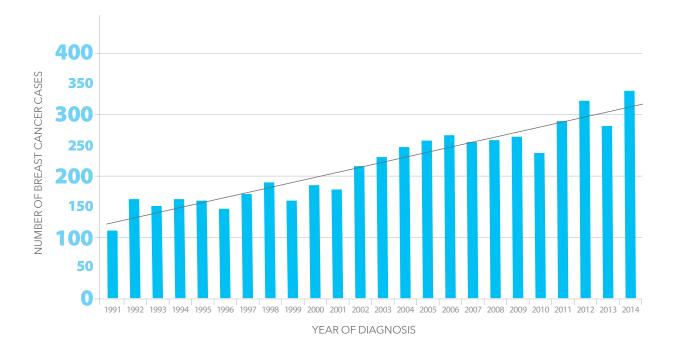
The Waikato Register is working hard throughout the consolidation process to ensure ethical issues are addressed and that patient data and privacy remains secure

Many benefits will arise from creating a NBCR – from establishing a larger dataset for researchers, auditors and clinicians to analyse, improved reporting to the Ministry of Health, to potential data entry cost efficiencies and the hope that other regions will join the register to make this a truly comprehensive dataset on all New Zealand breast cancers.



Mr Ian Campbell, General and Breast Surgeon and Principal Investigator for the WBCR.

NUMBER OF WAIKATO BREAST CANCER CASES 1991-2014



SUMMARY OF REGISTER DEVELOPMENTS/ACTIVITIES

For this reporting period (1 September 2015 to 30 June 2016) we received a number of data requests. We are pleased that Waikato data was used to support a number of interesting research projects, publications and presentations.

- The WBCR contains 24½ years of breast cancer data from 1 January 1991 to 30 June 2015. The register team are currently entering breast cancer cases diagnosed during July 2015.
- There are now 5,244 patient details entered in the WBCR including an additional 648 new cases entered since the last reporting period.
- On average there are now approximately 280 Waikato breast cancer registrations annually. 2014 saw our highest recorded number of cases -341 breast cancer cases diagnosed in the region.
- In 2014 55% of breast cancer cases in the Waikato were found via screening (Breast Screen Aotearoa or private screening), while 45% were symptomatic (e.g. patient found a lump).
- Breast cancer is an overwhelmingly female cancer – in 2014 99.7% of Waikato patients were female and 0.3% male.

 The percentage of mastectomies performed in the Waikato continues to decline, corresponding to an increase in breast conserving surgery - with 67% of Waikato patients receiving breast conserving surgery and 33% requiring mastectomy in 2014.

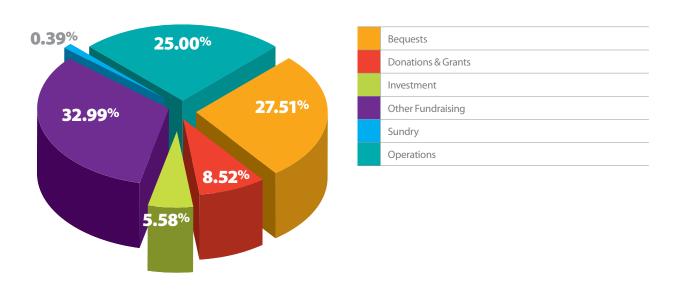
We wish to convey our sincere thanks and appreciation to the Waikato/Bay of Plenty Division of the Cancer Society for its ongoing funding. Our top priority remains to serve breast cancer patients and their treating clinicians to improve outcomes. We hope to continue working closely with the Waikato/Bay of Plenty Division of the Cancer Society.

Rachel Shirley

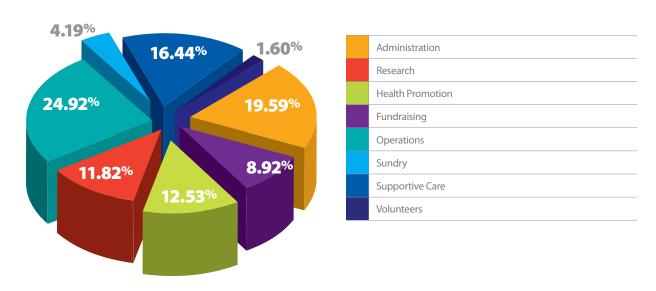
Coordinator, Waikato Breast Cancer Register Breast Cancer Research Office, Waikato Hospital

INCOME AND EXPENDITURE PERCENTAGES

INCOME ANALYSIS FOR THE YEAR ENDED 31 MARCH 2016



EXPENSE ANALYSIS FOR THE YEAR ENDED 31 MARCH 2016



STATEMENT OF COMPREHENSIVE REVENUE AND EXPENSES

INCOME	NOTE		2016	2015
			\$	\$
Revenue from non-exchange transactions				
Donations - Remembrance		26,902		21,821
- General		107,405		203,782
			134,307	225,603
Grants			179,320	193,990
Fundanising Deffedil Day	1	406 704		450 201
Fundraising - Daffodil Day		496,794		458,301
- General Appeals	1	134,103		244,710
- Community Fundraising	1	121,688		-
- Relay For Life Hamilton	1	63,363		150,766
- Relay For Life Tauranga	1	7		(1,920)
- Relay For Life Rotorua	1	3	815,958	(3,306) 848,551
			013,930	040,331
Legacies and Bequests			1,013,018	2,170,073
			2,142,603	3,438,217
Revenue from exchange transactions				
Income from Investments			226,667	245,378
Health Promotion Merchandise			7,739	14,224
Gain on sale of Investment			6,096	-
Gain on sale of Fixed Asset			425	356,500
Subscriptions			259	367
Lodge Contract			899,627	961,525
Total Revenue			3,283,416	5,016,211
Expenditure				
Administration	2		1,019,686	1,061,822
Study Grants	3	12,930		10,804
Special Grants	4	135,499		170,446
National Levy	5	595,605		584,404
			744,034	765,654
Health Promotion Activities	6		383,772	568,466
Community Services	7		769,208	740,102
Cancer Society's Lions Lodge	8		1,115,123	1,227,992
Investment Expenses			-	53,252
Manuka Street Sale Costs			44,300	-
Impairment on asset held for sale			-	214,000
Total Expenditure for the year			4,076,123	4,631,288
Surplus/(Deficit) for the Year			(792,707)	384,923
Other Comprehensive Revenue and Expenses			-	-
Total Comprehensive Revenue			(792,707)	384,923

STATEMENT OF FINANCIAL POSITION

	NOTE		2016	2015
			\$	\$
Current Assets				
Bank Accounts	9	188,529		837,960
Imprest Accounts		8,050		8,051
Mona Lickfold Memorial Fund	16	61,442		63,665
Property Intended for Sale	21	-		1,200,000
GST Refund Due	10	6,353		33,513
Receivables from non-exchange transactions		88,785		178,824
		353,159		2,322,013
Current Liabilities				
Hold Estate Mortgage Advance	12	1,200,000		-
Accrued Holiday Pay		81,841		71,335
Accounts Payable		58,104		144,709
		1,339,945		216,044
Working Capital		(986,786)		2,105,969
Non Current Assets				
Investments	13	4,338,516		2,988,357
Fixed Assets	17	16,573,421		16,503,257
		20,911,937		19,491,614
Non Current Liabilities				
ANZ Bank Loan	12	-		1,137,500
Total Net Assets		19,925,151		20,460,083
Represented by:				
Investment Fair Value Reserve	11	958,835		700,087
Mona Lickfold Memorial Fund	16	61,442		63,665
Research and Overseas Travel Reserve Fund	15	245,873		244,623
Accumulated Funds	14	18,659,001		19,451,708
Accumulated Funds and Reserves		19,925,151		20,460,083

STATEMENT OF CHANGES IN NET ASSETS

FOR THE YEAR ENDED 31 MARCH 2016

	INVESTMENT FAIR VALUE RESERVE	RESEARCH AND OVERSEAS TRAVEL RESERVE	MONA LICKFOLD MEMORIAL FUND	ACCUMULATED FUNDS	TOTAL EQUITY
Opening balance 1 April 2015	700,087	244,623	63,665	19,451,708	20,460,083
Surplus/(Deficit) for the year	-	-	-	(792,707)	(792,707)
Other Comprehensive Revenue	-	-	-	-	-
Transfers	258,748	1,250	(2,223)	-	257,775
Closing Equity 31 March 2016	958,835	245,873	61,442	18,659,001	19,925,151
		-,-	,	,,,,,,,	-,,-
	INVESTMENT FAIR VALUE RESERVE	RESEARCH AND OVERSEAS TRAVEL RESERVE	MONA LICKFOLD MEMORIAL FUND	ACCUMULATED FUNDS	TOTAL EQUITY
Opening balance 1 April 2014	391,923	235,260	67,546	19,066,785	19,761,514
Surplus/(Deficit) for the year	-	-	-	384,923	384,923
Other Comprehensive Revenue	-	-	-	-	-
Transfers	308,164	9,363	(3,881)	-	313,646
Closing Equity 31 March 2015	700,087	244,623	63,665	19,451,708	20,460,083

The Auditor's Report and Notes form part of and are to be read in conjunction with the financial statements.

M Loewenthal, President 1 August 2016 J Gould, Chief Executive 1 August 2016

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STATEMENT OF CASH FLOWS

	NOTE	2016	2015
		\$	\$
Cashflows from Operating Activities			
Cash was provided from			
Receipts from non-exchange transactions		2,187,009	3,391,081
Receipts from exchange transactions		1,192,967	1,190,573
		3,379,976	4,581,654
Cash was applied to			
Payment to Suppliers		1,768,432	1,924,854
Payment to Employees		1,917,583	1,862,762
Interest Paid		52,686	19,0215
Net GST		(22,315)	6,381
		3,716,386	3,984,212
Net Cashflows from Operating Activities	18	(336,409)	597,442
Cashflows from Investing Activities			
Cash was provided from			
Sale of Fixed Assets		-	1,758,154
Sale of Investment Property		1,200,000	
		1,200,000	1,758,154
Cash was applied to			
Purchase of Shares		11,099	26,667
Funds Held in Term Deposits		1,080,312	187,403
Fixed Asset Purchase		484,111	
		1,575,522	214,070
Net Cashflows from Investing Activities		(375,522)	1,544,084
Cashflows from Financing Activities			
Cash was provided from			
Drawdown of Loan		1,200,000	-
		1,200,000	-
Cash was applied to			
Repayment of Loan		1,137,500	2,000,000
		1,137,500	2,000,000
Net Cashflows from Financing Activities		62,500	(2,000,000)
Net increase/(decrease) in cash equivalents		(649,431)	141,527
Cash and cash equivalents 1 April		837,960	696,433
Code and early aminutes 21 Mars 1		100 500	027011
Cash and cash equivalents 31 March	9	188,529	837,960

FOR THE YEAR ENDED 31 MARCH 2016

THESE FINANCIAL STATEMENTS SHOULD BE READ IN CONJUNCTION WITH THE NOTES TO THE FINANCIAL STATEMENTS

STATEMENT OF ACCOUNTING POLICIES

REPORTING ENTITY

The reporting entity is the Waikato/Bay of Plenty Division Cancer Society of New Zealand (Inc), hereinafter referred to as the division. The division is domiciled in New Zealand and is a charitable organisation registered under the Incorporated Societies Act 1908 and the Charities Act 2005.

The financial statements comprising the division are presented for the year ended 31 March 2016.

These financial statements and the accompanying notes summarise the financial results of activities carried out by the division.

These financial statements have been approved and were authorised for issue by the Executive Committee on 1 August 2016.

STATEMENT OF COMPLIANCE

The division's financial statements have been prepared in accordance with Generally Accepted Accounting Practice in New Zealand ("NZGAAP"). They comply with the Public Benefit Entity International Public Sector Accounting Standards ("PBE IPSAS") and other applicable financial reporting standards as appropriate that have been authorised for use by the External Reporting Board for Not-For-Profit entities. For the purpose of complying with NZGAAP, the division is a public benefit not-for-profit entity and is eligible to apply Tier 2 Not-For-Profit PBE IPSAS on the basis that it does not have public accountability and it is not defined as large.

The Executive Committee has elected to report in accordance with Tier 2 Not-For-Profit PBE Accounting Standards and in doing so has taken advantage of all applicable Reduced Disclosure Regime ("RDR") disclosure concessions.

CHANGES IN ACCOUNTING POLICY

For the year ended 31 March 2015 the division prepared its financial statements using the New Zealand Financial Reporting Standards ("NZFRS"). These have now been restated to Not-For-Profit

PBE IPSAS – RDR. An explanation of how the transition to Tier 2 Not-For-Profit PBE Accounting Standards has affected the reporting Statement of Financial Position and Statement of Comprehensive Revenue and Expenses is provided in Note 22 of the statement of accounting policies.

MEASUREMENT BASE

The accounting principles recognised as appropriate for the measurement and reporting of earnings and financial position on a historical cost basis are followed by the division.

SPECIFIC ACCOUNTING POLICIES

The following specific accounting policies which materially affect the measurement of financial performance and financial position have been applied:

(a) CASH AND CASH EQUIVALENTS

Cash and cash equivalents includes cash in hand, deposits held at call with banks, other short-term highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value, and bank overdrafts.

(b) TRADE AND OTHER RECEIVABLES

Trade and other receivables are recognised initially at fair value and subsequently measured at amortised cost using the effective interest method, less provision for impairment.

Collectability of trade receivables is reviewed on an ongoing basis. Individual debts which are known to be uncollectible are written off. A provision for impairment of trade receivables is established when there is objective evidence that the division will not be able to collect all amounts due according to the original terms of the receivables

If, in a subsequent period, the amount of impairment loss decreases and the decrease can be related objectively to an event occurring after the impairment was recognised (such as an improvement in the debtor's credit rating), the previously recognised impairment loss is reversed and the reversal is recognised in the Statement of Financial Performance.

FOR THE YEAR ENDED 31 MARCH 2016

(c) PROPERTY PLANT AND EQUIPMENT

Fixed Assets are valued at cost price less accumulated depreciation.

Depreciation of Fixed Assets.

Depreciation has been charged using the straight line method for all assets except land which is not depreciated.

Specific rates used are:				
Motor Vehicles	20%			
Furniture & Equipment	10% - 50%			
Property	3.3% - 12%			
Improvements	8.33%			
Cancer Society's Lions Lodge	2% - 33%			

(d) FINANCIAL INSTRUMENTS

Financial assets and financial liabilities are recognised when the division becomes a party to the contractual provisions of the financial instrument.

The division classifies its financial assets in the following categories: financial assets at fair value through the profit or loss, loans and receivables, held to maturity investments and available-for-sale financial assets. The classification depends on the purpose for which the investments were acquired. Management determines the classification of its investments at initial recognition and re-evaluates this designation at every reporting date. At balance date, the division had financial assets classified as available-for-sale and loans and receivables.

Available-for-sale Financial Assets

Available-for-sale financial assets are non derivatives that are either designated in this category or not classified in any of the other categories. They are included in non-current assets unless management intends to dispose of the investment within 12 months of the Statement of Financial Position. The division's investments in listed securities are classified as available-for-sale financial assets.

Purchases and sales of investments are recognised on trade date – the date on which the division commits to purchase or sell the asset. Investments are initially recognised at fair value plus transaction costs. Available-for-sale financial assets are subsequently carried at fair value. The fair values of quoted investments are based on current bid prices. Unrealised gains and losses arising from changes in the fair value of securities classified as available-for-sale are recognised in equity.

Loans and Receivables

Loans and receivables are non-derivative financial assets with determinable payments that are not quoted in an active market. After initial recognition these are measured at amortised cost using the effective interest method, less any allowance for impairment. The division's cash and cash equivalents and receivables from non-exchange transactions fall into this category.

Impairment of financial assets

The division assesses at the end of reporting date whether there is objective evidence that a financial asset or a group of financial assets is impaired. A financial asset or a group of financial assets is impaired and impairment losses are incurred if there is objective evidence of impairment as a result of one or more events that occurred after the initial recognition of the asset (a "loss event") and that loss event has an impact on the estimated future cash flows of the financial asset or the group of financial assets that can be reliably estimated.

For financial assets carried at amortised cost, if there is objective evidence that an impairment loss on loans and receivables carried at amortised cost has been incurred, the amount of the loss is measured as the difference between the asset's carrying amount and the present value of the estimated future cash flows discounted at the financial asset's original effective interest rate. The carrying amount of the asset is reduced through the use of an allowance account. The amount of the loss is recognised in the surplus or deficit for the reporting period.

In determining whether there are any objective evidence of impairment, the division first assesses whether there are objective evidence of impairment for financial assets that are individually significant, and individually or collectively significant for financial assets that are not individually significant. If the division determines that there is no objective evidence of impairment for an individually assessed financial asset, it includes the asset in a group of financial asset with similar credit risk characteristics and collectively assesses them for impairment. Assets that are individually assessed for impairment and for which an impairment loss is or continues to be recognised are not included in a collective assessment for impairment.

If in a subsequent period, the amount of the impairment loss decreases and the decrease can be related objectively to an event occurring after the impairment was recognised, the previously recognised impairment loss is reversed by adjusting the allowance account. If the reversal results in the carrying amount exceeding its amortised cost, the amount of the reversal is recognised in surplus or deficit.

FOR THE YEAR ENDED 31 MARCH 2016

Financial liabilities

The division's financial liabilities include trade and other creditors, and employee entitlements.

All financial liabilities are initially recognised at fair value (plus transaction cost for financial liabilities not at fair value through surplus or deficit) and are measured subsequently at amortised cost using the effective interest method except for financial liabilities at fair value through surplus or deficit.

(e) TRADE AND OTHER PAYABLES

These amounts represent unsecured liabilities for goods and services provided to the division prior to the end of the financial year which are unpaid. Trade and other payables are recognised initially at fair value and subsequently measured at amortised cost using the effective interest method. As trade and other payables are usually paid within 30 days, they are carried at face value.

(f) REVENUE RECOGNITION

Revenue is recognised to the extent that it is probable that the economic benefit will flow to the division and revenue can be reliably measured. Revenue is measured at the fair value of the consideration received. The following specific recognition criteria must be met before revenue is recognised.

Revenue from non-exchange transactions

Donations

Donations are recognised as revenue upon receipt and include donations from the general public, donations received for specific programmes or services or donations in-kind.

Fundraising Revenue

Fundraising revenue is recognized as revenue when the right to receive has been established.

Grant revenue

Grant revenue includes grants given by other charitable organisations, philanthropic organisations and businesses. Grant revenue is recognised when the conditions attached to the grant have been complied with. Where there are unfulfilled conditions attaching to the grant, the amount relating to the unfulfilled condition is recognised as a liability and released to revenue as the conditions are fulfilled.

Legacies and bequests

Revenue from legacies and estates that satisfies the definition of an asset is recognised when it is probable that future economic benefits or service potential will flow to the entity, and the fair value can be measured reliably.

Revenue from non-exchange transactions

Exchange Revenue

Revenue from the exchange revenue is recognised when the significant risks and rewards have been transferred to the buyer on delivery of the goods or services and when the amount of revenue can be measured reliably and it is probable that the economic benefits or service potential associated with the transaction will flow to the division.

Lodge Contract Revenue

The division receives funding from the government for carrying out the services specified in the Cancer Society's Lions Lodge contract. Revenue is recognised in the period the services are provided

Interest revenue

Interest revenue is recognised as it accrues, using the effective interest method.

(g) GST

These financial statements have been prepared on a GST exclusive basis except for accounts receivable and accounts payable.

(h) INCOME TAX

The division has been granted Charitable Status and is exempt from income tax by the Inland Revenue Department.

			2016	2015
			\$	\$
NOTE 1	FUNDRAISING			
	Daffodil day			
	Donations	481,672		486,090
	ANZ Bank	213,274		214,819
		694,946		700,909
	Less Expenses	198,152		242,608
			496,794	458,301
	General Appeals	253,012		392,984
	Less Expenses	118,909		148,274
			134,103	244,710
	Community Fundraising	125,308		-
	Less Expenses	3,620		_
		3,525	121,688	_
	Relay For Life		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Hamilton	141,697		210,420
	Less Expenses	78,334		59,654
			63,363	150,766
	Tauranga	7		330
	Less Expenses	_		2,250
			7	(1,920)
			-	(1,7=2)
	Rotorua	3		(3,306)
	Less Expenses	-		-
			3	(3,306)
NOTE 2	ADMINISTRATION		-	(5,555)
	Salary, Kiwisaver	430,202		380,158
	Office Expenses	22,768		21,608
	Telephone and Postage	74,394		78,036
	Printing and Stationery	16,683		14,148
	Repairs and Maintenance	55,635		38,232
	Electricity and Gas	14,213		14,651
	Insurance, ACC Levy, Valuation	19,173		18,817
	General Expenses	1,807		2,619
	Meeting Expenses (including printing and travel)	11,976		12,058
	Motor Vehicle Expenses	14,292		23,641
	Audit Fee	7,960		7,125
	Legal Fees	3,859		675
	ANZ Loan interest	52,686		78,138
	Loss on sale of fixed asset	75		5,904

				2016		2015
				\$		\$
NOTE 2	ADMINISTRATION					
	Depreciation - Buildings	53,808			57,623	
	- Motor Vehicles	22,608			23,459	
	- Furniture, fittings, equipment	13,987	90,403		15,841	96,923
	Public Relations		70,763			132,315
	Rates		7,583			6,368
	Technology		122,561			121,920
	Professional Development		2,653			8,486
				1,019,686		1,061,822
NOTE 3	STUDY GRANTS					
	Study Grants - Local		-			274
	Study Grants - Overseas		2,930			530
	Alan Lomas Memorial Grant		10,000			10,000
				12,930		10,804
NOTE 4	SPECIAL GRANTS					
	Care Community Trust		3,000			17,000
	Community Seminars		-			181
	Regional Research Grant		132,499			153,265
				135,499		170,446
NOTE 5	NATIONAL LEVY					
	Research		396,555			389,097
	Health Promotion		164,250			161,155
	Support and Volunteer Services		34,800			34,152
			,,,,,,	595,605		584,404
NOTE 6	HEALTH PROMOTION ACTIVITIES					
	Printed Material, Advertising etc		36,542			13,525
	Education Portion of Salaries		254,429			226,418
	Education Portion of Travel Expenses		6,666			6,307
	Special Projects - Shade Promotion		6,406			259,659
	Promotions		49,821			33,701
	Merchandise		29,908			28,856
				383,772		568,466
NOTE 7	COMMUNITY SERVICES					
	Grants		19,012			24,998
	Client, Family Support		750,196			715,104
				769,208		740,102

			2016	2015
			\$	\$
NOTE 8	CANCER SOCIETY'S LIONS LODGE			
	Catering	50,226		75,260
	Salaries	487,560		477,028
	Repairs & Maintenance, Cleaning	145,622		117,971
	Rates	7,122		11,578
	Telephone	12,683		12,736
	Insurance/ACC	20,933		24,581
	Technology/Internet	4,149		3,378
	Postage/Stationery	1,395		1,542
	Public Relations	2,366		771
	Meetings, Workshops	683		3,190
	Print Materials/Resources	828		6,862
	Electricity & Gas	36,367		39,485
	Travel, Conference, Training	37		-
	Staff Recruitment	1,284		-
	Vehicle Expenses	10,139		11,150
	Volunteer Expenses	1,369		2,579
	Depreciation (includes vehicle)	323,119		324,004
	General Expenses	1,427		429
	Kitchen Upkeep	1,293		2,239
	Bedroom Upkeep	6,521		1,132
	ANZ Bank Loan Interest	-		112,077
			1,115,123	1,227,992
NOTE 9	BANK ACCOUNTS			
	ANZ Bank	134,532		505,334
	ANZ Bank	53,997		332,626
			188,529	837,960
NOTE 10	ACCOUNTS RECEIVABLE			
	Goods & Services Tax	6,353		33,513
	Debtors	88,785		178,824
			95,138	212,337
NOTE 11	INVESTMENT FAIR VALUE RESERVE			
	Opening Balance		700,087	391,923
	Revaluation of Equities		258,748	308,164
-	Closing Balance		958,835	700,087

FOR THE YEAR ENDED 31 MARCH 2016

				2016		2015
				\$		\$
NOTE 12	BORROWINGS					
	Current			1,200,000		-
	Non-current			-		-
				1,200,000		-
	ANZ Bank Loan Tauranga					
	Current			-		1,137,500
	Non-current			-		-
	The loan on the Cancer Society's Tauranga property was p	aid off in full on 21 I	December 2015			
NOTE 13	INVESTMENTS					
	On Call Deposits		1,292,131			211,819
	Equities		3,046,385			2,776,538
				4,338,516		2,988,357
	The market price of listed Equities at balance date was \$3,0	046,385 (2015: \$2,77	6,538)			
NOTE 14	ACCUMULATED FUNDS					
	Opening Balance			19,451,708		19,066,785
	(Deficit)/Surplus for Year			(792,707)		384,923
				18,659,001		19,451,708
NOTE 15	RESEARCH & OVERSEAS TRAVEL RESERVE FUND					
	Opening Balance		244,623			235,260
	Research Donations		1,250			9,363
	Closing Balance			245,873		244,623
NOTE 16	MONA LICKFOLD MEMORIAL FUND					
	Opening Balance		63,665			67,546
	Interest	2,392			2,549	
	Welfare Grants	(4,615)			(6,430)	
			(2,223)			(3,881)
	Closing Balance			61,442		63,665

On 23 November 1999 the Executive Committee of the Waikato/Bay of Plenty Divison of the Cancer Society of New Zealand Incorporated approved the establishment of the Mona Lickfold Memorial Fund. The fund recognises the exceptional generosity of Mona Lickfold's bequest to the Cancer Society. The fund is established for the benefit of cancer patients/families in the Whakatane district. The fund is administered in accordance with the Rules for Prudent Trustees as endorsed by the Chartered Accountants Australia and New Zealand. The account is operated by three trustees based in Whakatane.

NOTE 17	FIXED ASSETS							
	2016	Cost	Additions	Disposals	Acc Dep	Book Value		
	Land and Buildings	2,977,239	449,396	-	(568,760)	2,857,875		
	Motor Vehicles	143,010	19,130	(16,348)	(94,419)	51,373		
	Furniture, Fittings, Equipment	257,925	16,177	(1,000)	(232,212)	40,890		
	Lodge Land & Buildings	14,974,400	-	-	(1,666,077)	13,308,323		
	Lodge Fixtures, Fittings & Vehicle	556,286	3,727	-	(245,053)	314,960		
		18,908,860	488,430	(17,348)	(2,806,521)	16,573,421		
	2015	Cost	Additions	Disposals	Acc Dep	Book Value		
	Land and Buildings	2,977,238	-	(2,280,395)	(514,952)	2,462,286		
	Motor Vehicles	143,010	20,997	-	(83,801)	59,209		
	Furniture, Fittings, Equipment	257,922	14,335	-	(218,900)	39,022		
	Lodge Land & Buildings	14,974,400	-	-	(1,390,754)	13,583,646		
	Lodge Fixtures, Fittings & Vehicle	556,351	-	-	(197,257)	359,094		
		18,908,921	35,332	(2,280,395)	(2,405,664)	16,503,257		
NOTE 18	RECONCILIATION OF NET SURPLUS WITH NET CASH FLOWS							
				2016		2015		
	Net Profit/(loss)			(792,707)		384,923		
	Plus - Non-cash items							
	Depreciation			413,522		420,927		
	Impairment			-		214,000		
	Sale of Fixed Assets			425		(356,500)		
	Sale of Investment Properties			6,096		-		
	W. I			420,043		278,427		
	Working capital movements			00.020		(70.050)		
	Change in Trade and Other Debtors			90,039		(78,056)		
	Change in Trade and Other Payables			(76,099)		18,530		
	Change in Net GST			22,315		(6,381)		
				36,255		(65,907)		
	Net cash flow from operating activities			(336,409)		597,442		
	Net cash now from operating activities			(330,403)		337,442		
NOTE 19	CAPITAL COMMITMENTS							
	There were no capital commitments as at 31 March 2016 (2015)	5: Nil)						
		,						
NOTE 20	CONTINGENT ASSETS AND LIABILITIES							
	There are no contingent assets or liabilities as at 31 March 2016 (2015: Nil)							

NOTE 21	NON CURRENT ASSETS HELD FOR SALE		
	Non current assets held for sale consisted of a bequeathed property which the Executive Committee has agreed to sell. The Society entered into an agreement to sell the property on 10 June 2015. (Refer note 23). The property is expected to be sold within 12 months of reporting date. As at 31 March 2015 the non-current asset held for sale has been valued at fair value.		
NOTE 22	EXPLANATION OF THE TRANSITION TO PBE IPSAS		
	The division's financial statements for the year ended 31 March 2016 are the first annual financial statements prepared in accordance with PBE IPSAS. The division has applied PBE FRS 47 "First-time adotption of PBE standards by those previously applying NZ IFRAs" in preparing these financial statements. There have been no adjustments to the reported results on transition to PBE IPSAS as at the division's transition date and for the current and comparative periods presented.		
NOTE 23	EVENTS AFTER THE REPORTING DATE		
	The Executive Committee and management is not aware of any other matters or circumstances since the end of the reporting period not otherwise dealt with in these financial statements that have significantly or may significantly affect the operations of the division (2015: The Society entered into an agreement to sell a property on 10 June 2015 for \$1,200,000. The Society also entered into an agreement to purchase a propery on 10 June 2015 for \$425,000).		

INDEPENDENT AUDITOR'S REPORT



Staples Rodway

NATIONAL STANDARD ALLOCATION FIGURES

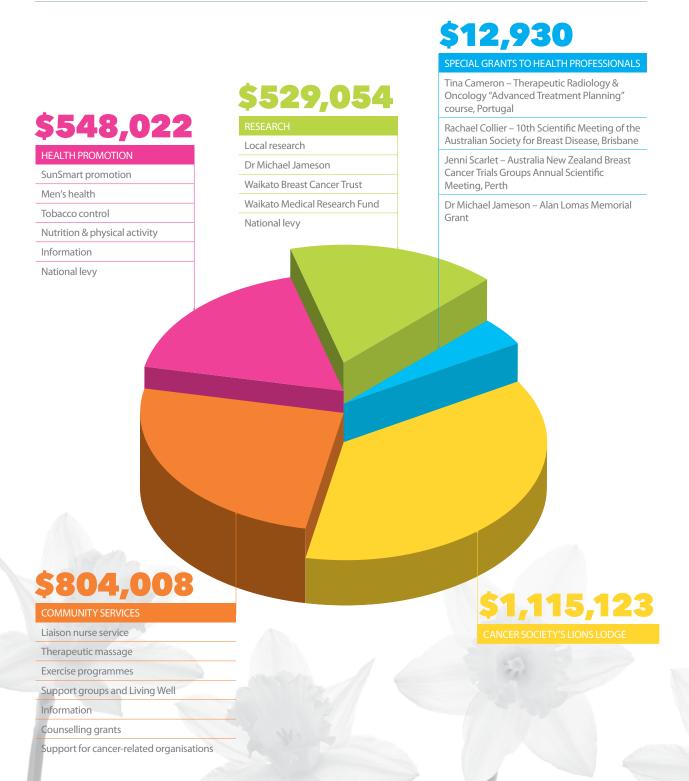
FOR THE YEAR ENDED 31 MARCH 2016

In an effort to provide a consistent presentation of financial information across the divisions of the Cancer Society, it has been agreed that the following breakdown will be used as part of each division's Annual Report.

INCOME ANALYSIS FOR THE YEAR ENDED 31 MARCH 2016	2016	2016
	\$	%
Bequests	1,013,018	27.51%
Donations & Grants	313,627	8.52%
Investment	205,618	5.58%
Other Fundraising	1,214,973	32.99%
Sundry	14,519	0.39%
Operations	920,676	25.00%
TOTAL INCOME	3,682,431	100.00%

EXPENSE ANALYSIS FOR THE YEAR ENDED 31 MARCH 2016	2016	2016
	\$	%
Administration	876,597	19.59%
Fundraising	399,015	8.92%
Health Promotion	560,952	12.53%
Research	529,054	11.82%
Operations	1,115,123	24.92%
Sundry	187,389	4.19%
Supportive Care	735,500	16.44%
Volunteers	71,508	1.60%
TOTAL EXPENDITURE	4,475,138	100.00%
Net Operating Surplus/(Deficit)	(792,707)	

RESOURCE ALLOCATION AND GRANTS



COMMITTEE MEMBERS & STAFF

AS AT 31ST MARCH 2016

PRESIDENT

Murray Loewenthal

VICE PRESIDENT

Richard Seabrook

EXECUTIVE COMMITTEE

Murray Loewenthal * (Chair)

Richard Seabrook

Clive Cleland

Maurice Gianotti

Jan Wright

Denise Irvine

Sally Powdrell

Nell Dawson

Rachael Mounsey

Judy Gould (Chief Executive)

*(National Board Representative)

FINANCE & EMERGENCY SUB COMMITTEE

Richard Seabrook (chair)

Clive Cleland

Murray Loewenthal

Judy Gould

MEDICAL ADVISORY SUB COMMITTEE

Denise Irvine (chair)

Prof Ian Campbell

Dr Cris Hartopeanu

Dr Michael Holmes

Dr Denise Aitken

Judy Gould

LIFE MEMBERS

Barry Prior

Carrick Davidson

Tony Schramm

Jane Haultain

Norman Morris

Colin McAllister

HAMILTON STAFF

Chief Executive	Judy Gould
Finance Manager	Judi Vickers
Communications Manager	Maria Low
Community Services Manager	Hayley McConnell
Volunteer Development Manager	Nicola Bowe
Fundraising Manager	Catriona Findlay
Fundraising Coordinator	Hayley Wilkinson
Fundraising Coordinator	Alison Duncan
Communications Coordinator	Lindsay Clark
Liaison Nurse	Helena Stewart
Liaison Nurse (Rural)	Vicki Donderwinkel
Liaison Nurse (Rural)	Penny Parsons
Health Promoter	Charlie Poihipi
Database Administrator	Lauren Payne

Megen

Sue Worth

Willems-Blacktopp

Phillippa Aubrey

LODGE STAFF

Driving Coordinator

Administrative

Assistant

Receptionist

Manager	Carron Huymans	
Lodge Evening Supervisor	Jo Vermeren	
Lodge Night Supervisor	Katina Reihana	
Receptionist	Henny Swinkels	
Cook	Alice Lim	
Kitchen Assistants	Samara Wilson Hollie Griffiths	
Housekeeping	Hera King Rama Karaitiana Kushla Walker	
Massage Therapist	Marion Griffith	
Drivers	Ann Marsh Tim Seavill	
Lodge Assistant	Phillippa Aubrey	

ROTORUA STAFF

	Office Administrator	Tracey Crompton
	Liaison Nurse	Andrea Youngs
	Health Promoter	Wayne Borell

TAURANGA STAFF

Health Promotion Manager	Melanie Desmarais
Liaison Nurse	Tammy Burgess
Health Promoter	Samia Rose
Office Administrator	Jo Matthews
Driving Coordinator	Jo McIntosh
Massage Therapist	Diana McDonald

SOLICITORS

Tanner Fitzgerald

AUDITORS

Staples Rodway

HOW YOU CAN HELP

TO FIND OUT MORE ABOUT ANY OF THESE PLEASE CONTACT ONE OF OUR OFFICES IN; HAMILTON, TAURANGA OR ROTORUA.







MAKE A DONATION

JOIN AS A MEMBER

LEAVE US A GIFT IN YOUR WILL



BECOME A VOLUNTEER



TAKE PART IN DAFFODIL DAY OR RELAY FOR LIFE



SPONSOR US



ENLIST AS A REGULAR DONOR



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BECOME A COMMUNITY FUNDRAISER

SPONSORS AND SUPPORTERS





WALKING WITH STARS	JN WILLIAMS MEMORIAL TRUST	HB WILLIAMS TURANGA TRUST	ROTARY ROTORUA CHARITABLE LUNCHEON TRUST 2015
FUJI XEROX	NANCY CAIGER TRUST	MEDIA WORKS	THE SOUTHERN TRUST
WHITIANGA VOLUNTEER CANCER SUPPORT GROUP	TIDD FOUNDATION	MYSTERY CREEK EVENTS CENTRE	WHANGAMATA GOLF CLUB
NZ SOUND REINFORCEMENT	BULLZEYE BEST BRANDS	ULTIMATE MOTOR GROUP	STIHL TE RAPA
FASTWAY COURIERS	VELOX SECURITY	SBI PRODUCTIONS	CARLTON PARTY HIRE
THE ORDER OF ST JOHN	NGAHINEPOURI GOLF CLUB	MAVIS & CO	DILMAH TEA



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ROTORUA OFFICE

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Email rotorua@cancersociety.org.nz

TAURANGA OFFICE

111 Cameron Road PO Box 1081, Tauranga 3140 Telephone (07) 571 2035 Facsimile (07) 571 2036 Email tauranga@cancersociety.org.nz

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