

DIRECT RELIEF INTERNATIONAL | ANNUAL REPORT 2005



healthy people. better world. since 1948.

COVER PHOTO: Jodie Willard

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Acenese girl in a relief camp in Banda Aceh, Indonesia



Dr. Vinya Ariyaratne and Direct Relief VP of Programs Chris Brady at Sarvodaya in Colombo, Sri Lanka

This report is dedicated to Dr. Vinya Ariyaratne and Sarvodaya,

the dynamic Sri Lankan community organization that he leads: for extraordinary, sustained leadership in thousands of Sri Lanka's village communities, for joining altruistic ideals with productive initiatives, and for the enormous efforts undertaken in the aftermath of the Asian tsunami to help people rebuild their communities and lives.

It is a privilege to report on Direct Relief's 57th year of operations, in which our organization received more support and was able to provide more help to more people than in any previous year. This is the first report on our new fiscal year reporting period, which began on April 1, 2004, and ended on March 31, 2005.

The year was marked by the extraordinary single-event tragedy of the Asian tsunami, which killed and displaced hundreds of thousands of people, and the slow-motion and less visible human tragedies that occur every day in developing countries.

These events called upon our organization to focus more intensely than ever to help people facing tremendous challenges to meet basic health needs. Our longstanding focus on efficiency is rooted in the simple desire to help as many people as possible with whatever resources are entrusted to us. This view did not change last year, when we received significantly more contributions of cash and medical material than ever before.

Overall, Direct Relief was able to provide over 500 tons of medical material needed by health facilities in 53 countries. These aid shipments alone contained provisions to treat over 22 million people and were valued at more than \$119 million on a wholesale basis. This expansion of more than twenty-seven percent in material aid furnished, and near doubling of the number of courses of treatment furnished, was due to the continued strong partnerships with leading healthcare companies who provide extensive product contributions.

In response to the tsunami, Direct Relief received tremendous support, including \$12.8 million in tsunami-designated cash contributions from people, businesses, schools, churches, foundations, and other non-profit organizations.

Tsunami contributions allowed us to expand our core medical material assistance program and also infuse over \$3.3 million in financial resources immediately into tsunami-affected areas by March 31. These funds were used to help jumpstart local health services, rebuild essential health infrastructure, purchase mosquito nets for over 40,000 families living in malarial areas, and finance the construction of water and sanitation systems essential for hundreds of thousands of people. These tsunami interventions, as are all Direct Relief's efforts, were undertaken with and in support of local people and organizations. It was they who lost the most, will do nearly all the hard work rebuilding, and have the highest stakes in the future of their communities.

The tsunami brought into sharp focus for people worldwide something those of us privileged to work at Direct Relief witness every day: the enormous struggle people around the world face and the amazing depth of compassion and generosity that others offer to help. We recognize that our organization has a high obligation both to you who provide financial resources and the people for whose benefit the resources are given.

That is why we adopted a strict, detailed policy regarding the segregation and accounting practices for tsunami contributions, including the policy of absorbing all administrative costs associated with the tsunami response from other sources. This policy is both more detailed and more restrictive than required by law or common nonprofit practice. We have a chronic challenge of raising funds to operate, but it was unmistakably clear that the outpouring of generosity that we witnessed was for the benefit of the people affected by the tsunami.

Accepting that the money was for tsunami victims, not our organizational needs, we took extra steps to ensure that 100% of all tsunami contributions were devoted solely to tsunami relief and recovery efforts for their benefit. Our extraordinary Board of Directors and International Advisory Board, led by Nancy Schlosser and Frank Magid, respectively, once again provided the organizational support to ensure that these additional administrative expenses were fully covered and did not diminish other critical areas of need.

Helping people is our business and we are deeply grateful to the thousands of people whose support makes it possible for us to make a difference in the lives of real people who face enormous challenges.

Thank You.



A black and white image of a handwritten signature, which appears to read "Thomas Tighe". The signature is written in a cursive, flowing style.

THOMAS TIGHE
PRESIDENT & CEO

Direct Relief International completed fiscal year 2005 having risen, as it always has, to meet ever greater challenges. In addition to increasing the help received by millions of people who face tremendous difficulties each day, we redoubled our efforts to respond to the tragic tsunami that killed and displaced hundreds of thousands of people in Asia.

We are fortunate to have the continued strong leadership by CEO Thomas Tighe and the deeply dedicated staff of fewer than three dozen, all of whom distinguished themselves during the year.

The Board of Directors again displayed exceptional personal generosity and commitment to the organization, as did our International Advisory Board. Volunteers all, these Directors devoted thousands of hours of their talents to the organization and guided the strategic and financial planning of our organization in a most thoughtful way.

“...the intrinsic value of a mother giving birth safely, of a sick child’s infection being treated, or of the sense of hope that is generated when a local physician or nurse dedicated to caring for others is able to treat patients who need and deserve medical attention but are poor. Your money paid for those things of value too.”

Independent sources again ranked Direct Relief as among the most efficient charitable organizations in the United States. Through this report and our annual shareholders’ meetings, attended by hundreds of supporters and partner organizations, we want you to know the facts about how our organization uses your money and the activities and results your money and other contributions leverage. These things are important to measure and upon which to report for our own and your evaluation of Direct Relief’s performance as a corporation, albeit a nonprofit one.

But in this report we also wish to share the equally important, if harder-to-measure, elements of our organization’s activities – the intrinsic value of a mother giving birth safely, of a sick child’s infection being treated, or of the sense of hope that is generated when a local physician or nurse dedicated to caring for others is able to treat patients who need and deserve medical attention but are poor. Your money paid for those things of value too.

After 57 years, Direct Relief International continues to work as hard and efficiently as it possibly can to fulfill its humanitarian mission to help people. It has been an honor to serve as chairman of this fine organization, and I thank each of you for your continuing support.



Nancy B. Schlosser

NANCY B. SCHLOSSER
CHAIRMAN

tsunami response

through March 31, 2005

Woman wades through flood waters in the Ampara District, east coast of Sri Lanka

PHOTO: Jodie Willard





Children at Ikeun relief camp, Indonesia

Millions of lives were devastated by the massive Indian Ocean earthquake and resulting series of tsunamis that ravaged the coasts of countries in South Asia, Southeast Asia, and East Africa in December 2004.

With long experience in emergency response and a strong network of partner facilities and organizations in the affected area, Direct Relief was able to respond quickly, effectively, and on a large scale. Emergency medical shipments were airlifted within 72 hours. Within the first two weeks, 24 tons (48,000 lbs.) of material aid had been sent to hospitals, clinics, medical outreach programs, and healthcare professionals through 13 separate air freight shipments. The response was enhanced by FedEx, which provided extensive air transport and logistics assistance.

Direct Relief's quick emergency response was undertaken with the recognition that long-term recovery would be a tremendous challenge. Supporting local people, organizations, and health facilities in the region was an essential organizing principle for both our immediate efforts and ongoing assistance. The generous outpouring of tsunami contributions allowed Direct Relief to infuse much needed financial resources into local health systems and communities through cash grants, which accompanied extensive quantities of medical material.

The fiscal year covered by this report ended March 31, but intense ongoing support efforts have continued to the time of this writing and will continue. *Through March 31, 2005, Direct Relief's tsunami response efforts included*

EMERGENCY SHIPMENTS OF MEDICAL GOODS:

Number of Shipments: 34

Total weight: 93 tons (186,892 lbs.)

Total Wholesale Value: \$21,867,708

Number of people served: 2,842,574

Consistent with Direct Relief's longstanding policy, all medical material furnished in these extensive emergency shipments was requested by health professionals from 24 partner hospitals, clinic facilities, and organizations treating tsunami victims at several dozen sites:

- To treat thousands of patients who suffered near drowning, saltwater aspiration, and blunt chest trauma, Direct Relief furnished emergency medical supplies such as endotracheal tubes, airways, and suction catheters
- To treat acute traumatic injuries and related infections, initial shipments included extensive first aid, orthopedic, and surgical items – scalpels, retractors, bone saws, wound dressings, sutures, casting materials, bandages, and braces
- To address extensive cases of bacterial and fungal infections, Direct Relief furnished a wide range of antibiotic and antifungal agents
- To prevent malnutrition and micronutrient deficiencies among displaced persons, Direct Relief provided nutritional products to hospitals, clinics, and medical outreach programs
- To ensure sanitary conditions at camps, Direct Relief provided toothbrushes, soap, baby care products, and sanitary napkins

Physician at the Baicoy Medical Clinic, a temporary clinic set up in a relief camp, Banda Aceh, Indonesia

PHOTO: Jodie Willard



CASH GRANT ASSISTANCE EXPENDITURES: \$3,224,192

Number of Grants: 15

- **Indonesia: \$1,653,285**
- **Sri Lanka: \$1,461,644**
- **India: \$109,263**

A wide range of health-related needs existed in the complex emergency that followed the tsunami. Through cash grants made with tsunami contributions, Direct Relief targeted high-priority needs for basic healthcare infrastructure, emergency transport, water and sanitation, and specialized professional services. Funding was provided to:

- **Purchase 40,000 insecticide-treated mosquito nets to combat malaria and other insect-borne diseases in tsunami-affected areas**
- **Finance 19 projects providing primary clinical care and mobile medical services for tsunami-affected populations in relief camps and isolated villages**
- **Purchase 25 ambulances and mobile medical units**
- **Sponsor two psycho-social programs focused on mental healthcare training, individual and group counseling, and integrating mental health care into primary care settings in Indonesia and Sri Lanka**
- **Support the Galle Doctors' Association in Sri Lanka to rebuild homes for staff of the Karapitiya Government Teaching Hospital**

Since March 31, Direct Relief's extensive tsunami response has continued and will remain intensive for the foreseeable future. Direct Relief continues to provide requested material aid to support the ongoing medical response of our partner healthcare facilities and organizations. Thirteen additional grants (\$3,845,200) have been disbursed to fund activities including the:

- **Construction of 34 primary healthcare facilities on the isolated Andaman and Nicobar Islands of India**
- **Procurement of an additional 160,000 treated mosquito nets (for a total of 200,000)**
- **Completion of 25 community wells and 40 toilets in Nintavur, Sri Lanka, providing clean water and sanitation facilities for 115 families**
- **Procurement of a CAT Scan machine for the Ampara General Hospital, the major referral hospital for the Sri Lankan district that suffered over 10,000 casualties and among the most severe infrastructure damage**
- **Establishment of 30 rural health posts and dispensaries serving 90 villages along the southern and eastern coastline of Sri Lanka**
- **Training of mental healthcare professionals in Indonesia, Sri Lanka, and Thailand**
- **Refurbishment of 9 community clinics in India and Sri Lanka, including ones that specialize in maternal and child health services**
- **Support of vector control measures in Indonesia and Sri Lanka, including the procurement of hardware for fogging and spraying displaced persons camps in Sri Lanka**
- **Provision of 35 computers to assist local health offices in Banda Aceh, Indonesia**

Overall, Direct Relief has furnished over \$7 million in cash grants from the total of approximately \$14 million in total tsunami contributions received. Direct Relief product donations and grant funding are filling important health needs and helping to transform lives, yet it will be the remarkable faith and resiliency of the people that ultimately bring about full recovery.

I OUR PARTNERS I

Every person in every country on earth, faces health risks and challenges, injuries and disease. Natural disasters heighten these challenges, and the resulting chaos particularly affects people who are poor and the most vulnerable members of our communities. In developing countries, the challenges are even greater, the resources fewer, and every day millions of people do not receive the basic health services they need.

In 2005, Direct Relief International joined in partnership with local health leaders, healthcare projects, and medical facilities in 53 countries, including many here at home in the United States. In quantitative terms, the support provided to these partners was impressive: 1,040,151 pounds of medical material resources went out in 526 shipments with a total wholesale value of more than \$119 million. The medicines, medical supplies, nutritional supplements, and medical equipment furnished by Direct Relief served an estimated 22.1 million people, more than double from last year.

Direct Relief's response to disasters in 2005 was unprecedented. In response to a series of emergencies, including the tsunami, Direct Relief provided 45 emergency medical airlifts and container shipments throughout the year. In addition to the massive tsunami response, Direct Relief executed large-scale responses to health emergencies in the Dominican Republic, Guyana, and Haiti. In fact, emergency shipments represented 25% of the total material assistance distributed during the year.

What these numbers do not tell is the human impact of this assistance: lives were saved, children returned to school, parents returned to work, and areas of the world where health care is in short supply were made more productive.

Poor health and poverty reinforce each other. Direct Relief recognizes the complexity of achieving better health for people around the world, especially in poor countries. This is why we focus on specific actions and places where we can make a real difference for people. As a private organization, we believe that our best and most cost-effective contribution is to provide direct support to trusted, local, well-run health agencies with the tools they need to do their jobs.

By strengthening fragile health systems, better services can be provided to people who need them to learn, work, realize their inherent potential, and to enjoy the wonders that life holds.

The following pages describe where, and in what amounts, Direct Relief directed its assistance efforts in 2005. The highlighted programs are but a few of the hundreds that Direct Relief was honored to support during the year.



PHOTO: Linda Cullen

Afghani girl in Kabul waiting outside a clinic

AFGHANISTAN

Total Wholesale Value: \$5,149,163 • Total Weight: 53,387 lbs. • People Served: 472,810

Afghan Coordination of Humanitarian Assistance – Farah Province

Afghan Health and Development Services – Kabul

Residents of the Kandahar region of Afghanistan, located in the southwest of the country, contend with high rates of upper respiratory infection, intestinal worms, malnutrition, and one of the world's highest rates of maternal and infant mortality. Since 1990, Afghan Health and Development Services (AHDS) has served millions of Afghans through a network of primary health clinics comprised of 53 health centers and medical outposts throughout the Kandahar region. AHDS emphasizes maternal and child health, and through their regional training center has trained 1,108 traditional birth attendants, 151 community health workers, and 32 trained technicians to provide immunizations. In support of maternal and child health services, Direct Relief has provided AHDS with exam tables, wheelchairs, OB/GYN instruments, baby scales, baby blankets, antibiotics, multivitamins, and anti-worm medication.

Afghan Humanitarian Goals Association – Kabul

Afghan Institute for Learning – Kabul, Jalalabad, and Herat

Bamyan Province Referral Hospital – Bamyan

Jamaludin Wardak Clinic – Onkai Village

Kart-e-Seh Hospital & Maternity Center – Kabul

Macroryan Medical Clinic – Kabul

ARMENIA

Total Wholesale Value: \$1,139,450 • Total Weight: 2,442 lbs. • People Served: 207,515

Angloneurology Clinic & Research Center – Yerevan

BANGLADESH

Total Wholesale Value: \$511,840 • Total Weight: 1,018 lbs. • People Served: 43,439

Shidhulai Swanirvar Sangstha – Dhaka

Bangladesh is a low-lying delta region located in the northeast of the Indian subcontinent. Hundreds of rivers pass through the country, including some of South Asia's largest such as the Ganges, Brahmaputra, and Jamuna. The combination of snowmelt from the Himalayan Mountains, monsoon rains, and soil erosion due to deforestation typically results in annual flooding. In August 2004, Bangladesh was hit by the worst monsoon rains in years, submerging a large percentage of Dhaka, the country's capital, as well as sizeable sections of the northwest and the south for weeks. An estimated 30 million people were affected by the flooding with many lives lost, homes and infrastructure destroyed, livestock killed, and crops ruined.

Shidhulai Swanirvar Sangstha (SSS) was established in 1982 with the objective of upgrading the standard of living for socially disadvantaged communities in rural Bangladesh. The organization's project areas include the country's northern districts, which are comprised mostly of rivers and wetlands. Health services are not available to the villagers in this remote area, and they suffer from extremely high rates of malnutrition and water-born diseases. SSS regularly uses boats to reach these isolated populations with healthcare and health education services. As such, they were particularly well suited to respond to the flooding. Direct Relief provided an emergency airfreight donation to SSS consisting of antibiotics, antiseptics, antiparasitics, ophthalmic drops, dermatological agents, and an assortment of first aid supplies.

BOLIVIA

Total Wholesale Value: \$909,497 • Total Weight: 8,302 lbs. • People Served: 270,780

Organizacion Panamericana de Salud – La Paz

Proyecto de Salud del Rio Beni – Rurrenabaque

Nurse and daughter from the Direct Relief-supported Rio Beni Health Project, Rurrenabaque, Bolivia

PHOTO: Sherry Villanueva





PHOTO: Jodie Willard

Cambodian boy

CAMBODIA

Total Wholesale Value: \$923,293 • Total Weight: 35,367 lbs. • People Served: 159,202

Angkor Hospital for Children – Siem Reap

Mongkul Borei Hospital – Mongkul Borei

Located in northern Cambodia, Mongkul Borei Hospital provides primary care services to approximately 630,000 residents of a vast area extending from the border of the Battengang province in the north to the border of Thailand, two hours away. The majority of the region's inhabitants are subsistence farmers who make their living growing rice and raising cattle and other livestock.

Common health problems treated at Mongkul Borei Hospital include injuries from landmines, dengue fever, tuberculosis, HIV/AIDS, and upper respiratory infections. The hospital facility consists of a small surgical ward, inpatient and outpatient departments, a TB ward, and a pharmacy. The hospital's 25-bed maternity ward is staffed by nine trained midwives, a nurse-midwife, and two surgeons. The staff treats ovarian cysts, tumors, and ectopic pregnancies. Direct Relief's assistance to the hospital included the donation of a gurney, wheelchairs, walkers, crutches, disposable surgical supplies, prenatal vitamins, antibiotics, and emergency obstetrics supplies such as OB/GYN surgical instruments, airway tubing, sponges, gowns, masks, and a suction unit.

Sihanouk Hospital Center – Phnom Penh

Credibility: Direct Relief International has been distinguished as a 4-star charity by Charity Navigator. Charity Navigator is a top independent evaluator of nonprofits' financial health and performance, and currently reports on more than 3,500 U.S. based charities. The 4-star rating is the highest possible rating.



Nursing Students at the Direct Relief-supported Quality Healthcare Unit clinic in Yaounde

CAMEROON

Total Wholesale Value: \$1,383,640 • Total Weight: 14,474 lbs. • People Served: 206,054

Holy Trinity Foundation Hospital – Buca

Mamfe General Hospital – Mamfe

Quality Healthcare Unit – Yaounde

In Cameroon, the infant and under-five mortality rates are on the rise and maternal mortality continues to take the lives of women throughout the country each year. The United Nations Development Programme reports that there are only seven physicians per 100,000 people in Cameroon and 166 out of 1,000 infants and children die before their fifth birthday.

The Quality Healthcare Unit (QHU) is an 18-bed nonprofit maternal and child health clinic serving 13 rural communities in central Cameroon. The QHU is operated by one pediatrician, two general physicians, four midwives, and six nurses, and provides services to over 9,000 people each year. QHU emphasizes health maintenance and disease prevention, serving mostly mothers and their children. Some of the services include child wellness exams, prenatal care, and delivery services. In addition, QHU extends its services into rural communities by conducting outreach vaccination, prenatal care, and child wellness programs. Direct Relief donated specifically requested maternal and child health products such as prenatal vitamins, antibiotics, suture material, and OB/GYN delivery instruments, as well as lab supplies to upgrade their screening and diagnosis capabilities.

CHINA

Total Wholesale Value: \$17,098 • Total Weight: 61 lbs. • People Served: 804

Love Without Borders – Shanton

Shangye Charity Hospital – Ganzi County

DEMOCRATIC REPUBLIC OF CONGO

Total Wholesale Value: \$1,654,285 • Total Weight: 6,685 lbs. • People Served: 82,572

Diocese de Kilwa-Kasenga – Lumbumbashi

The Diocese of Kilwa-Kasenga is located in Katanga Province, in the southeastern corner of the country close to the border with Zambia. Since August 1998, the country has been dealing with the effects of fighting between the Congolese Government and Ugandan and Rwandan backed Congolese rebels in the northern and eastern parts of the country. The deaths of 3.5 million Congolese, mostly through starvation and disease, have been attributed to the fighting which has also resulted in an estimated 2.3 million people being displaced, and over 300,000 refugees fleeing to surrounding countries. The diocese, through the Bureau Diocesain Oeuvres Medicales (BDOM), oversees four hospitals which treat tens of thousands of people each year, many of whom are displaced as a result of the war.

The main health problems of the communities served by the BDOM include malaria, sexually transmitted diseases, schistosomiasis, tuberculosis, acute respiratory infections, and diarrhea. Life expectancy at birth is 49 years and 205 out of 1,000 children die before their fifth birthday. The HIV/AIDS adult infection rate is 4.2 percent. Direct Relief's shipment to the BDOM consisted of essential pharmaceuticals, laboratory and other medical and surgical supplies, an electrical surgical unit, and basic diagnostic equipment such as stethoscopes and blood pressure kits.

Project de Lutte Contre Les Handicaps Visuels – Boma

DOMINICAN REPUBLIC

Total Wholesale Value: \$1,649,429 • Total Weight: 25,090 lbs. • People Served: 400,124

Batey Relief Alliance / SESPAS – Santo Domingo

Global Links Project in the Dominican Republic – Santo Domingo

Health Care Education Partnership – Santo Domingo

Movimiento Socio Cultural Para Los Trabajadores – Santo Domingo

Patronato Benefico Oriental, Inc. – La Romana

Rwanda girl on the Congo/Rwandan border working the fields for food for her family



EL SALVADOR

Total Wholesale Value: \$4,838,596 • Total Weight: 43,270 lbs. • People Served: 3,717,627

Clinica Maria Madre de los Pobres – San Salvador

In the village of La Mora, located north of the capital city of San Salvador, the Committee for the Reconstruction of Communities (CRC) offers primary health care and health education to some of El Salvador's poorest people via a small rural clinic that utilizes a network of 20 trained, local volunteer health promoters. Inhabited mostly by subsistence farmers, the area around La Mora is separated from the capital by poor roads and unreliable public transportation. The closest government hospital is 50 miles away, but it is chronically understaffed and poorly supplied by the Ministry of Health. Essentially, in the rural areas, the delivery of health care is left to local non-government organizations, like the CRC. The CRC is also involved in water and sanitation projects, family planning counseling, pre- and post-natal care, nutrition education, and mental health services. Direct Relief provided antibiotics, patient examination equipment, first aid and minor surgical supplies, nutritional supplements, and personal care products to the CRC clinic. These products have helped to fill the gap in the provision of rural healthcare service in El Salvador.

Comite de Reconstruccion y Desarrollo Economico – Suchitoto

Fundacion Salvadoreana / (FUSAL) – San Salvador

Secretaria Nacional de la Familia / (FUDEM) – San Salvador

ESTONIA

Total Wholesale Value: \$186,770 • Total Weight: 13,035 lbs. • People Served: 247,808

Nursing Home Consortium – Parnu

ETHIOPIA

Total Wholesale Value: \$1,330,166 • Total Weight: 27,285 lbs. • People Served: 468,538

Addis Ababa Fistula Hospital – Addis Ababa

Al Shaday Children's Village – Mekelle

Free Methodist World Mission Health Center – Addis Ababa

Young boy from village outside San Salvador which was severely damaged by civil war, and is now known as center of art and craft, El Salvador



Efficiency: Direct Relief was cited by Forbes Magazine as a U.S charity with 100% efficiency and charitable commitment and by Consumers Digest as one of only five of the leading U.S. charitable organizations evaluated to receive 99% or better efficiency ranking. Worth Magazine named Direct Relief among “America’s Best 100 Charities”. The Chronicle of Philanthropy ranked Direct Relief as one of the top 400 charities for the fifth year in a row as well as recognizing it as the largest international assistance organization in California.

FIJI

Total Wholesale Value: \$33,983 • Total Weight: 983 lbs. • People Served: 10,394

Loloma Foundation – Bega Island

GHANA

Total Wholesale Value: \$421,502 • Total Weight: 9,897 lbs. • People Served: 135,888

Jehovah Rapha Health Care Foundation Motoka Clinic – Motoka

Korle-Bu Teaching Hospital – Accra

Maranatha Maternity & Clinic – Kumasi

GUATEMALA

Total Wholesale Value: \$11,278,631 • Total Weight: 58,111 lbs. • People Served: 769,825

A Tomorrow for Children Foundation – Guatemala City

Amigos de Santa Cruz Health Clinic – Guatemala City

Caritas Arquidio Cesana – Guatemala City

Fundacion Ayudame a Vivir – Guatemala City

Liberty University – Guatemala City

Order Of Malta – Guatemala City

Santa Rosa Medical Clinic – Guatemala City

Unidas Para Vivir Mejor (UPAVIM) – Guatemala City

Xela Aid – Quetzaltenango

GUYANA

Total Wholesale Value: \$3,481,786 • Total Weight: 14,603 lbs. • People Served: 157,646

Bartica Hospital – Bartica

Berbice River Healthcare Project – Georgetown

Davis Memorial Hospital – Georgetown

Linden Hospital – Linden

New Amsterdam Hospital – New Amsterdam

Port Maurant Hospital – Port Maurant

St. Joseph’s Mercy Hospital – Georgetown

Suddie Hospital – Suddie

Guyana is a sparsely populated country with just over 750,000 people situated on the northeastern coast of South America. It is one of the poorest countries in the Western Hemisphere, and has been particularly hard-hit by “brain drain.” For decades, thousands of Guyanese doctors and nurses have left the country for better pay and improved working conditions abroad. The majority of Guyana’s healthcare facilities are located along the more populated coastal areas, leaving inland communities with scarce access to health services.

The Suddie Hospital is a 98-bed hospital that provides services free of charge to more than 3,480 inpatients and 18,000 outpatients each year, as well as providing outreach and referral services to smaller communities along the Essequibo River. Major health problems in this area include acute respiratory infection, diarrheal diseases, hypertension, skin infections, and cardiovascular disease. Direct Relief’s ongoing support of the hospital includes the provision of IV sets, oral rehydration salts, antibiotics, analgesics, exam gloves, and prenatal vitamins.



Haitian girl at the Jimani refugee camp on the Haiti-Dominican Republic border

HAITI

Total Wholesale Value: \$5,951,325 • Total Weight: 51,346 lbs. • People Served: 368,161

Direct Relief International is honored to note that emergency assistance to Haiti and other Caribbean countries in the aftermath of the devastating hurricane season of 2004 was made possible by a generous grant from Johnson & Johnson.

Arcachon Hospital – Port-Au-Prince

Asile Communal – Cap-Haitien

Christian Aid Ministries – Titanyen

Mouvman Peyizan Papay – Papay

Haiti is considered the poorest country in the Western Hemisphere by the United Nations Development Program, and the 2004 string of hurricanes further impacted the already compromised health status of the Haitian population. Mouvman Peyizan Papay (MPP), is a 31-year old peasant organization comprised of over 60,000 farm workers throughout Haiti, who have banded together in order to improve technical support in areas such as agronomy, clean water, housing and sanitation, nutrition, and health. The MPP also provides vocational training and oversees a number of peasant-run micro-business enterprises. Their clinic in the village of Papay recently opened, offering primary medical care to its 350 residents and providing hundreds more in nearby villages with much-needed health education and services. The clinic also operates a midwife training program and plans to implement a health promoter program. To assist the MPP in its effort to improve health care for Haiti's impoverished rural population, Direct Relief donated laboratory and patient examination equipment, antibiotics, analgesics, first-aid materials, educational posters, and other clinic supplies.

New Hope Ministries – Cap Haitien

Project Haiti – Cap-Haitien

HONDURAS

Total Wholesale Value: \$460,227 • Total Weight: 12,088 lbs. • People Served: 225,520

Dr. Polo Galindo Clinic – Punta Gorda

Escuela Agricola Panamericana Zamorana – Tegucigalpa

Hacienda Cristo Salva – Las Varas

International Aid – Tegucigalpa

Proyecto Aldea Global – Tegucigalpa

INDIA

Total Wholesale Value: \$9,631,317 • Total Weight: 57,016 lbs. • People Served: 1,063,434

Amrita Institute of Medical Sciences and Research Centre (AIMS) – Cochin

The Amrita Institute of Medical Sciences & Research Centre (AIMS), located in Cochin, Kerala State, is a multi-specialty, charitable non-profit medical center that provides healthcare services to thousands of low-income and indigent patients. The facility was established in 1998, and in its six years of operation, has treated over 57,000 inpatients and more than 590,000 outpatients. In addition to its onsite activities, AIMS is acclaimed for providing free or low-cost community-based health programs, medical and eye outreach camps, health awareness campaigns, and other medical services to people living throughout the city of Cochin and those residing in remote areas of the state.

In the aftermath of the tsunami, AIMS deployed teams of medical personnel and a number of ambulances, serving as mobile surgical units, to the hardest hit coastal areas in Kerala and Tamil Nadu. A 24-hour medical center was set up on Vypeen Island to provide care to hundreds of villagers, with the most serious trauma cases transferred to the hospital. Relief efforts have continued around-the-clock, with AIMS taking full responsibility for the medical needs of over 50,000 affected individuals. Direct Relief's emergency shipment to AIMS consisted of anti-infective agents, antibiotic and antifungal creams, analgesics, nutritional bars and supplements, oral rehydration salts, first aid supplies, and surgical equipment.

Good Samaritan Social Service Society – Dindigal

Hindu Mission Hospital – Chennai

Hyderabad Eye Institute – Hyderabad

Meenakshi Mission Hospital – Madurai

Pasam Trust – Kodaikanal

Ramakrishna Math – Chennai

Mother and daughter, after receiving care, at a Direct Relief-supported medical camp, Tamil Nadu, India

PHOTO: Jay Farbman



Rural Institute of Development Education – Little Kanchipuram
Sankara Arogya Medical Center – Nagapattinam
Society for Service to Voluntary Agencies (SOSVA) – Mumbai

INDONESIA

Total Wholesale Value: \$8,032,400 • Total Weight: 94,735 lbs. • People Served: 1,292,339

Children's Project – Medan
Hobawawi Medical Clinic – Desa Rua
International Medical Corps – Jakarta
International Organization for Migration – Jakarta
International Relief & Development – Jakarta
Relief Camps – Nias Island
Surf Aid International – Padang
Tsunami Disaster Task Force – Medan
Yayasan Bumi Setat Birthing Center – Bali
Yayasan Kasih Peduli Masyarakat Indonesia – Medan

IRAQ

Total Wholesale Value: \$4,676,685 • Total Weight: 22,145 lbs. • People Served: 613,621

Freedom and Peace Trust / Iraq MH – Baghdad, Basra, and Nazirieh

JAMAICA

Total Wholesale Value: \$15,510,794 • Total Weight: 71,104 lbs. • People Served: 1,296,652

Food for the Poor – Spanish Town (Kingston)
Jamaica Humanitarian Dental Mission – St. James
Jamaica Partners – Ocho Rios
Missionaries of the Poor – Kingston

KENYA

Total Wholesale Value: \$532,585 • Total Weight: 11,366 lbs. • People Served: 185,595

Alice Nursing Home – Nairobi
Crescent Medical Aid – Nairobi
Kapkoi Mission Health Center – Eldoret
Waso Medical Services – Isiolo

LAOS

Total Wholesale Value: \$129,314 • Total Weight: 5,194 lbs. • People Served: 584,094

GTZ – Vientiane
Mahosot Hospital – Vientiane
Muang Sing Hospital – Muang Sing
Village Veterinary Worker Project – Muang Sing

LIBERIA

Total Wholesale Value: \$985,280 • Total Weight: 5,186 lbs. • People Served: 63,154

Christian Aid Ministries – Monrovia
Clay Ashland - Community Health Care Center – Vomjima
ELWA Hospital – Monrovia

MALAWI

Total Wholesale Value: \$389,456 • Total Weight: 12,846 lbs. • People Served: 166,304

Montfort Hospital – Nchalo
Queen Elizabeth Central Hospital – Blantyre
Trinity Hospital – Limbe

MEXICO

Total Wholesale Value: \$494,133 • Total Weight: 6,616 lbs. • People Served: 642,990

AeroMedicos of Santa Barbara – Cadeje

Baja Animal Sanctuary – Baja

Casa Clinica Convivencia Campesina – Las Veras

Centro de Salud Rural Bucerias – Bucerias

Centro de Salud Todos Santos – Todos Santos

Ciudad Obregon – Ciudad Obregon

Dispensario de Ayuda Social, A. C. – Atizapan

Hendido del Club Rotario – Las Floras

Juarez Eye Center – Cuida Juarez

Mexican Medical – Tijuana

Potter's Clay – Ensenada

NEPAL

Total Wholesale Value: \$5,763 • Total Weight: 62 lbs. • People Served: 356

Maiti Nepal – Kathmandu

Tibetan Refugee Reception Center – Kathmandu

Each year an estimated 2,500-3,000 Tibetans, most of whom are fleeing human rights abuses, religious persecution, or political repression, travel by foot over the Himalayan Mountains in an effort to reach India. The long and arduous journey to the Nepalese border, the most direct and commonly used route, can take from one to four months depending on weather and point of departure. They must travel through numerous mountain passes, often in waist-deep snow, where shelter, food, and water are scarce. Frostbite, snow blindness, injury, and malnutrition are common and many children and adults die during this perilous trip.

In the early 1990's the Tibetan Government-in-Exile, in consultation with the United Nations High Commissioner for Refugees, built the Tibetan Refugee Reception Center on the outskirts of Kathmandu. The facility was designed to assist new arrivals with shelter, food, and medical and psychosocial services. Direct Relief provided a shipment of primary healthcare medicines, first aid and clinic medical supplies, and diagnostic equipment to the 30-bed medical clinic at the Center. The health providers were particularly appreciative of the antibiotics used to treat acute respiratory infections, and the ophthalmic anti-infectives needed to heal corneal burns caused by snow blindness. The products included in the donation helped stock the clinic with medications and disposable supplies for approximately six months, and provided essential tools needed to screen residents for serious health problems.

A nurse administers an oral vaccine at Direct Relief-supported Tibetan Refugee Reception Center in Kathmandu, Nepal.



PHOTO: Kitty Leaken



PHOTO: Alison Jones

Mother and child at new permanent housing for homeless victims of Hurricane Mitch, Nicaragua

NICARAGUA

Total Wholesale Value: \$6,831,978 • Total Weight: 44,024 lbs. • People Served: 1,004,209

A Tomorrow for Children Foundation – Managua

American Nicaraguan Foundation/MINSA – Managua

Caritas de Nicaragua – Managua

According to the U.S. Agency for International Development (USAID), less than 50 percent of Nicaragua's population has access to essential medications, and only 67 percent of births are attended by skilled medical providers. The Consuelo Buitrago Women's Association (AMUCOBU) is located in one of the poorest and most dangerous settlements in Nicaragua. With a population of 4,900 residents, over half are under the age of 15. Due to the country's protracted and violent civil war, gang violence, a high unemployment rate, drug abuse, AIDS, and family violence are commonplace. The AMUCOBU clinic is the only medical facility located within this settlement. In addition to providing primary health care, it also offers health education, psychological services, and vocational training. Direct Relief has supported the clinic with antibiotics, analgesics, antiparasitic agents, multivitamins, first aid supplies, minor surgical and OB instruments, pulmonary nebulizers, sterilizers, and educational posters.

Health Volunteers Overseas – Managua

Nicaraguan Children's Fund – Puerto Cabezas

Wisconsin/Nicaragua Partners of the Americas – Managua

NIGERIA

Total Wholesale Value: \$22,575 • Total Weight: 109 lbs. • People Served: 852

St. Gerard's Catholic Hospital – Kaduna

NORTH KOREA

Total Wholesale Value: \$341,889 • Total Weight: 2,064 lbs. • People Served: 12,340

Doora Children's Home – Rason City

PAKISTAN

Total Wholesale Value: \$171,362 • Total Weight: 6,561 lbs. • People Served: 84,554

Bethania Hospital – Sialkot

PERU

Total Wholesale Value: \$5,648,388 • Total Weight: 81,951 lbs. • People Served: 1,286,376

Arzobispado de Lima – Lima

The Amigos del Peru Foundation in Miami, Florida, has constructed a medical clinic within the squatter settlement of Manchay, located just south of Peru's sprawling capital city of Lima. Located on a barren plain with no running water, no sewage system, no paved roads, and only sporadic electric power, Manchay was first populated by native mountain populations displaced by guerrilla warfare 20 years ago. Direct Relief's previous donation of exam tables and lights, scales, sterilizers, first aid and minor surgical supplies, antibiotics, and other healthcare materials allowed the Manchay Clinic to open its doors in February 2003.

Direct Relief has continued its support of the clinic with primary care medicines, additional first aid supplies, and personal care items that provide the ongoing material support desperately needed to assure the uninterrupted operation of the facility. The Catholic Archdiocese in Lima provides the professional staff and administrative support for this project. Additional clinics are in the process of being built, and the successful continuation of this healthcare project is an example of what can be accomplished through effective relationships between U.S.-based and in-country partners.

Carcel San Juan de Lurigancho – Lima

Hospital Cayetano Heredia – Piura

Hospital Regional de Ayacucho – Ayacucho

International Society for the Preservation of the Tropical Rainforest (SPTR) – Iquitos

Ministerio de Salud – Puguio

PHILIPPINES

Total Wholesale Value: \$62,306 • Total Weight: 719 lbs. • People Served: 6,376

Dr. Jose Locsin Memorial Hospital – Silay city

Reyes-Villanueva Medical Relief – Baggaio

Peruvian girl

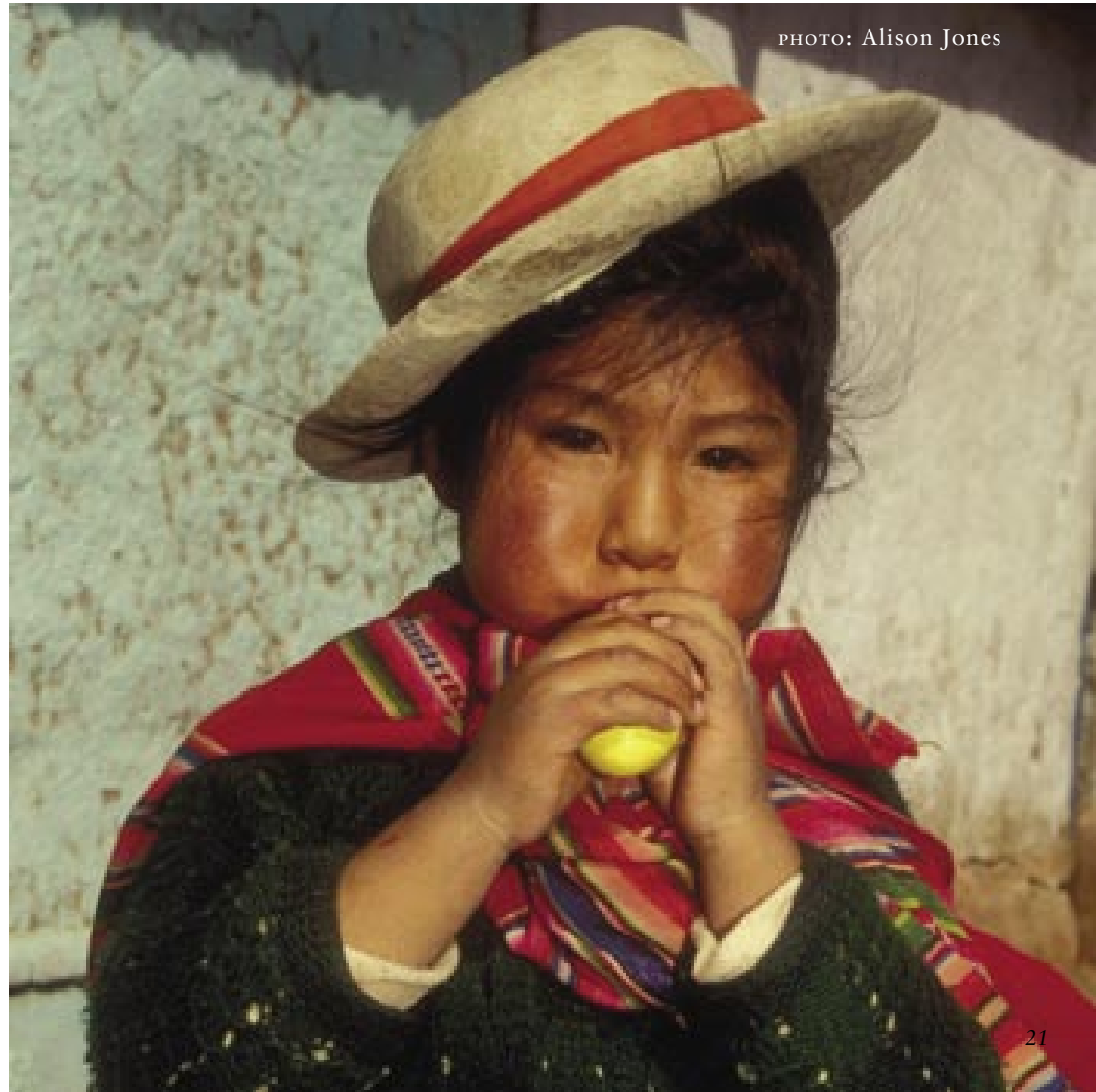


PHOTO: Alison Jones



Children in a refugee camp, Sierra Leone

ROMANIA

Total Wholesale Value: \$1,316,755 • Total Weight: 5,908 lbs. • People Served: 73,584

Christian Aid Ministries Romania – Floresti

SENEGAL

Total Wholesale Value: \$308,179 • Total Weight: 30,026 lbs. • People Served: 183,321

Clinique Seydina Issa Rouhou Laye – Dakar

USAID Senegal - Partner Health Centers – Ngor Diarama

SIERRA LEONE

Total Wholesale Value: \$1,611,548 • Total Weight: 32,652 lbs. • People Served: 352,708

Health Development Project, Sierra Leone – Freetown

Ndegbomei Development Association – Freetown

Medical facilities throughout Sierra Leone suffer from a severe shortage of medical goods, especially essential medications needed to treat a variety of potentially life-threatening infections. Sierra Leone has been one of the most unstable and violent countries in West Africa, but with the signing of the Lome Peace Accord in July 1999, coupled with successful elections, people's confidence has increased and spurred hope for positive and lasting change. Residents still face many hardships including the lack of electricity, clean water, and social and medical services.

The humanitarian community has finally gained access to much of rural Sierra Leone and local NGO's are working hard to provide for the basic needs of their countrymen and women. John Ganda, the founder and director of Ndegbomei Development Organization (NDO), serving Sierra Leoneans throughout the years of hardship and violence and is one of Direct Relief's long term partners. Direct Relief provides continuing support for NDO's maternal/child health and orphaned and street children's programs, as well as for their medical clinic and hospital support activities. With the extreme shortage of pharmaceuticals in the country, donations from Direct Relief are seen as an important adjunct to government services as well as providing health professionals in the private sector with the products they need to serve the thousands of sick and disabled people throughout the country. Direct Relief provided NDO with a large assortment of essential medications, including antibiotics to fight AIDS-related opportunistic infections, as well as general hospital and clinic supplies and equipment items.

SOMALIA

Total Wholesale Value: \$544,174 • Total Weight: 10,700 lbs. • People Served: 102,276

Hargeisa Hospital – Hargeisa

SOUTH AFRICA

Total Wholesale Value: \$23,643 • Total Weight: 116 lbs. • People Served: 3,176

Tshsimane Healing Center – Soutpansberg

Tshsimane Healing Center was established by Dr. David Cumes, a physician who was born in South Africa and received his medical training in Johannesburg. Currently in private practice in Santa Barbara, California, Dr. Cumes specializes in urology. The healing center at Tshsimane is a holistic health facility intended to bridge the gap between indigenous and Western medicine. The center offers allopathic outpatient medical services as well as a place to study medicinal plants and techniques of the indigenous healers. Eventually, a library will be established to study, document, and evaluate ancient healing remedies and knowledge systems. The center is located in an area of 70 percent unemployment and walking is the primary means of transportation to the clinic. Direct Relief provides continued assistance to the center by donating medical products including a microscope, antifungals, antibiotics, analgesics, and essential medical supplies. These products help stock the outpatient clinic that provides primary and family health care to the rural communities in the mountains of South Africa.

SOUTH KOREA

Total Wholesale Value: \$16,721 • Total Weight: 3,153 lbs. • People Served: 13,079

St. John of God Clinic – Kwang-Ju

SRI LANKA

Total Wholesale Value: \$4,227,353 • Total Weight: 32,471 lbs. • People Served: 854,522

Church on The Way – Eastern Province

International Medical Corps-Sri Lanka – Colombo

Children of the local healer who works closely with Dr. David Cumes
at Tshsimane Healing Center, combining indigenous and western medicine, Soutpansberg, South Africa



PHOTO: Sonja Utt



Sri Lankan children

Sarvodaya HQ – Moratuwa

Founded in 1958 by a small group of medical providers and community members, Sarvodaya Shramadana Sangamaya is one of the oldest and largest Sri Lankan-run NGOs in the country. Today, the organization is run by Dr. Vinya Ariyaratne, a medical doctor with an MPH from Johns Hopkins University. During normal operation, Sarvodaya has over 1,000 employees in addition to numerous volunteers working in all nine provinces of Sri Lanka. The organization aims to cover gaps in Ministry of Health services such as reproductive health, nutrition, domestic violence, and preventive health.

Following the tsunami that devastated Sri Lanka on December 26, 2004, Sarvodaya was asked to operate 90 of 850 camps for internally displaced people. The organization's tsunami relief activities were far reaching and have included the construction of permanent housing, establishment of clinics and dispensaries, water and sanitation projects, psychosocial services, and community empowerment initiatives. In response to the immediate healthcare needs of the internally displaced population, Direct Relief sent an emergency airfreight shipment of basic first aid supplies, cough and cold medicine, oral rehydration salts, and sanitary napkins for use in Sarvodaya-run camps. Direct Relief has continued to work with Sarvodaya in support of their tsunami relief activities and anticipate the relationship will continue through long-term recovery efforts.

Sri Lanka Diabetes Program – Trincomalee

Sri Lankan Ministry of Healthcare – Colombo

VeAhavta – Colombo

SUDAN

Total Wholesale Value: \$138,800 • Total Weight: 3,895 lbs. • People Served: 39,886

Sagadi West Rural Hospital – Sagadi

SYRIAN ARAB REPUBLIC

Total Wholesale Value: \$2,525 • Total Weight: 1 lb. • People Served: 200

Damascus Public Hospital – Damascus

TANZANIA

Total Wholesale Value: \$1,492,029 • Total Weight: 24,992 lbs. • People Served: 323,285

Dr. Atman Hospital – Sumbawanga

KADERES – Karagwe, Kagera

Kagera Salient Dispensary – Kyaka, Kagera

Mpanda District Hospital – Mpanda

Namanyere Hospital – Namanyere

Tarime Goodwill Foundation – Tarime

THAILAND

Total Wholesale Value: \$15,959 • Total Weight: 312 lbs. • People Served: 2,441

Hill Tribe Clinics – Chiang Rai

UGANDA

Total Wholesale Value: \$50,049 • Total Weight: 501 lbs. • People Served: 18,532

East Africa Medical Mission – Kampala

UKRAINE

Total Wholesale Value: \$112,409 • Total Weight: 4,162 lbs. • People Served: 103,973

Rohatyn Central District Hospital – Rohatyn

USA

Total Wholesale Value: \$8,171,872 • Total Weight: 67,524 lbs. • People Served: 3,301,249

The five million people in California who lack health insurance account for approximately 11 percent of the estimated 45 million medically uninsured persons in the United States.

California's network of nonprofit free and community clinics are a critical source of health services for uninsured persons. Over the past two years, Direct Relief has created a mechanism to supply these clinics with pharmaceutical products and supplies they need to care for uninsured patients.

In 2005, Direct Relief provided more than \$7.7 million wholesale of pharmaceuticals and supplies to 63 community and free clinics in California through more than 153 shipments.

Consistent with longstanding practice, Direct Relief provides only material that is specifically requested by clinics, which are first screened to ensure appropriate licensing, reporting capacity, nonprofit status, and nondiscriminatory policies.

In our home community in California, the greatest unaddressed health problem among children is poor oral health. Direct Relief has worked for over 12 years to help meet the need. In 2005, Direct Relief provided over 23,000 children and parents/caregivers with oral hygiene kits, and over 100 children with critically needed dental treatment.

Direct Relief in partnership with local homeless shelters and other service organizations, provides a variety of personal care items to homeless and low-income families, individuals, and seniors. In 2005, the Personal Care Pack Program served over 14,000 individuals.

Among other initiatives in our local community, Direct Relief provided free tuberculosis (TB) tests for high-risk immigrant field workers.

AltaMed Health Services – Los Angeles

American Indian Healing Center – Whittier

American Red Cross – Santa Barbara

Asian Health Services, Inc. – Oakland

Asian Pacific Health Care Venture, Inc. – Los Angeles

Asian Pacific Health Care Venture (APHCV) was founded in 1986 by health and human service providers concerned about the lack of bilingual and bicultural primary healthcare services for the growing Asian Pacific Islander (API) communities in Los Angeles. APHCV is community health center whose mission is to provide and coordinate accessible, affordable, culturally competent, and effective healthcare services that target underserved Asians and Pacific Islanders.

Over the last two years Direct Relief has assisted the five million uninsured Californians by supplying California's network of nonprofit free and community clinics with pharmaceutical products and supplies they need to care for the uninsured. In 2005, Direct Relief provided more than \$7.7 million wholesale of pharmaceuticals and supplies to 63 community and free clinics in California through more than 153 shipments.

Trusted Worldwide: Direct Relief's network of trusted partners built over 57 years includes leading pharmaceutical and healthcare companies, thousands of locally administered health clinics and programs worldwide and tens of thousands of individual donors.

Services provided at the center include pediatric, prenatal, women's health, senior health, HIV/AIDS, and general healthcare services. APHCV also has a wide range of health education and outreach services targeting all age groups. Through these programs, APHCV has forged working relationships with community leaders, local businesses, churches, temples, schools, media, and other community-based organizations within the various API communities.

Direct Relief supported APHCV by providing broad spectrum antibiotics used to treat an assortment of infections, thyroid medications for pediatric and geriatric patients, gastrointestinal and ophthalmic agents, and tuberculin used for TB skin testing in a comprehensive county-wide tuberculosis program.

Bell Gardens Family Medical Center – Bell Gardens

Camino Health Center – San Juan Capistrano

Carrillo Family Dental Clinic – Santa Barbara

Central City Community Clinic – Los Angeles

Chinatown Service Center Family Health – Los Angeles

Cleaver Family Wellness Clinic – El Monte

Clinica de Tolosa – Paso Robles

Clinica Msr. Oscar A. Romero – Los Angeles

Clinica Sierra Vista – Lamont

Community Care Health Centers – Huntington Beach

Community Health Alliance of Pasadena – Pasadena

Community Health Centers of the Central Coast – Nipomo

Comprehensive Health Centers – San Diego

Darin M. Camarena Health Centers, Inc. – Madera

Eisner Pediatric & Family Medical Center – Los Angeles

Family Health Care Network – Visalia

Globus / Dream Weaver Medical – Salt Lake City

Haight Ashbury Free Medical Clinic – San Francisco

Since the 1960s, Haight Ashbury Free Clinic (HAFC) has been an essential provider of quality medical care to the underserved in San Francisco. Today, the facility receives more than 65,000 patient visits annually, providing free, high-quality, and comprehensive health care that is culturally sensitive, and accessible to all in need. The majority of the patients treated earned an income significantly below the Federal Poverty Level. HAFC also operates numerous outreach programs including substance abuse treatment, jail psychiatric services, community education classes, homelessness prevention and treatment, and a free transportation program. The substance abuse treatment program has been a model for the country, setting a national standard of 50 percent success ratings through an effective and compassionate approach to drug and alcohol addiction issues.

Direct Relief's support to the HAFC included the provision of pharmaceutical products such as anti-ulcer medication and a variety of anti-infective agents used to address respiratory, skin, and urinary tract infections.

Harbor Free Clinic – San Pedro

Health Linkages Program – Santa Barbara

Health Volunteers Overseas – Washington

Healthy Smiles Program – Santa Barbara

Imperial Beach Health Center – Imperial Beach

Indian Health Council, Inc. – Valley Center

Inland Behavioral Health and Services – San Bernardino

Jain Medical Awareness Center – Buena Park

JWCH Institute, Inc., Medical Clinic at Weingart – Los Angeles
KHEIR – Los Angeles
La Amistad de Jose Family Health Center – Orange
La Maestra Family Clinic, Inc. – San Diego
Laguna Beach Community Clinic – Laguna Beach
Los Angeles County Fire Department – Santa Clarita
Los Angeles Free Clinic – Los Angeles
Los Angeles Mission Community Clinic – Los Angeles
Mendocino Coast Clinics – Fort Bragg
Mendocino Community Health Clinics, Inc. – Ukiah
Mission City Community Network, Inc. – North Hills
Mobile Medical Office – Eureka
Neighborhood Healthcare – La Mesa
New Life Mobile Medical Clinic – Tustin
Nhan Hoa Comprehensive Health Care Clinic – Garden Grove
North County Health Services – San Marcos
Northeast Valley Health Corporation – San Fernando
Operation Samahan Community Medical Center – San Diego
Ravenswood Family Health Center – East Palo Alto
San Diego American Indian Health Center – San Diego
San Ysidro Comm. Health Center – San Ysidro

Santa Barbara Foodbank – Santa Barbara

Santa Barbara Neighborhood Clinics – Santa Barbara

Santa Barbara Neighborhood Clinics (SBNC) offer low cost medical care to people of all economic means. With three sites, including a dental clinic, SBNC sees approximately 15,000 low-income and indigent patients a year. Services offered include a full spectrum of care – internal medicine, pediatrics, family planning, gynecology, and immunizations. SBNC also provides free HIV and Hepatitis C testing and outreach programs in prenatal care, smoking cessation, and obesity prevention. All patients receive care regardless of their ability to pay.

Direct Relief supported SBNC by providing an assortment of pharmaceuticals, nutritional supplements, first aid supplies, and over 1,400 dental and surgical instruments for distribution to all three sites. By receiving donated medical goods, each clinic is able to provide free medications to patients and invest additional resources into the provision of health services or the conducting of preventive health and health education activities.



Left: Patients of Santa Barbara Neighborhood Clinic's Eastside Family Dental Clinic take time out from being educated in the Dental Education Center for a big smile.

PHOTO: Chip Latshaw/Courtney Waldo, Brooks Institute of Photography

Accountability: Direct Relief International meets the Better Business Bureau (BBB) Wise Giving Alliance’s “Standards for Charity Accountability.” The Alliance reports on national charities and determines if they meet voluntary standards on matters such as charity finances, appeals, and governance. See www.give.org.

- Share Our Selves Free Medical Clinic – Costa Mesa**
- Sierra Health Center – Fullerton**
- South Central Family Health Center – Los Angeles**
- Southern Indian Health Council, Inc. – Alpine**
- St. Anthony Free Medical Clinic – San Francisco**
- St. John’s Well Child and Family Center – Los Angeles**
- Summer & Holiday Packs – Santa Barbara**
- T.H.E. Clinic, Inc. – Los Angeles**
- Taft Community Medical & Dental Center – Taft**
- Tarzana Treatment Centers – Tarzana**
- The Children’s Clinic – Long Beach**
- Trinity Baptist Church – Santa Barbara**
- Tulare Community Health Clinic – Tulare**
- Valley Community Clinic – North Hollywood**
- Valley Health Team, Inc. – San Joaquin**
- Venice Family Free Clinic – Venice**
- Vista Community Clinic – Vista**
- VNCOC - Asian Health Center – Santa Ana**
- Westside Family Health Center – Santa Monica**
- Westside Neighborhood Clinic – Long Beach**

VANUATU

Total Wholesale Value: \$4,442 • Total Weight: 278 lbs. • People Served: 14,826

- Loloma Foundation – Port Vila**

VENEZUELA

Total Wholesale Value: \$25,844 • Total Weight: 176 lbs. • People Served: 6,664

- Turimiquire Foundation – Cumana**

WEST BANK/GAZA

Total Wholesale Value: \$202,272 • Total Weight: 4,824 lbs. • People Served: 83,492

- ANERA – Jerusalem**
- St. John of Jerusalem Eye Hospital – Jerusalem**

ZAMBIA

Total Wholesale Value: \$663,385 • Total Weight: 11,435 lbs. • People Served: 323,392

- Lubwe Mission Hospital – Samfya**
- St. Francis Katete Hospital – Katete**

Zambia’s economic situation is stagnant, and the government is burdened with high debt and a rural health infrastructure that remains severely under-funded. More than 50 percent of the population are children under the age of 15, and a further 20 to 25 percent are women of childbearing age. The World Health Organization reports that the life expectancy at birth in Zambia is just 35 years, and the under-five child mortality rate is approximately 180 per 1,000. The impact of inadequate healthcare facilities on this group, as well as the population as a whole, is compounded by poverty, disease, and malnutrition. The effects of the HIV/AIDS epidemic have been devastating, with an estimated 16.5% percent of adult Zambians infected and over 600,000 AIDS orphans.

The densely populated Katete region in eastern Zambia is comprised mostly of subsistence farmers. The region's primary hospital provider is the St. Francis Katete Hospital established in 1948. St. Francis Katete is a busy 350-bed general hospital, jointly administered by the Anglican and Roman Catholic Churches. St. Francis also runs two nursing schools and a network of 14 rural clinics which serve a population of 157,000. In addition, the hospital supports over 6,000 AIDS orphans living in proximity to the hospital. The center also provides voluntary HIV/AIDS testing and counseling, provides community education on HIV/AIDS prevention, and in-home support to those individuals living with HIV/AIDS. Direct Relief provided support to the hospital by donating an operating table, IV stands, wheelchairs, sterilizers, stethoscopes, IV fluids, antibiotics, anti-worm medicine, sutures, surgical instruments, and exam gloves, as well as lab supplies such as blood draw needles, collection tubes, and microscope slides to support their HIV/AIDS monitoring and testing program.

ZIMBABWE

Total Wholesale Value: \$3,581,163 • Total Weight: 5,970 lbs. • People Served: 106,006

J.F. Kapnek Charitable Trust – Avondale

WORLDWIDE

Total Wholesale Value: \$2,123,463 • Total Weight: 1,910 lbs. • People Served: 26,736

In fiscal year 2005, Direct Relief and Bristol-Myers Squibb implemented a proactive medical mission box program that provided basic medicines to U.S. physicians who participated in short-term medical trips to overseas health facilities. Ninety-nine physicians traveled to 34 countries and delivered approximately \$2.1 million (wholesale) of assistance. Each Medical Mission Box contained a mix of antibiotics and antifungal medicine.

School children, Mansa, Zambia



PHOTO: Amanda Jones

The year that ended March 31, 2005, was the first year of Direct Relief's new reporting period. The change from calendar-year reporting was prompted by the fact that Direct Relief typically operates at a deficit for fifty out of fifty-two weeks each year, with calendar-year-end giving determining whether the organization met its budget goals.

By changing the fiscal year and budgeting cycle, the organization can now adjust fourth quarter spending plans if necessary based on the results of the calendar-year-end donations. The new calendar also allows for a more informed basis to develop following year budgets.

Making this transition required a "short-year" or transition quarter from the period January 1, 2004, to March 31, 2004, after which a full audit was conducted and the organization submitted an IRS form 990 (the nonprofit version of a tax return). Both of these documents are published on our website.

Direct Relief's financial statements must account for both cash and medical material resources (or in-kind contributions) that are entrusted to the organization to fulfill its humanitarian medical mission. In fiscal year 2005, approximately 90 percent of our total public support and revenue of \$221.3 million was received in the form of in-kind materials and services. In the previous pages, we have described where and why these material resources were provided.

We recognize, however, that the merging of cash and in-kind contributions in the following financial statements, which are necessarily prepared in accordance with Generally Accepted Accounting Principles, can be confusing to the non-accountants among us. The notes following the financial statements are to assist you in understanding how our program model is financed and works, to explain the state of our organization's financial health, and to inform you about how we spent the money that was generously donated to Direct Relief in 2005 by people, businesses, organizations, and foundations.

We are pleased to report that, at the close of 2005, Direct Relief's financial situation was in excellent shape. For the first three quarters of the year, product contributions and our cash revenue and expenses tracked very closely with Board-approved budget although, as every year, financial contributions received at calendar year end would determine whether our organization would meet projected revenue budget. This is because calendar-year-end contributions traditionally account for more than 20 percent of our total income.

The tragic Asian tsunami on December 26 and the outpouring of generosity that it inspired had significant consequences for all aspects of our organization, including finances. From a purely financial perspective, the infusion of tsunami resources has a distorting effect on the financial picture. From December 26 to March 31, 2005, when this reporting period ended, we received \$12.8 million in tsunami-designated cash contributions. This amount alone represents a more than a three-fold increase over cash contributions for the entire previous full fiscal year.

This significant infusion of cash and the availability of an extensive medical product inventory provided the means to conduct an extensive medical relief effort in tsunami-affected areas. This intense effort remained ongoing through the end of the fiscal year to the date of this writing, though the assistance focus has changed to recovery and redevelopment.

However, because a significant infusion of unbudgeted resources occurred in the weeks immediately prior to the end of this reporting period, one effect is that the fiscal year ended with significant remaining funds and medical inventory on hand.

This is important to note because it can distort the true financial picture of our organization's financial health and performance in 2005. Approximately \$95 million in medical inventories and over \$9 million in tsunami-designated cash contributions existed at year's end and appear as "surplus" in this report. Medical material inventories received in 2005 and carried forward into the new fiscal year will be furnished on a humanitarian basis.

With regard to tsunami-designated contributions, our organization adopted a strict policy to ensure that 100% of all tsunami contributions are used only on expenses directly related to benefit tsunami victims. None of the tsunami funds were or will be used to cover pre-existing organizational costs, including staff salaries. Consistent with this detailed policy, all administrative expenses, including approximately \$74,000 in banking and credit card processing fees associated with simply receiving tsunami contributions, were absorbed through other resources.

The overall effect of this policy has added new administrative costs associated with our tsunami assistance efforts, but those costs will be borne by our organization at large so as to honor precisely the clear intent of generous donors to the tsunami effort and preserve the maximum benefit for the victims for whose benefit the funds were entrusted to Direct Relief.

Finally, we note that this is the first reporting period in which our organization’s independently audited financial activities were also reviewed by a newly established audit committee, the majority of whose members are not Directors of the organization. This additional level of independent review is required under the law of California.

FISCAL YEAR 2005	CASH AND SECURITIES	IN-KIND MATERIALS AND SERVICES	TOTAL
WHAT WE RECEIVED	\$21,157,032	\$200,188,403	\$221,345,435
WHAT WAS USED	\$(7,796,876)	\$(120,036,905)	\$(127,833,781)
YEAR-END TOTALS	\$13,360,156	\$80,151,498	\$93,511,654

Direct Relief-funded boat-building clinic run by CHF (Community, Habitat, Finance), Banda Aceh, Indonesia



I STATEMENT OF ACTIVITIES I

for the years ending March 31, 2005 and December 31, 2003

	2005		2003	
PUBLIC SUPPORT & REVENUE				
Public Support				
Contributions of goods and services	\$ 200,137,511	90.4%	\$ 98,648,358	95.7%
Contributions of cash and securities-tsunami	12,842,330	5.8%		
Contributions of cash and securities-other	7,758,039	3.5%	3,494,993	3.4%
Total Public Support	220,737,880	99.7%	102,143,351	99.1%
Revenue				
Earnings from investments and other income	607,555	0.3%	901,086	0.9%
TOTAL PUBLIC SUPPORT AND REVENUE	221,345,435	100%	103,044,437	100%
EXPENSES				
Program Services				
Value of medical donations shipped	119,419,491		93,627,424	
Operations and shipping	3,906,098		2,435,423	
Cash grants-tsunami relief activities	3,224,192			
Contributed services	24,608		44,736	
Total Program Services	126,574,389	57.2%	96,107,583	93.3%
Supporting Services				
Fundraising	676,219		541,317	
Administration	583,173		443,993	
Total Supporting Services	1,259,392	0.6%	985,310	1.0%
TOTAL EXPENSES	127,833,781	57.8%	97,092,893	94.3%
INCREASE IN NET ASSETS	\$ 93,511,654	42.2%	\$ 5,951,544	5.7%

STATEMENT OF CASH FLOWS

for the years ending March 31, 2005 and December 31, 2003

	2005		2003	
<i>Cash flows from operating activities</i>				
Increase in net assets	\$ 93,511,654		\$ 5,951,544	
<i>Adjustments to reconcile change in net assets to net cash provided by operating activities</i>				
Change in inventory	(79,855,228)		(4,586,086)	
Changes in other operating assets and liabilities	(239,829)		(852,543)	
Net cash provided by operating activities	13,416,597		512,915	
<i>Net cash used by investing activities</i>				
Purchase and sale of investments and equipment	(1,168,943)		(406,208)	
<i>Net cash used by financing activities</i>				
Mortgage payments	(45,435)		(38,640)	
Net increase in cash	12,202,219		68,067	
Cash, Beginning of Year	634,768		823,179	
Cash, End of Year	\$ <u>12,836,987</u>		\$ <u>891,246</u>	

I STATEMENT OF FINANCIAL POSITION I

as of March 31, 2005 and December 31, 2003

	2005	2003
ASSETS		
<i>Current Assets</i>		
Cash and cash equivalents	\$ 12,836,987	\$ 891,247
Securities	6,596,966	4,056,769
Inventories	95,445,318	17,157,224
Other current assets	339,614	472,605
Total Current Assets	115,218,885	22,577,845
<i>Other Assets</i>		
Property and equipment	3,169,394	3,584,299
Remainder interests	67,219	41,173
Miscellaneous	5,437	18,787
Total Other Assets	3,242,050	3,644,259
TOTAL ASSETS	\$ 118,460,935	\$26,222,104
LIABILITIES AND NET ASSETS		
<i>Current Liabilities</i>		
Payables and other current liabilities	\$ 534,635	\$218,327
Current portion of long-term debt	49,242	44,692
Total Current Liabilities	583,877	263,019
<i>Other Liabilities</i>		
Long-term debt	1,519,104	1,581,777
Distribution payable	27,121	36,793
Total Other Liabilities	1,546,225	1,618,570
TOTAL LIABILITIES	2,130,102	1,881,589
NET ASSETS		
<i>Unrestricted net assets</i>		
Board restricted investment fund	7,358,570	4,844,568
Undesignated	99,457,873	19,372,726
Total unrestricted net assets	106,816,443	24,217,294
<i>Temporarily restricted</i>	9,504,390	123,221
<i>Permanently restricted</i>	10,000	
TOTAL NET ASSETS	116,330,833	24,340,515
TOTAL LIABILITIES AND NET ASSETS	\$ 118,460,935	\$ 26,222,104

Fiscal Year Results

In the fiscal year ending March 31, 2005, Direct Relief International provided 526 shipments of humanitarian medical material including pharmaceuticals, medical supplies, and medical equipment. The more than 520 tons (one million and forty thousand pounds) of material aid was furnished to local health programs in 53 countries, including the United States, and had a wholesale value of \$119,419,491. The provisions contained in these aid shipments were sufficient to provide treatment to 22 million people.

Comparison to Previous Year's Results

For the purposes of comparing our activities during this fiscal year, we have used the last full-year period for which audited figures exist (2003). As noted above, a full audit was completed for the transition quarter from January 1, 2004, to March 31, 2004, but these figures do not provide an adequate basis for comparing full-year results.

Leverage

For each \$1 that Direct Relief spent in 2005 for general operations, administration, fundraising, and our core medical assistance program, the organization provided \$28.24 worth of wholesale medical material assistance. These cash operating expenses totaled \$4,229,317. The expenditure of these funds enabled Direct Relief to furnish \$119,419,491 worth (wholesale value) of medical material resources to 53 countries. The weight of these materials was 1,040,150 lbs, or 520.1 tons. The value and volume of product shipped increased 28% and 45%, respectively over the previous full-year audited period.

In addition, the organization incurred \$3,567,559 in tsunami cash expenditures, of which over \$3.2 million was in the form of cash grants to support essential relief and recovery efforts conducted by local organizations in the affected countries and colleague international nonprofit organizations.

Staffing

These activities were accomplished by a staff which, as of March 31, comprised 32 positions (25 full-time, 7 part-time). Measured on an FTE (full time equivalent) basis, the total staffing over the course of the year was 26.3. This figure is derived by dividing the total hours worked by 2,080, the number of work hours by a full-time employee in one year. Two persons each working half time, for example, would count as one FTE.

In general, staff functions relate to three basic business functions: programmatic activity; resource acquisition and fundraising, and general administration. These are described below. The following sections describe the financial activities of our organization, how resources are spent, and how your funds are leveraged to provide assistance to people in need throughout the world.

Program Expenses

In 2005, Direct Relief spent \$6,537,484 in cash on programmatic expenses. \$1,382,437 paid for salaries, related benefits (health, dental, and long-term disability insurance, retirement-plan matching contributions), and mandatory employer paid taxes (social security, Medicare, workers' compensation, and state unemployment insurance) for 18 full-time and 5 part-time employees engaged in programmatic functions.

Program expenses also include:

- purchase of medicines, equipment, parts, and other medical supplies not available through donation (\$394,956)
- cash grants to partner organizations (\$3,389,746 of which \$3,224,192 was for tsunami relief)
- ocean/air freight and trucking for outbound shipments to partners and inbound product donations (\$594,204)
- travel for oversight and evaluation (\$93,192); contract services (\$38,649); packing materials and supplies (\$18,970); maintenance of the organization's forklifts and truck
- a pro-rata portion of other allocable costs (see below)

Fundraising Expenses

Direct Relief spent a total of \$676,219 on resource acquisition and fundraising in 2005. \$264,831 paid for salaries, related benefits, and taxes for 3 full-time and 1 part-time employees engaged in resource acquisition and fundraising.

Fundraising expenses also include:

- the production, printing, and mailing of newsletters, the annual report, tax-receipt letters to contributors, fundraising solicitations, and any other communications not having exclusively programmatic content. Total costs incurred were approximately \$169,000. Included in this total was the \$31,573 cost of providing written acknowledgement to donors who contributed for tsunami assistance
- \$162,118 in expenses directly related to fundraising events
- \$5,942 in advertising and marketing costs, (a total of \$24,117 is posted which includes an \$18,175 credit in free advertising for a tsunami relief fundraiser held in the Midwest)
- a pro-rata portion of other allocable costs (see below)

It should be noted that Direct Relief does not classify any mailing expenses as “jointly incurred costs” – an accounting practice that permits, for example, the expenses of a newsletter containing information about programs and an appeal for money to be allocated partially to “fundraising” and partially to “public education.”

Administrative Expenses

Direct Relief spent a total of \$583,173 on administration. Administration is responsible for financial and human resource management, information technology, reception, and general office management. \$286,925 was for salaries, related benefits, and taxes for 4 full-time and 1 part-time employees engaged in administration and financial management.

Administrative expenses also include:

- \$94,038 in credit card, banking, brokerage, and portfolio management fees. Of that amount, approximately \$74,000 was directly attributable to tsunami relief donations
- \$58,125 for external communications
- \$51,602 in consulting fees, including information technology services (\$30,338), a business process/workflow review consultancy (\$14,188), and service mark/trademark registration fees
- \$16,522 in accounting fees for the annual CPA audit, the cost of preparing and filing nonprofit registration statements with state authorities in over thirty U.S. jurisdictions, payroll processing and reporting, and other financial services
- \$13,992 in taxes, licenses and permits. Direct Relief has registered as an exempt organization in virtually every state requiring such registration
- a pro-rata portion of other allocable costs (see below)

Other Allocable Costs

Direct Relief owns and operates a 40,000-square-foot warehouse facility. Costs to maintain the warehouse include mortgage interest, depreciation, utilities, insurance, repairs, maintenance, and supplies. These costs are allocated based on the square footage devoted to respective functions (e.g. fundraising expenses described above include the proportional share of these costs associated with the space occupied by fundraising staff). The salary of the President and CEO is also allocated to functions in accordance with the time spent on the functions as follows: fundraising (30 percent), administration (15 percent), and programmatic activities (55 percent).

Board Restricted Investment Fund

In 1998, Direct Relief’s Board of Directors established a board-designated reserve fund (sometimes characterized as a “quasi-endowment” in legal or accounting terminology) to help secure the organization’s financial future. The fund was established with assets valued at \$773,786 in 1998.

The Fund is administered by the Board’s Finance Committee, which meets monthly and oversees investment policy and fiscal operations. Board policy authorizes the distribution of up to five percent (5%) of the average market value (measured January 1 for the three preceding years) of the Fund’s portfolio assets to support general operations. Distributions in excess of five (5%) require a 75% vote of the Board of Directors. Distributions totaling \$290,000 were made during the twelve month period ending March 31, 2005.

As of March 31, 2005, the Fund was valued at \$7,358,570.

Cash versus In-Kind Support

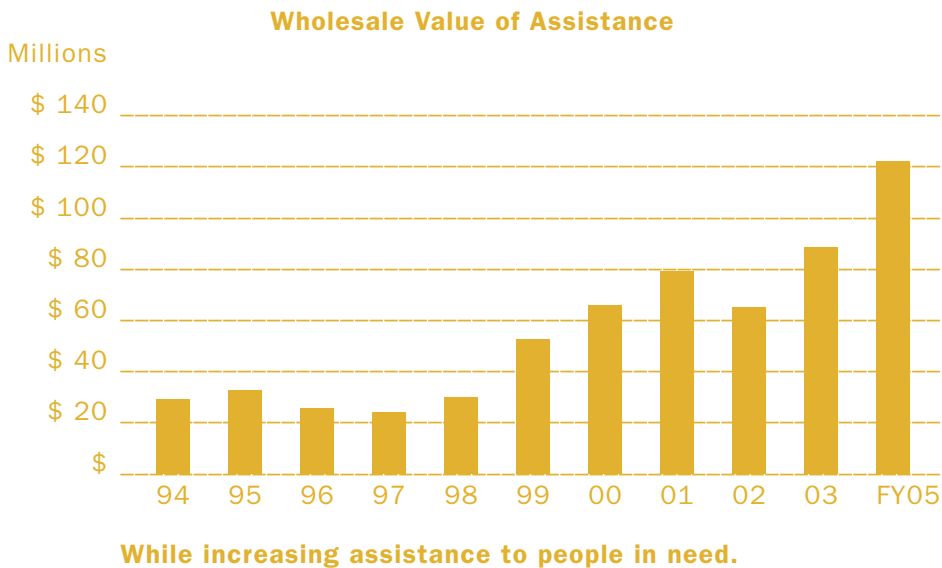
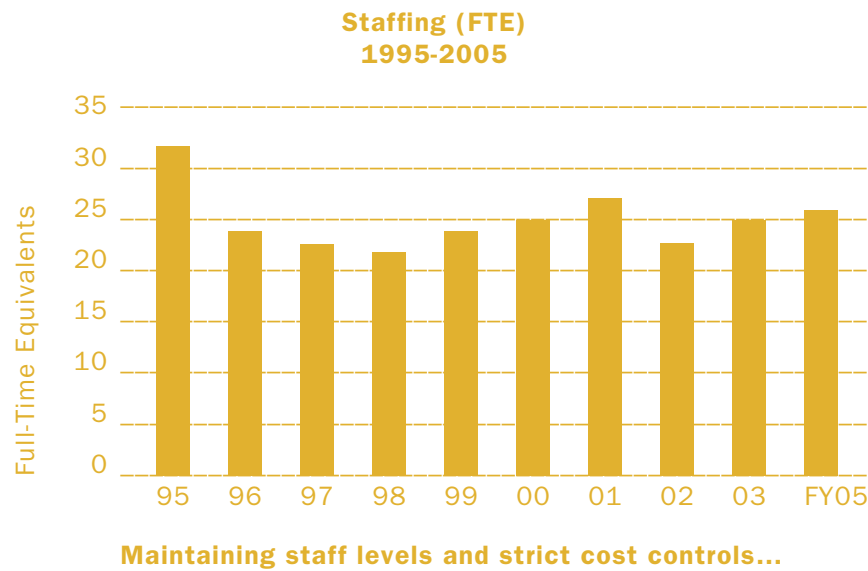
Direct Relief International’s activities are planned and executed on an operating (or cash) budget that is approved by the Board of Directors prior to the onset of the fiscal year. The cash budget is not directly affected by the value of contributed products. Direct Relief’s program model involves obtaining and providing essential medical material resources. Cash support – as distinct from the value of contributed goods – is used to pay for the logistics, warehousing, transportation, program oversight, administration, fundraising, staff salaries, product solicitation, and all other expenses.

How Changes in Inventory Affect our Bottom Line

Direct Relief International must account for all donations – both cash and in-kind material or services – that it receives. The organization receives in-kind donations of medical products on an ongoing basis. These donations are recorded in inventory upon receipt. Direct Relief’s policy is to distribute products at the earliest practical date, consistent with sound programmatic principles. While the distribution typically occurs in the same year of receipt, it may occur in the following year. An expense is recorded when the products are shipped. For the year ending March 31, 2005, Direct Relief received \$79,855,228 more in product than it provided in humanitarian shipments. (This inventory was carried forward into the new year.) Much of this increase arrived during the last quarter of our fiscal year following the Asian tsunami.

Product Valuation:

In-kind contributions, such as contributed medicines, supplies, or equipment, are valued at the wholesale price in the United States. Specifically for pharmaceutical products, the source of and basis for product values are the “Average Wholesale Price” (AWP), which is published by Thomson Healthcare’s “Redbook.” While retail values may be significantly higher, Direct Relief traditionally has chosen to use the more conservative value of the AWP to value pharmaceutical products that are contributed. For used medical equipment, the organization determines the value by reviewing the price of similar equipment listed for sale in various publications and on internet sites such as eBay.



I OUR INVESTORS I

From April 1, 2004 through March 31, 2005, Direct Relief International received medical aid with a wholesale value of over \$200 million. The vast majority of our investors are American corporations. We thank the following donors whose generosity has enabled us to help over 22 million people around the world.

Manufacturers providing medical donations in Fiscal Year 2005

3M Industrial Adhesives and Tapes
3M Pharmaceuticals
Abbott
Advanced Medical Optics
Aearo Company
Alabama Outdoors
Alcon Laboratories, Inc.
Allergan, Inc.
Amsino International
Ansell Healthcare Incorporated
Astra Tech
Auburn Pharmaceuticals
Bausch & Lomb Surgical Company
BC Group International
BD
Beiersdorf Inc. - Aquaphor Division
Beiersdorf Inc. - Eucerin Division
Beiersdorf Inc. - Futuro Division
Boehringer Ingelheim Cares Foundation, Inc.
Bottle Drops
Bristol-Myers Squibb Company
BSN Medical, Inc. - Orthopaedics GBU
ConMed Corporation
Crosstex International
Den-Mat Corporation
Daiichi
Don Wilson Company
Drug Plastics & Glass
E. Fougera & Company
East West Associates
Edgepark Surgical
Ethex Corporation
Ethicon, Inc.
Eveready Wholesale Drugs, Ltd.
FNC Medical Corporation
Forest Pharmaceuticals, Inc.
GlaxoSmithKline
Global Medical Assistance
Global Partners for Development
Global Pharmaceuticals
Goldmax Industries
Havel's Incorporated
Hendry Telephone Products
Henry Schein, Inc.
Home Diagnostics, Inc.
Hospira, Inc.
Huntsville Emergency Medical
Independence Medical
Janssen Pharmaceutica, Inc.
Johns Hopkins Hospital
Johnson & Johnson
Johnson & Johnson Consumer
K.V. Pharmaceutical Company
Kendall Healthcare, Tyco
Kimberly-Clark Corporation
King Pharmaceuticals, Inc.
Life Uniform
Lombart Instrument
Mattell, Inc.
Maxima Packaging & Supply
McKesson Medical-Surgical
McNeil Consumer & Specialty Pharms.
Medical Action Industries
Medical Illumination, Inc.
Medical Innovations, Inc.
Medline Industries, Inc.
Mentor Corporation
Merck & Company, Inc.
Microflex
Midmark Corporation
Miltex Instrument Company
Moldex-Metric, Inc.
Mylan Laboratories, Inc.
NAPO Pharmaceuticals
Nationwide Medical/Surgical, Inc.
Nellcor
Nexxus Products Company
Nisim International
North Safety Products
Omron Healthcare, Inc.
Onyx Medical
Owens and Minor Company
Pfizer Consumer Healthcare
Pfizer, Inc.
Platinum Performance
Prasco Laboratories
Progressive Medical International
Propper Manufacturing Company
Purdue Pharma, L.P.
Redwood Bio Tech
Repro-Med Systems, Inc.
Respironics, Inc.
Royce Medical
Sage Products, Inc.
Sandel Medical Industries, LLC
Sappo Hill Soapworks
Schering-Plough Corporation
Smith & Nephew/Orthopaedic
Spenco Medical Corporation
STADA Pharmaceuticals, Inc.
Sunstar Butler
Surgistar, Inc.
Tagg Industries
Tanita Corporation of America, Inc.
Taro Pharmaceuticals U.S.A., Inc.
Tempur-Pedic, Inc.
TEVA Pharmaceuticals USA
Textilease Medique
TG Eakin Limited
The McGraw-Hill Companies
Thomson Medical Economics
Titan Corporation
Tronex International, Inc.
U.S. Surgical, Tyco Healthcare
Valleylab, Inc.
Vanguard
Vitaminerals, Inc.
Waldwick Plastics Corporation
Watson Pharma, Inc.

Western Scientific Co.
Wisconsin Pharmacal Company, LLC
Zeiss Certified
Zooth, a Division of Gillette

Medical Facilities, Organizations, Institutions, and Individuals providing in-kind support in Fiscal Year 2005 (\$1,000 +)

All Saints Greek Orthodox Church
American Soc. of Cataract & Refractive Surgery
Animal Urgent Care
Ayesha Shaikh
Bacara Hotel and Spa
Child Health Foundation
Conejo Free Clinic
Dennis A. Shanelec, DDS
Douglas Moriarty
DreamWeaver Medical
Eric Heer
Four Seasons Biltmore
Gifts In Kind International
Global Links
Graham-Field, Inc.
International Aid
Isla Vista Medical Clinic
Dr. Ralph Kuon
Jean Menzies
Liga International
Mr. Chris Peltonen
Nobbe Orthopedics Inc.
Pacific Pain Physicians, Inc.
Planned Parenthood of Santa Barbara
Rhein Medical
S.B. Visiting Nurses Ass.
Sansum Medical Clinic
Santa Barbara Cottage Hospital
Santa Barbara Neighborhood Clinics
Santa Ynez Cottage Hospital
SB Medical Foundation Clinic
SEE International
Shepard Eye Clinic
St John's Pleasant Valley Hospital
St. John's Regional Hospital
Vitamin Angel Alliance
World Vision

And special thanks to the many Kiwanis Clubs, Lions Clubs, Emblem Clubs, and Rotary Clubs that have supported Direct Relief International

Thank You!

**I INDIVIDUALS, CORPORATIONS,
AND FOUNDATIONS THAT
PROVIDED CASH SUPPORT
IN FISCAL YEAR 2005 I**

**Ambassador of Health
(\$100,000 +)**

Anonymous
The Antioch Company
Mr. and Mrs. Philip Berber
Mr. Bill Clark
Mr. and Mrs. Chris Conway
Mr. and Mrs. John D. Curtis
Dodge & Cox
FedEx
Harman International Industries, Inc.
Johnson & Johnson Family of Companies
Maine Community Foundation
Richard King Mellon Foundation
Mentor Corporation
Network for Good
The Norcliffe Foundation
Potash Corporation of Saskatchewan, Inc.
Babette L. Roth Irrevocable Trust
Santa Barbara Vintners' Foundation
SigmaTel
Tenet Healthcare Foundation
Tyco International, Inc.
Yardi Systems, Inc.

**Consul General
(\$50,000 +)**

Alcon Laboratories, Inc.
Mr. and Mrs. Bruce Anticouni/
The Anticouni Family Foundation
The Sheila Johnson Brutsch Charitable Trust
Bush Hospital Foundation
California Community Foundation
Campbell & Company, Inc.
Capital Group Companies Charitable
Foundation
Mr. and Mrs. Bill Casner
Mr. and Mrs. Dan Doctoroff
The William H. Donner Foundation, Inc.
Harman Family Foundation
Kind World Foundation
Mr. and Mrs. Jon B. Lovelace
Christy and John Mack Foundation
G. Harold & Leila Y. Mathers Foundation
Mr. Ken Maytag/Fred Maytag Family
Foundation
New York Mercantile Exchange
Charitable Foundation
Mr. and Mrs. John R. Noble
Oracle Corporation
The San Diego Union-Tribune
Mrs. C. William Schlosser/Nancy B. and
C. William Schlosser Family Foundation
Schulte Roth & Zabel LLP
The J.E. & Lillian Tipton Foundation Trust
Trust Company of the West
Wellpoint Foundation

**Global Emissary
(\$25,000 +)**

Anonymous
Mr. and Mrs. John H. Adams
Allergan Foundation

The American Society of the Most Venerable
Order of the Hospital of St. John
Amgen, Inc.
Mr. and Mrs. Tom Black
Bristol-Myers Squibb Company
Builders Association Charity
Cambria Winery & Vineyard
The Hon. and Mrs. Henry E. Catto/Catto
Charitable Foundation
Church of the Holy Communion
Community Foundation Silicon Valley
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Dendrite International, Inc.
Mr. and Mrs. Leonard J. DiSanza
Eiting Foundation
Highbourne Foundation
Hy Cite Corporation
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Mr. Donald S. Kennedy
Ms. Nancy M. Lessner
Mr. Joseph C. Lizzio
Mr. and Mrs. Glenn Lukos
Marquee
Mr. Peter Morton
NetEffects
New York Giants
Mr. and Mrs. Donald E. Petersen/
The Donald E. and Jo Anne Petersen
Foundation
Pfizer, Inc.
Qdoba Mexican Grill
Mr. and Mrs. James J. Roehrig
The Dorothea Haus Ross Foundation
Mr. Stanley Shopkorn
Mr. and Mrs. Harold Simmons
Ms. Angela Skolnick
Smart Family Foundation, Inc.
Ms. Carolyn J. Smith
Mr. and Mrs. Nicholas W. Tell, Jr.
Tellabs Foundation/Tellabs, Inc.
Mr. and Mrs. Walter J. Thomson
Union for Reform Judaism
Vanech Family Foundation
Video Products Distributors
Wilmington Trust Company
WWW Foundation

**World Health Envoy
(\$10,000 +)**

Anonymous
Adirondack Community Trust
Aera Energy LLC
Aidmatrix
Alliance Bancorp
American Academy of Physician Assistants
American Jewish World Service
Anncox Foundation, Inc.
Anticouni & Associates
Archstone Foundation
Mr. Anderson J. Arnold
Ms. Anne Azeez

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BD
Mr. and Mrs. Christopher Blair
Leland F. Blatt Family Foundation
Blue Shield of California Foundation
The Body Shop
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John G. Braun Charitable Annuity Trust
Brookstreet Securities Corporation
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Mr. Stephen A. Burlingame
Ms. Virginia W. Cabot
Mr. James J. Callan
Mr. Bruce Campbell
Mrs. Sue Campbell
The Capital Trust Company of Delaware
Carquest Charitable Foundation
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Mr. and Mrs. Robert M. Cavenagh
Mr. and Mrs. Steve Charton
Dr. Vijaya Chellapilla
Mr. and Mrs. Jim Clendenen
Community Foundation of the Napa Valley
Mr. Steven Contursi
Mr. Stuart P. Coxhead, Jr.
The Crawford Idema Family Foundation
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Mr. and Mrs. Killick Datta/Global Brand
Marketing, Inc.
David Michael & Co., Inc.
Mr. and Mrs. Robert A. Day/
Willametta K. Day Foundation
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Empowerment Works, Inc.
The Charles Engelhard Foundation
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Mr. Frank Ferguson
Ms. Nikola N. Filby
Mr. and Mrs. Gary Finefrock
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Ms. Penelope D. Foley
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Mildred K. Fusco Trust
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Global Partners for Development
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Ms. Reba Gonzales
Mr. Richard Goodrich
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 Brookshire Green Foundation
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 Mr. and Mrs. Pierson M. Grieve
 Mr. and Mrs. Steven R. Gumins
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 Mr. and Mrs. Louis Hanover
 Mr. and Mrs. Eli Harari
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 Mr. and Mrs. Henry D. Herr
 Mr. Roger W. Higgins and
 Dr. Priscilla Higgins
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 Hartley-Ostini Hitching Post Winery/
 The Hitching Post
 Mr. Linus Ho
 Mr. and Mrs. S. Roger Horchow
 Ms. Cynthia Howard
 Ellen E. Howe Foundation
 HP Buellton, Inc.
 Mr. Stanley Hubbard/The Hubbard
 Broadcasting Foundation
 Hutton Foundation
 Izumi Foundation
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 Mr. John Johnson
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 Mrs. Nancy Walker Koppelman
 Dr. Ralph Kuon, M.D.
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 National Philanthropic Trust DAF
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 The NPD Group, Inc.
 Nuveen Investments, LLC
 OMRON Foundation, Inc.
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 The Pacer Foundation
 Pacific Capital Bancorp
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 Ms. Helen L. Pedotti
 Peninsula Community Foundation
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 Mr. Raj Rajaratnam
 Mr. Robert Reingold
 Mr. Randy Rettig and Ms. Ashley Williams
 Mr. Chuck Rován
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 Mr. and Mrs. Nick Runnebohm
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 Mrs. June H. Schuerch
 Mr. E. H. Schullmayer
 Mr. Michael Scott
 Mr. and Mrs. James H. Selbert
 Mr. Piero Selvaggio
 Seven Lakes Chapel in the Pines, Inc.
 Shaker Family Charitable Foundation
 Shirley Machine and Engineering, Inc.
 The Susan Stein Shiva Foundation
 Ms. Tonia A. Simon
 Skyworks Solutions, Inc.
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 The David Winton Bell Foundation
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President's Council
(\$5,000 +)

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 Mr. Edward C. Friedel and
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 Mr. and Mrs. George E. Handtmann, III
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