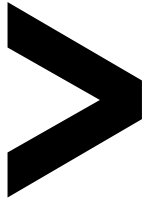




Concrete Progress, Real Need

CANADIAN CENTRE ON SUBSTANCE ABUSE
2005-2006 ANNUAL REPORT

> CCSA AT A GLANCE



PROGRESS THROUGH PARTNERSHIP CCSA is Canada's national addictions agency. Established by an Act of Parliament in 1988, the Centre provides objective, evidence-based information and advice aimed at reducing the health, social and economic harm associated with substance abuse and addictions.

CCSA provides a national focus for Canada's Drug Strategy (CDS), and its work is made possible through a financial contribution from Health Canada as part of the federal government's commitment to the CDS.

Building partnerships is one of CCSA's three core activities and, in fact, is central to the other two: transferring knowledge, and developing and informing policy. Through its philosophy of shared responsibility and accountability, CCSA brings a broad diversity of partners to the table and works to ensure that each one is engaged in an appropriate role. Such collaborations serve to maximize the strengths of the addictions field.

In 2005-2006, CCSA established successful partnerships with nearly 100 government departments, independent agencies, and non-governmental and private-sector organizations in North America, Europe and the Caribbean. These partnerships helped substance abuse stakeholders to leverage their investment, build capacity and achieve consensus.

Among the many rewards of partnering, there are three that stand out as particularly relevant in the substance abuse field.

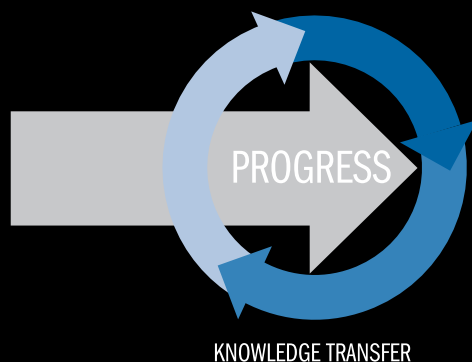


LEVERAGING INVESTMENT Pooling resources is a way of getting things done in the substance abuse and addictions field when no single organization has the means to act alone. The challenge is to find that first dollar, or that initial commitment of in-kind services. Fueled primarily by its federal government contribution, CCSA attracts financial collaboration from all orders of government and provides a high return on investment of public dollars. Examples of such value-added, results-based investment include CCSA's *Costs of Substance Abuse in Canada* report and its Issues of Substance national conference.

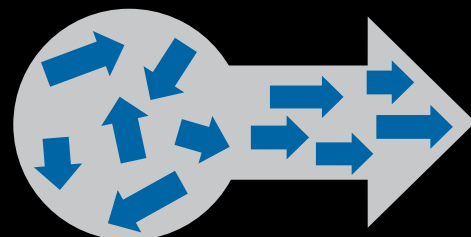
BUILDING CAPACITY The pace of progress in any field is often established not by the front-runners, but by those struggling to keep up. Genuine progress is difficult to achieve without universal access to the latest advances in best-practice thinking and understanding. CCSA is committed to building capacity through its use of knowledge networks and infrastructure. Examples of capacity building include CCSA's commitment to supporting regional multi-sectoral networks through the national Health, Education and Enforcement in Partnership (HEP) Program; and promoting improved skills and education through the National Advisory Group on Workforce Development.

ACHIEVING CONSENSUS Debates and differences of opinion in any field are like the vital signs by which we gage the health of an individual. They are normal and reassuring. However, there are times when a united front serves a higher purpose, paving the way for important new policy directions. CCSA uses its leadership position and power of assembly to create an atmosphere in which everyone can contribute. Examples of CCSA's ability to build consensus around substance abuse issues include its role in the National Framework for Action and the National Alcohol Strategy Working Group.

BUILDING CAPACITY



ACHIEVING CONSENSUS



> COLLABORATION COUNTS In 2006, CCSA published *The Costs of Substance Abuse in Canada 2002*, an update of the Centre's milestone 1996 report on the economic impact of tobacco, alcohol and illegal drugs.

The study was made possible with more than \$500,000 in financial, technical and in-kind support from nearly a dozen federal and provincial partners. The report points to an increase in drug and alcohol use since the last study was done and finds a particularly disturbing spike in drug-related deaths over 10 years. At the same time, it moves us closer to the goal of being able to accurately match investment in programs and policies to the size of the problem.

Sharing the benefits of research

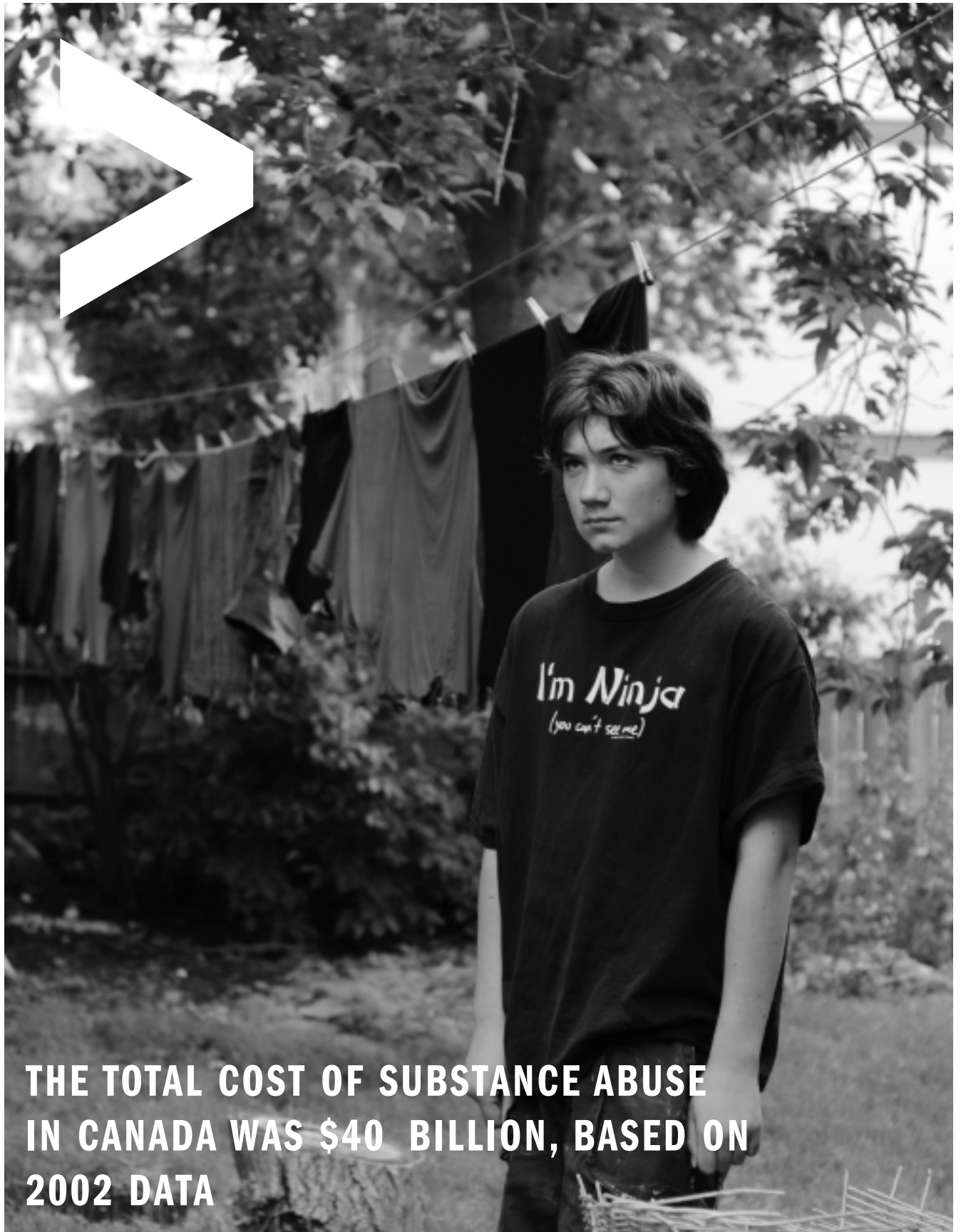
In June 2005, CCSA and its partners in the 2004 Canadian Addiction Survey (CAS) arranged for CAS microdata to be released to the research community through the Data Liberation Initiative (DLI). Several CAS partners have used the data to prepare research briefs, including CCSA's *Toward a Policy-Relevant Typology of Cannabis Use for Canada*, published in March.

In 2005-2006, CCSA staff and associates monitored new research and emerging trends and synthesized these findings into a series of information resources aimed at assisting front-line professionals and informing parliamentarians. Topics included prison-based needle exchange, methamphetamine, drugs and driving, youth solvent abuse, crack cocaine, and mandatory and coerced treatment.

Leadership and guidance

CCSA was invited to provide input and advice to the Standing Senate Committee on Social Affairs, Science and Technology, chaired by Senator Michael Kirby, for its report, *Out of the Shadows at Last: Mental Health, Mental Illness and Addiction Services in Canada*. The report identifies CCSA in a number of key recommendations related to a proposed Canadian mental health commission.





**THE TOTAL COST OF SUBSTANCE ABUSE
IN CANADA WAS \$40 BILLION, BASED ON
2002 DATA**

Direct health care costs related to substance abuse amounted to an estimated \$8.8 billion in Canada in 2002, surpassing both cardiovascular disease (\$7.3 billion) and cancer (\$2.7 billion).

> CAPACITY TO SUCCEED CCSA's investment in its national **Health, Education and Enforcement in Partnership (HEP) Program** helps to support seven autonomous provincial/territorial HEP networks.

The salaries of HEP network coordinators are cost-shared by their respective province or territory and CCSA. HEP's goal is to build capacity through information sharing and coordination of services across jurisdictions and sectors. HEP reached out to new partners last year and accepted an invitation from CICAD, a branch of the Organization of American States, to present a workshop in St. Lucia, which then created its own national HEP-like network. The St. Lucia project was supported by Canada's departments of Foreign Affairs and Public Safety.

Framing national strategies

Since June 2005, 26 organizations have endorsed the National Framework for Action to Reduce the Harms Associated with Alcohol and Other Drugs and Substances in Canada. Several partners also agreed to champion specific Framework priorities such as public awareness and stigma, and addictions in prison.

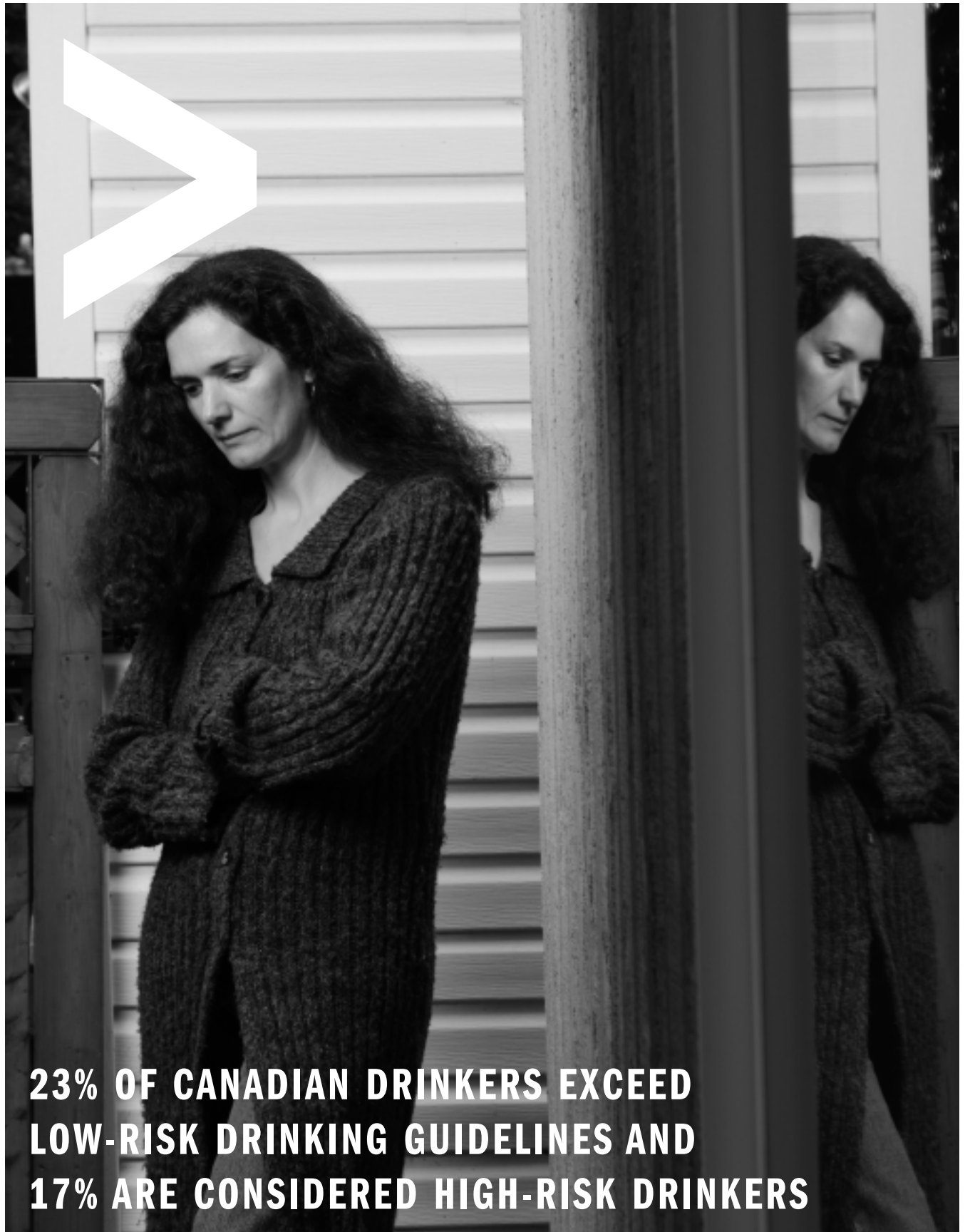
In 2005, the first-ever National Alcohol Strategy Working Group was formed to address another key Framework priority. Co-chaired by CCSA, Health Canada and the Alberta Alcohol and Drug Abuse Commission, the policy working group is seeking broad consensus on a comprehensive alcohol strategy for Canada.

Celebrating communities

At its first-ever meeting in the North, CCSA's Board of Directors paid a personal tribute to Nunavut Premier Paul Okalik, and in Regina, the Board recognized Saskatchewan Premier Lorne Calvert for championing his province's new drug strategy, Project Hope.

As an active partner in several memorandums of agreement, CCSA last year co-published an information resource, *Girls, Women and Substance Use*, with the B.C. Centre of Excellence for Women's Health, and co-sponsored a poster contest with the Youth Solvent Addiction Committee





**23% OF CANADIAN DRINKERS EXCEED
LOW-RISK DRINKING GUIDELINES AND
17% ARE CONSIDERED HIGH-RISK DRINKERS**

Nearly 25% of former or current drinkers report that their drinking has caused harm to themselves and to others. (Canadian Addiction Survey)

> FACE TO FACE WITH PROGRESS **Issues of Substance**, CCSA's first-ever national conference, was a response to persistent calls for a more coordinated approach to substance abuse problems in Canada.

In addition to its own financial and in-kind support for Issues of Substance, CCSA raised more than \$280,000 to stage the event through special funding programs, partnerships and exhibit sales. The conference provided 435 delegates with a forum for knowledge exchange, dialogue and networking. In 125 individual presentations by 118 speakers, the program focused on innovation and action in the areas of prevention, treatment, harm reduction and enforcement.

Listening and learning

The 2005 National Summer Institute (NSI) on Addictions set an attendance record of 90 participants last July. The annual four-day advanced learning session is co-sponsored by the Addictions Research Centre, Correctional Service Canada, and CCSA. Last year's theme of assessment and treatment planning was chosen to reflect participant feedback from the 2004 NSI as well as a 2005 CCSA national survey of service providers.

Group dynamics

A 2006 NSI steering committee was recruited in February from the ranks of the new National Advisory Group on Workforce Development (NAGWD). NAGWD is a partnership of key stakeholders formed by CCSA primarily to ensure broad engagement in a process leading toward a national strategy on workforce development.

In March, CCSA convened a meeting of key stakeholders to discuss needs related to national information exchange. Participants agreed there is a need for better access to Canadian addiction resources and for the targeted provision of information to specific audiences. Several strategies were suggested, including making better use of the Canadian Substance Abuse Information Network, established by CCSA in 1990.





“WHAT HAS BEEN LACKING UNTIL NOW IS A FORUM FOR THIS TYPE OF COMPREHENSIVE DIALOGUE AT A NATIONAL LEVEL IN CANADA...”

*“The extent to which (this) absence has been felt became clear during cross-Canada consultations leading to a National Framework for Action...”
(CCSA news release)*

> MESSAGE FROM THE CHAIR



Since coming to power in January, the Conservative government has begun to redefine the federal role in a number of areas of Canadian life, including addictions and substance abuse. As these changes unfold, we are reminded of the prescience of CCSA's founding chair David Archibald and the other forward-looking individuals who helped establish this Centre.

CCSA's creators envisioned an arm's-length organization that could provide national leadership and a constant presence in the substance abuse field, ensuring continuity and a view of the "big picture" in the face of political change. They then succeeded in convincing the government of the day that such an organization must benefit from an appropriate level of federal investment in order to leverage gains for all Canadians.

This vision has been validated by successive governments, which have recognized CCSA's important role and the non-partisan nature of our legislated mandate. A recent change to CCSA's funding formula under Canada's Drug Strategy again re-affirms the governance structure envisioned by our creators and underlines the importance of CCSA's being independent and being *seen* to be independent.

Independence comes with an acute sense of accountability and responsibility to bring other stakeholders to the table—including the private and not-for-profit sectors—and to raise the profile of the issues they help us to identify. We work closely with many partners and we celebrate their achievements. Last October, for example, at a Board event in Regina, I had the pleasure of presenting a CCSA award recognizing Saskatchewan Premier Lorne Calvert for championing that province's new drug strategy, Project Hope.

CCSA staff earn the trust of our partners through their dedication and commitment to excellence, while the Board serves all Canadians through an ever-growing commitment to accountability. We are engaged in ongoing efforts to exceed the standards of governance for not-for-profit organizations such as CCSA. In the spring, our Chief Executive Officer and I attended a three-day course on the fundamentals of governance for not-for-profit organizations at Queen's University School of Business.

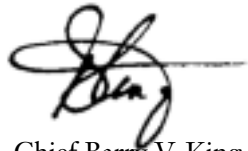
We are clearly defining Board and management roles and responsibilities in a new Board Governance Policy Manual that will soon be completed. As well, the Board continues to ensure that its membership is representative of Canada's geographic, cultural and sectoral diversity. New appointees to the Board in 2005-2006 brought with them a sharper focus on ethics and the public service, and on the interests of Canada's Aboriginal community.

One of the Board's ongoing priorities is to establish and maintain a dialogue with senior government officials and elected representatives of all political parties. This annual report is a small but important part of that effort.

We also meet face to face with parliamentarians to inform them about key issues—as we did recently at a breakfast meeting for 30 parliamentarians interested in learning more about CCSA's Canadian cost study. CCSA also provided extensive input and advice to the Standing Senate Committee on Social Affairs, Science and Technology, chaired by Senator Michael Kirby, during the preparation of its report, *Out of the Shadows at Last: Transforming Mental Health, Mental Illness and Addiction Services in Canada*.

We are committed to continuing to demonstrate to our new government, to our partners and to all Canadians the wisdom and foresight of our founders in creating CCSA, and the importance of sustainable investment to strategically address the problems associated with substance abuse and addictions in Canada.

Finally, I am very pleased to report that in January we were informed that Her Excellency the Right Honourable Michaëlle Jean had accepted CCSA's invitation to become Patron of the Centre. CCSA is deeply honoured by this support.



Chief Barry V. King, OOM
Chair

> MESSAGE FROM THE CHIEF EXECUTIVE OFFICER



For those of us involved in building the kind of collaborative infrastructure needed in Canada and around the world to more effectively tackle the problems associated with substance abuse, there was much to be encouraged by in 2005-2006. Last year, we saw the seeds of a new and unique idea for partnership-building grow into the National Framework for Action to Reduce the Harms Associated with Alcohol and Other Drugs and Substances in Canada. This Framework builds on the diversity of roles and responsibilities within government and the not-for-profit and private sectors, and allows everyone to contribute to a national vision based on shared principles. So far, 26 organizations have endorsed the Framework and the broad base of support is growing. Several partners have also stepped forward to champion specific Framework priorities.

The National Alcohol Strategy Working Group was formed in 2005-2006 to address a key focus of the Framework. The group has made significant progress toward agreement on a national alcohol strategy with specific recommendations for reducing the harms associated with alcohol use in Canada. This is expected by the fall of 2006.

In 2005-2006, three activities clearly demonstrated CCSA's ability to use partnerships to leverage investment, achieve consensus and advance the field. CCSA's Issues of Substance conference in November provided a much-needed national forum for networking and knowledge exchange. The continued growth of CCSA's Health, Education and Enforcement in Partnership (HEP) Program brought closer collaboration with the provinces and territories. Finally, the establishment of the National Advisory Group on Workforce Development represented progress in another key area.

On the international front, the UN Commission on Narcotic Drugs formally endorsed a Canadian resolution calling for greater involvement of NGOs in international drug policy. This sets the stage for an International NGO Forum that I have been asked to chair to coincide with the UN's 1998-2008 review of progress on drug control by member states.

Along with all these advances, we observed some sobering realities in 2005-2006 as highlighted in CCSA's *Costs of Substance Abuse in Canada* report. By almost any measure, substance abuse exacts a greater toll on Canadian society today than it did 10 years ago when the first cost study was done. This goes beyond the usual dichotomy of legal versus illegal drugs since both have become more problematic. Alcohol and other drug abuse figures significantly in three areas that Canadians regularly identify as their biggest concerns: health care, crime, and Canada's productivity and competitiveness in the world.

I believe it is time to fundamentally rethink the way we address substance abuse and to ask ourselves what we are missing. We need to better understand the individual in society and to explore a wider range of explanations for why people use drugs. CCSA is preparing itself for this challenge by exploring strategic approaches to new and emerging developments in our understanding of substance abuse and addictions.

During 2005-2006, organizational changes were made at CCSA that will help us to meet the operational challenges of the future. We created two new positions, Deputy Chief Executive Officer and Chief Financial Officer, that will greatly strengthen our management team.

CCSA staff once again performed superbly in 2005-2006. Their efforts, both individual and collective, represent a rich resource that is further enhanced through partnerships with other organizations. Their teamwork, dedication and sense of caring—many of them volunteer at an Ottawa mission as part of a CCSA outreach program—are nothing short of inspiring. These are the kinds of values CCSA brings to the partnership table and help to explain the successes we have achieved over the years.



Michel Perron
Chief Executive Officer

> 2005-2006 PROGRESS ON GOALS

- > **GOAL:** Increase awareness and understanding of the nature, extent and consequences of substance abuse

ACTIVITY <i>Knowledge Generation/Transfer</i>	OUTCOME
Publishing	<ul style="list-style-type: none"> > 25,581 downloads of new CCSA publications > 3 earlier documents still among Top 5 downloads: <ul style="list-style-type: none"> • <i>Canadian Addiction Survey (CAS)</i> • <i>Substance Abuse in Canada: Challenges and Choices</i> • <i>Directory of FASD Information and Support Services in Canada</i> > 13,793 print publications distributed <ul style="list-style-type: none"> • 34 CCSA documents, new and old
Research Support	<ul style="list-style-type: none"> > CAS data accessed by 12 universities and 4 NGOs <ul style="list-style-type: none"> • Datasets released in June 2005, through a CCSA agreement with Carleton University
Training Activities	<ul style="list-style-type: none"> > 90 advanced learning clients <ul style="list-style-type: none"> • 50% increase in registration at 3rd National Summer Institute on Addictions (July 2005)
Informing Parliament	<ul style="list-style-type: none"> > 44 new high-level contacts <ul style="list-style-type: none"> • Evidence and advice presented to Senate committee studying mental health and addictions • Members of Parliament briefed on <i>The Costs of Substance Abuse in Canada 2002</i> • Regular contact with key elected and appointed officials on drug issues
Information Services	<ul style="list-style-type: none"> > 40% more information requests than in 04-05 > 60% more subscribers to Addiction News Daily > 6% increase in size of CCSA library collection

- > **GOAL:** Increase financial, in-kind and human resources support

ACTIVITY <i>Leveraging Investment</i>	OUTCOME
\$283,000 invested	<ul style="list-style-type: none"> > \$2,015,000 generated (7:1 ratio) <ul style="list-style-type: none"> • Eric Single Studentship Award • Issues of Substance national conference • <i>The Costs of Substance Abuse in Canada 2002</i> • Strategic initiative for addictions research • 4th International Forum on the review of UN General Assembly special session on illicit drugs 1998-2008

> **GOAL:** Increase awareness of CCSA services and activities

ACTIVITY	OUTCOME
<i>Public Relations/Marketing</i>	
Action News <i>Quarterly newsletter, monthly e-bulletin</i>	<ul style="list-style-type: none"> > 14,806 print copies distributed <ul style="list-style-type: none"> • 9% increase over 04-05 > 14,888 electronic transmissions <ul style="list-style-type: none"> • 11% increase
Website <i>Last year, CCSA contracted a consulting firm to conduct an analysis of its website traffic</i>	<ul style="list-style-type: none"> > 500,000 visits in 2005-2006 > 1.65 million page views > 722,320 downloads > “The website is clearly responding to the information needs of clients.” (Hillwatch)
Media Activity	<ul style="list-style-type: none"> > 259 news items generated <ul style="list-style-type: none"> • 151 print articles in 84 publications > 140 requests for information and/or interviews > 28 briefings (<i>The Costs of Substance Abuse in Canada</i>)
Annual Report (2004-05)	> 11,867 downloads, 758 print copies distributed
CCSA Board Meetings	<ul style="list-style-type: none"> > 3 Board meetings (Iqaluit, Regina, Ottawa) <ul style="list-style-type: none"> • First Board meeting in the North (June 2005) • 120 stakeholder contacts

> **GOAL:** Improve inter-sectoral and cross-jurisdictional collaboration and cooperation

ACTIVITY	OUTCOME
<i>Networking/Coordination/Leadership</i>	
Networking/Outreach	> Engaged in 264 events involving 5,853 stakeholders
Coordination	<ul style="list-style-type: none"> > Ongoing support for the Health, Education and Enforcement in Partnership (HEP) Program <ul style="list-style-type: none"> • HEP active in 7 provinces and territories • Staff participated in national school health forum with Joint Consortium on School Health • Staff presented three-day workshop in St. Lucia
Leadership	<ul style="list-style-type: none"> > Co-led (with Health Canada) development of the National Framework (<i>Answering the Call</i>) <ul style="list-style-type: none"> • To date, 26 government and non-governmental organizations have endorsed the Framework > CCSA co-chairing (with Health Canada and AADAC) the National Alcohol Strategy Working Group > CCSA co-chairing the National Advisory Group on Workforce Development

> 2005-2006 BOARD OF DIRECTORS

CCSA is governed by a Board of Directors reflecting the broad interests of its 15 members, six of whom are appointed by the Governor in Council with the remaining members coming from the community at large.

Chief Barry V. King, OOM

(Chair)

Chief of Police
Brockville Police Service

David Nicholson

(Vice Chair)

Consultant
Federal/Provincial Affairs

Anne M. Lavack, Ph.D.

(Treasurer)

Associate Dean, Faculty of
Business Administration &
Director of the Levene Graduate
School of Business

Beverley Clarke

(Secretary)

Chief Operating Officer
Community, Children's, Mental
Health & Addictions Services
Eastern Health

Dr. André Aubry

(Executive Committee Member)

Retired Obstetrician

Normand (Rusty) Beauchesne

Member of the National
Parole Board

Leonard Blumenthal, LL.D.

President

Lazy Beaver Holdings, Inc.

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Executive Director

Aboriginal Healing Foundation

Jean T. Fournier

Ethics Officer

The Senate of Canada

Heather Hodgson-Schleich

Consultant and Proprietor

Tales by the Brook—
children's drug prevention services

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LL.D.

Chairman

The Kaiser Foundation

Roger D. Landry, CC, OQ, CD

Retired Marketing &
Communications Executive

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Dr. Christine Loock

Pediatrician

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Centre of British Columbia

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Board of Directors of
Nav Canada

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Deputy Minister
Health Canada

Margaret Bloodworth

Deputy Minister
Public Safety & Emergency
Preparedness Canada

Michel Perron

Chief Executive Officer
Canadian Centre on
Substance Abuse

> 2005-2006 STAFF AND ASSOCIATES

EXECUTIVE OFFICE

Michel Perron
Chief Executive Officer

Linda Bordeleau
Executive Assistant

Carolyn Franklin
Senior Advisor
National Framework Secretariat

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Director

Karen Cumberland
National HEP/CECA
Policy Coordinator

Greg Graves
Coordinator

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Director

Mitra Assadollahi
Library and Information Technician

Debbie Ayotte
Web Coordinator

Manon Blouin
Acquisitions and Cataloguing
Coordinator

Chad Dubeau
Information Specialist

Karen Palmer
Information Specialist

Susan Rosidi
Database Coordinator

Lee-Anne Ufholz
*Information Specialist/
Web Technician*

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Reviser/Translator

Richard Garlick
Publisher/Editor-in-Chief

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*Senior Research Associate/
Academic Liaison*

Anne-Élyse Deguire
Senior Research Analyst

Gerald Thomas
Senior Policy Analyst

John Weekes
Senior Research Analyst

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Carol Ann Banks
Director/Chief Financial Officer

Tom Axtell
*Manager, Substance Use/
Addictions Affiliate Canadian
Health Network*

Joan Desautels
Finance/Administrative Assistant

Marguerite Grant
Administrative Officer

David O'Grady
Information Technology Manager

Anne Richer
Finance Manager

Deborah Robillard
Administrative Assistant

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Senior Research Associate

John Borody
Associate, Research and Policy

Jacques LeCavalier
Associate, Research and Policy

Pat McKenna
*Associate, Information and
Reference Services*

Alan Ogborne
*Associate, Training and Workforce
Development*

Eric Single
Associate, Research and Policy

Kendra Smith
Associate, Operations

Paula Stanghetta
Associate, Operations

Gilles Strasbourg
Associate, Operations

Franco Vaccarino
*Senior Advisor to the CEO
on Transformation and Innovation*

> AUDITORS' REPORT ON SUMMARIZED FINANCIAL STATEMENTS

To the Board of Directors of the Canadian Centre on Substance Abuse:

The accompanying summarized statement of financial position and summarized statement of revenues and expenses are derived from the complete financial statements of the Canadian Centre on Substance Abuse as at March 31, 2006 and for the year then ended on which we expressed an opinion without reservation in our report dated May 17, 2006. The fair summarization of the complete financial statements is the responsibility of the organization's management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the summarized financial statements.

In our opinion, the accompanying financial statements fairly summarize, in all material respects, the related complete financial statements in accordance with the criteria described in the Guideline referred to above.

These summarized financial statements do not contain all the disclosures required by Canadian generally accepted accounting principles. Readers are cautioned that these statements may not be appropriate for their purposes. For more information on the entity's financial position, results of operations and cash flows, reference should be made to the related complete financial statements.

Ottawa, Ontario
May 17, 2006

van Berkom & Ritz
Chartered Accountants

SUMMARIZED STATEMENT OF FINANCIAL POSITION

	March 31	
	2006	2005
ASSETS		
Current assets		
Cash and investments	\$ 1,380,404	\$ 1,611,268
Accounts receivable	1,219,259	936,811
Prepaid expenses	72,935	58,872
	<u>2,672,598</u>	<u>2,606,951</u>
Capital assets	293,770	405,189
	<u>\$ 2,966,368</u>	<u>\$ 3,012,140</u>
LIABILITIES AND NET ASSETS		
Current liabilities		
Accounts payable and accrued liabilities	365,965	564,084
Deferred contributions	503,195	626,639
Current portion of leasehold financing	11,763	10,772
	<u>880,923</u>	<u>1,201,495</u>
Leasehold financing	20,878	32,641
Net assets		
Invested in capital assets	293,770	405,189
Internally restricted for contingencies	788,903	772,415
Internally restricted for future projects	434,275	420,784
Unrestricted	547,619	179,616
	<u>2,064,567</u>	<u>1,778,004</u>
	<u>\$ 2,966,368</u>	<u>\$ 3,012,140</u>

SUMMARIZED STATEMENT OF REVENUES AND EXPENSES

	Year ended March 31	
	2006	2005
REVENUES		
Health Canada contribution agreement	\$ 3,950,000	\$ 3,400,000
External contracts	1,063,077	1,181,934
Conference	229,557	30,975
Interest and other	13,769	5,963
	5,256,403	4,618,872
EXPENSES		
Amortization	154,185	171,312
Contractors	1,386,493	1,368,490
Costshared projects	222,698	9,000
Equipment rental	55,272	22,722
Insurance	14,867	12,887
Membership fees	13,137	11,374
Office and administration	346,188	335,870
Printing	83,004	103,175
Public relations and marketing	15,997	26,504
Rent	161,446	173,597
Salaries and benefits	2,097,194	2,079,537
Travel	449,338	278,808
	4,999,819	4,593,276
Excess of revenues over expenses	\$ 256,584	\$ 25,596