

# Annual Report 2011





### Message from the Co-Founder



Yes, it is the patients I remember best....leaving FAME Medical with smiles on their faces, hope restored, shoulders lighter.

This was a year filled with exciting leaps forward as well as discouraging setbacks, but there's no where I would rather be than right here right now. When I think back on 2011, the moments that really stand out revolve around our patients, mothers carrying sick children into the Clinic in a downpour and leaving with smiles of relief on their faces, droves of patients with never before treated seizure disorders leaving with medicine in hand and a new lease on life, the wounded and the injured being gently cared for and comforted, and perhaps the most memorable of all, the glowing little face of Renata upon returning from Germany after her heart surgery. Yes, it's the patients I remember best....leaving FAME Medical with smiles on their faces, hope restored, shoulders lighter. Alongside these faces, I will also remember those we lost. The one's we couldn't help despite our best efforts: the 15 year old girl with inoperable mitral valve disease, the little boy in the late stages of rabies, the child who arrived at Clinic already in a sickle cell crisis. Each one, an example of someone who would have survived, or never gotten sick, in the Western world. It's these faces and the generosity of our supporters and friends that nourish our spirits and inspire Frank and I to bring the kind of medical care and resources we've grown up knowing, to a people we hold dear. I turned 50 this year, and I feel like I'm just embarking on a new journey. Like I said, there is nowhere I would rather be than right here right now. 2011 has been a remarkable year. I hope the following pages capture not only the highlights but the spirit of our work as well.

Love and Blessings....

Susan C. Gustefor







### **Friendly faces**

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We endeavor to make every patient feel welcome at FAME Medical and our Tanzanian team is largely responsible for insuring this happens. We suspect this is one of the main reasons our patient population continues to grow, with a 20% increase at the Outpatient Clinic this year alone. In 2011, our medical/support team grew from eight to eleven. Monica Ole, Dr. Ken Karanja, and Yusufu Mbaga are among the newest members of our medical team. Our newest Nurse Assistant, Monica, happens to be from the Maasai tribe. She has been a tremendous help this year. Her language skills and understanding of Maasai culture have helped our doctors and nurses provide the medical care and health education our Maasai patients deserve. Dr. Ken, a Clinical Officer, came to us with six years of experience. His curious mind, work ethic and wonderful bedside manner have contributed to him fitting in beautifully at FAME Medical. Yusufu, our newest Laboratory Technician also joined our team in 2011, bringing with him a specialty in parasitology. Finally, William Mhapa joined us this year. As our Community Health Facilitator, he has been an enormous help, following-up on patients facing complex psycho-social situations, delivering

invaluable health education and counseling support to patients in need and essentially helping out wherever he is needed most. And then there's the remarkable volunteers who helped us in 2011, twenty-seven in all. By sharing their expertise and working side by side with our Tanzanian doctors and nurses, patients had access to care they might otherwise have gone without.

This is how medicine should be -- individuals bringing their knowledge and talents together to create something better then anyone could have done on their own....It's sometimes easy to forget at FAME that we were lacking in some resources, as the hearts of the people made up for it."

Volunteer Dr. Courtney Nall



Dr. Ulrich & Gaby Winkler with Renata back in Tanzania after her surgery

Renata was seven years old when she first visited FAME Medical. Her uncle, Erasmus, along with her father, Andrea, brought her to us upon being told she had "heart trouble." Ironically, Erasmus, was the porter instrumental in saving Dr. Frank's life on Kilimanjaro - the one who ran down the mountain at midnight to retrieve a stretcher. Little Renata's presenting complaints included difficulty breathing, loss of appetite, and weakness. On ultrasound it was determined that she was suffering from severe rheumatic heart disease. Dr. Frank immediately began consulting his colleagues in the U.S. It didn't take long to learn that Renata's chances of survival were slim to none if she didn't have heart surgery to repair or replace her mitral valve. Unfortunately, pediatric heart surgery is not available in Tanzania, so volunteers and others began pooling their resources in an effort to find a heart center somewhere that would do the surgery for free. As days turned into weeks, Renata's symptoms began to worsen. She was experiencing rapid heart beat and difficulty breathing at night, losing more and more weight, and could hardly walk from the parking area into the clinic. Then nothing short of a miracle happened. On November 22, 2010, a German cardiologist, on holiday in Tanzania, came out of nowhere. He stopped by, unannounced, just to see the Clinic. It happened to be the same day Renata

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Renata in the ICU in Germany

was there, very ill, seeing Dr. Frank. Within minutes, Frank asked our visitor, Dr. Ulrich Winkler, to please evaluate Renata. He graciously complied, still dressed in his safari clothes. After the evaluation and another ultrasound, he wrote in Renata's chart: "Recommendation: MV (mitral valve) surgery as soon as possible." The next thing we know, he had returned to Germany, having found a pediatric heart center there to do her surgery at no charge. FAME volunteers acquainted with Renata and her family raised the money for her flights. FAME staff began the tedious process of helping the father secure the necessary visas and passports for travel. Under normal circumstances, this would all have taken a tremendous amount of time. Instead, the money necessary to meet the flight costs was raised in just a few weeks and the passport and visa process was completed in record time. On January 30th, 2011, Renata boarded a plane bound for Germany. On February 3<sup>rd</sup> she had surgery to repair her heart valve. She returned home to Tanzania on February 23<sup>rd</sup>. Today Renata can walk, run, play, go to school....just like all the other children her age. What amazing things can happen when people listen to their hearts and pull together for good.



Dr. Duane Koenig, the FAME team and a patient

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#### Almost 10,000 patients treated this year

The vast majority of patients treated at FAME Medical this year were people suffering from acute respiratory infections, waterborne diseases, urinary tract infections and STD's. Consistent with a country-wide trend, we saw fewer cases of malaria this year. A variety of variables likely contributed to the decrease in incidence, including increased bed-net usage and more reliable testing. A new patient group found its way to FAME in 2011; namely, individuals (primarily children) suffering from Type 1 Diabetes. Historically, children suffering from this disease in rural Tanzania have died prematurely due to limited access to medical care and the resources necessary to pay for ongoing treatment. It never ceases to amaze us how fast word travels in Tanzania, even in the absence of modern forms of communication for so many. After successfully treating one child who came to us in a ketoacidotic



crisis, other parents began bringing their children in for treatment. With the help of telemedicine and the input of volunteer endocrine and pediatric specialists, these little patients are now receiving the care they so desperately need. We also saw our fair share of burns, injuries and wounds in 2011. In several cases, patients arrived with severe infections requiring daily IV antibiotics and debridement. Dr. Duane Koenig, a major supporter and long-term FAME volunteer, had an immeasurable impact on our community during his third six-month stay, quite literally saving lives and limbs of just such patients. As a family practice doctor and general surgeon, Dr. Duane Koenig is truly part of the FAME family. He treated hundreds of patients at FAME Medical this year alone, working tirelessly alongside our Tanzanian clinicians and nurses. Additionally, FAME clinicians treated 257 tourists this year. Given our proximity to Ngorongoro and Serengeti National Parks, sick tourists frequently arrive at FAME in need of medical care. Also this year, an outbreak of measles and whooping cough in the neighboring District of Ngorongoro resulted in a government sponsored vaccine campaign throughout our



District. FAME participated in the effort by supplying personnel and a vehicle to assist the District Medical Officer in reaching the more remotely located communities in the area. We are so thankful for the men and women in Tanzania who have chosen to work for FAME. Our doctors and nurses know and embrace our mission. They are not from the wealthiest families. They often face tremendous personal challenges. In fact, many come from very poor families and much of their salary goes to help their brothers and sisters, aunts and uncles. Perhaps this is one reason they understand the importance of compassion in healthcare.



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#### **Mobile Medical Service**

#### 4500+ patients treated. Of these...

- 250 were treated for malaria
- 900 were treated for respiratory infections
- 700 were treated for intestinal parasites

2000 miles accumulated on our bus odometer as we carried out mobile medical projects to remote communities



Taking medical care to the poorest of the poor in remote Tanzania has been one of the most challenging, albeit rewarding endeavors we have undertaken this year. With no electricity in two of the villages we serve and no running water in one, the logistical aspects of the project have been complex. Road conditions, particularly during the heavy rains, also presented some challenges this year, with access roads turning into river beds. One can imagine how completely isolated and cut off the people of this region must feel when a child is sick or a loved one injured during the

long rains. Our advance team went above and beyond this year, doing their absolute best to make the roads passable for our mobile clinic bus when conditions were at their worst. As a result, we were only unable to access these communities on two occasions during the year. We were also most encouraged by the government's move to assign two nurses and a clinical officer to what has been an empty dispensary building in Gidamilanda. Prior to our work with the Mobile Clinic, this was not the case and we believe our monthly support with mobile services has helped facilitate this major development. In fact, the government has also installed solar panels for the government health workers assigned to these remote communities,

which will certainly improve their quality of life as they serve patients far from their homes and families. In the villages of Endesh and Gidamilanda we are seeing patients primarily from the Datoga and Hadza tribes. In the Oldeani area, we continued to base our mobile team out of the infirmary at Rift Valley Children's Village. Our long-term partnership with RVCV has definitely resulted in a healthier community. There are still enormous challenges, but our combined efforts have paved the way for an even greater emphasis on health education and prevention activities that contribute to healthy children and healthy families.



### A Tale from the Bush

by Rachel Shnider, MD



#### "This is not a humanitarian vacation."

I believe that this statement appears somewhere in the FAME volunteer packet.

This refrain was running through my head on repeat throughout mobile clinic.

It's true, the conditions are not glamorous...falling asleep on the ground in the sticky heat to the sound of bats conversing and mosquitoes buzzing in and out of your ears would hardly land a rave review on TripAdvisor. I never anticipated that taking a bucket shower could feel so good and refreshing. I also didn't anticipate feeling so close to my fellow FAME volunteers and to the FAME staff after mobile...and more than anything, feeling a part of something "bigger" that connects us all.

Initially what struck me was the level of poverty and isolation that these people experience. The children live encrusted in a layer of dirt under a sometimes-brutal sun with unreliable access to food and safe water, their bellies often swollen with intestinal worms. Life is not easy for these people, to say the least—but still they smile. The children chase each other shrieking, playing games and making toys out of bits and pieces of random discarded items. And taking a moment in the midst of a non-stop day, I reflect: what a gift to be given the opportunity to be exposed to life in these Datoga and Hadzabe tribes. What a privilege to be trusted to hold and care for their children. Certain things are truly universal: the unadulterated joy in a four month old's smile, the love that a mother has for her child, and the desire that parents have to ensure their children's health and well-being, to name a few.

I would not have changed a thing about my mobile experience. In fact, I left with the feeling that I really wanted to return. "This is not a humanitarian vacation". No. But it is a truly human experience.



New Laboratory in Action



The new laboratory at FAME Medical officially opened its doors to the community on May 4<sup>th</sup>, 2011, made possible by the amazing support and

ongoing commitment of the Izumi Foundation. Dr. Joyce Cuff, a Professor of Microbiology and Parasitology, spent the entire year volunteering with FAME. She made an incalculable contribution for which we will be eternally grateful. Between helping with the layout of the new lab, mentoring and teaching our lab team, and spending countless hours working along side Yusufu, Julius, and Josephat, our diagnostic service was taken to a whole new level this year. In fact, our lab techs received two hundred and eighty hours of training in all from Dr. Cuff, not to mention the mentoring she provided during the course of the year.

Construction on the new hospital is ongoing and in the finishing stages. In March a 40 ft container filled to the brim with much needed medical equipment for the new hospital arrived at FAME Medical. It Friendly faces

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New Hospital Nearing Completion

was collected, refurbished and shipped by Medical Relief Foundation.

It was a big year for infrastructure at FAME as well. With the generous support of Marshal Merriam and Jim and Barbara Schubauer, we will be able to move forward on a much needed rain water collection and storage system on the FAME campus. This will include gutters on all the buildings as well as water storage tanks. In a country with a precarious water supply, this system will be an enormous help in supplying water to the medical facility.

"And when I further reflect on my impatience while waiting for a full year for the lab to be completed, I also think of the residents of this area who have been waiting for generations for this kind of access to quality health care. Somehow my vision seems pretty myopic. Yet another lesson learned." - Dr. Joyce Cuff

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### Putting a Human Face on FAME's New Laboratory

"Modern hospital laboratories are the building blocks for successful treatment."

Hon. David Mwakyusa, Tanzania's former Minister of Health and Social Welfare



A severely ill man suffering from lung congestion arrived at FAME Medical. Testing for bacterial pneumonia is rarely possible in rural Tanzania. However, our lab personnel were able to identify Klebsiella pneumonis in a sputum sample. As a result, our clinicians were able to make an accurate diagnosis and successfully treat this patient with the appropriate antibiotics, saving his life and leading to a full recovery.



An elderly man arrived at FAME complaining of joint aches, weakness, and general body malaise. He also had developed ascitic fluid in his abdomen. Putting our new diagnostic capabilities to work, our lab team was able to produce results identifying a background chronic infection responsible for the generalized symptoms, and an acute infection of the liver that was producing the abdominal fluid. Draining the fluid and providing the correct antibiotic resulted in a very rapid recovery.



A woman from the Maasai community arrived at FAME with a badly infected wound, the result of a puncture from a thorn. The infection was so severe, she was in jeopardy of losing her hand. Our lab staff was able to monitor the effectiveness of the antibiotic treatment provided by the medical team. This proved to be critical feedback for Dr. Duane Koenig, the attending doctor, ultimately resulting in the infection being cleared and her hand being saved.



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### **Growing a Hospital**

2012 is shaping up to be a pivotal year for FAME. Thanks to the continued support and extraordinary generosity of the Chauncey and Marion D. McCormick Family Foundation, our community will soon have a hospital on the FAME campus. Despite disappointing construction setbacks in 2011 resulting in subsequent delays, we expect hospital construction to be complete in 2012. Once the physical structure is complete, the inspection and registration process with the local authorities and Ministry of Health will begin. We do not anticipate this process taking long, given the success of our Outpatient Clinic and the support we are receiving from the community and local government. This expansion will take FAME Medical from a day clinic to a 24-hour medical service, which will naturally necessitate hiring additional medical staff. For FAME, maintaining appropriate staffing levels and resources is an absolute priority. In 2012, our goal is to increase our nursing team from two Registered Nurses to eight and from three Nurse Assistants to seven. This will enable us to staff our busy Outpatient Clinic, as well as the patient wing in the new hospital. It will also allow us to cover the Emergency Department and operating rooms. Likewise, we need to hire two additional clinicians. This will bring our clinical team from five to seven, allowing for one of our Clinical Officers to attend an eighteen month program that will license him to perform more complicated surgical procedures, including life-saving caesarean sections.

Additional infrastructure needs will need to be addressed next year as well, including how best to expand our solar capabilities over time and secure a bigger generator as back-up power for the hospital. Tanzania continues to face intermittent power rationing, as well as outages and wide fluctuations in voltage. Our ultimate goal is to make solar power our primary source of electricity, with the electrical grid and generator as backup for a more stable and reliable hybrid power supply.

With the new lab up and running and new fully automated blood chemistry and CBC machines, FAME also looks forward to offering a much more robust and comprehensive battery of diagnostic tests in the year ahead. Thanks to the help of the American Society for Clinical Pathologists, we also now have a microscopy imaging system that will provide an unparalleled opportunity for FAME lab techs to learn from and collaborate with pathologists in the U.S. While this phase of the lab is still in its infancy, it will undoubtedly be a great help to our clinicians as they diagnose, treat and refer patients.

We have always endeavored to provide poor families with the same access to medical treatment as those with greater resources. With the income generated through a graduated fee structure for patients at FAME Medical, we were able to finance 37% of our Clinic operating costs this year. Donor support subsidized the additional 63% and made it possible for us to give reduced rate or free treatment to the poorest of the poor in our community. With the opening of the new hospital, our transition to 24-hour care, and a demographic made up of so many impoverished families, we anticipate needing even more donor help in the early stages of this expansion. FAME will be taking great leaps in 2012 with the long anticipated opening of the inpatient facility, operating alongside an already busy outpatient service. With the absolutely unwavering and faithful support of our donors, friends and partners, we have come quite a distance. We suspect 2012 is going to be an extraordinary year, and we look forward to sharing it with YOU.



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Of the several thousand patients attended at FAME Medical in 2011, many were children—children accompanied by devoted mothers and grandmothers,

fathers and uncles, brothers and sisters. Fourteen year old John is one such child. John suffers from *osteogenesis imperfecta* (a brittle bone disease). Living in an impoverished and very remote village, his mother has carried him everywhere his entire life. When a compassionate nurse named Grace brought him to FAME, his primary complaint was high fever and aches. Neither he, nor his mother, had any hope of their overall quality of life improving. But the universe had something else in mind for John. Treating him for malaria that day was the beginning of a whole new journey. Working closely with nurse Grace from John's village and Mwangaza, another organization focused on the needs of children with disabilities, we managed to provide John with a specialized off road wheelchair. Clearly a very bright and motivated young man, we worked with our partners to enroll him in a private school designed for children with disabilities for the very first time. John represents just one story of the hope, courage, and sheer tenacity we see in our patients each and every day—the human spirit that makes "lending a helping hand" so gratifying for FAME.

"Don't ask what the world needs. Ask what makes you come alive and go do it. Because what the world needs is people who have come alive." Howard Thurman



Volunteer Coordinator Jessica Coulter with FAME staff

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The FAME Volunteer Program saw another busy year. Caroline Epe, transitioned from Volunteer Coordinator to Director of Development. She now plays a central role in the day-to-day operations and long-term strategic planning of FAME Medical. Jessica Coulter stepped in as our new Volunteer Coordinator from February through September, after which Pamela McLendon took the helm. The Volunteer Coordinator position is a big job, involving a high volume of correspondence, scheduling, logistics, liaising with the government, handling paperwork and permits and trouble shooting any number of challenges and concerns that arise when people are living and working far from home. We appreciate the role Caroline, Jessica and Pam have each played in supporting our volunteers and making them feel comfortable and at home in a culture so different from their own. FAME hosted 27 volunteers in 2011; individuals who



Marjorie Boor doing an ultrasound

took time away from busy lives, jobs and families to share and exchange knowledge and expertise with our team in Tanzania. We saw relationships forged, camaraderie cultivated, resources shared, all in the interest of providing quality medical care and health education to our patients and community. YOU, our volunteers, helped to make 2011 a remarkable year. Our heartfelt thanks to ... Family Practitioner and Surgeon, Duane Koenig; Pediatrician, Rachel Shnider; Cardiologist, Reed Shnider; Neurologist, Michael Rubenstein; Physicians Assistants, Elizabeth Stoebe & Terry Grenchik; Family Practitioner, Courtney Nall; Pediatrician, Erin Kelleher; Pathologist, Concha de la Fuente; Internist, Katie Williams; Medical Students Chris Connelly & Larry Kelleher; Ultrasound Technician Marjorie Boor; Professor of Microbiology, Joyce Cuff; Nurse, Melissa Ngaida; Nursing Students, Erica Southern & Janet Bowen; Board Member, Jeanne Artress; IT Support, Ke Zhang & Russell Wong; Health Education & Logistics Support, Robert Lindeman, Phyllis Cronin, Judy Churchard, Grant Justin, David Kurtmen, Janet Hamilton, Emily Boone and Bill Cuff.

Our on-line volunteer consultants also made an enormous contribution in 2011. As more and more patients with increasingly complex problems come to FAME for medical care, our consultants have been an absolute God send. It never ceases to amaze us how quickly our on-line consultants (both medical and technical) respond to questions and concerns. Just knowing that expert advice and feedback is only an email away means more than you can know. Our heartfelt thanks, too, for their help this year: Cardiologists, Reed Shnider & Ulrich Winkler; Dermatologists, Kristin Cam, Michael Taylor and Jaggi Rao; Endocrinologists, Marie Nevin and Marjorie Luckey; Internal Medicine and Infectious Disease Specialists, Mark Eisenberg, Katie Williams and Cheryl Pikora; Obstetricians/Gynecologists, Katherine Reese and Ernani Sadural; Pediatricians, Sunena Chhabra, Meredith Fishbane, Dave Gordon, Ellen Hamburger, MaryEllen Shields, and Rachel Shnider; Psychiatrist, Justin Schechter; Neurologists, Michael Rubenstein & Sidney Bender; Physical Therapist, Brian Baas; Technical Consultants: Ke Zhang, Graham Pierce, Mike Keckler, and Dennis Hill.



"The only gift is a portion of thyself"





Dr. Michael Rubenstein

Dr. Katie Williams

Dr. Elizabeth Stoebe



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#### Fundraising 2011

Every time we find ourselves back in the US fundraising for our work in Tanzania, we are taken aback by the amazing generosity and hospitality of family, friends, supporters, communities, and complete strangers. 2011 was no different. Once again we arrived in the US in April, with some ambitious goals. Once again individuals and organizations, long-time FAME supporters and new, stepped up to the plate with great enthusiasm and generosity. We are grateful. We fully recognize the time, energy and resources it takes to organize and host fundraising events, and we deeply appreciate those of you who gave so much of yourselves to bring people together for FAME. We would like to thank the following individuals and organizations for hosting fundraising events and friend-raising gatherings for FAME this year: Tilo Ponder & Cris Blyth, Los Angeles, CA; Dr. Tom Heywood & Stephanie Wilde, San Diego, CA; Chris & Christina Madrigal, Peter & Katie Mondavi and Rudy & Rita von Strasser, Napa Valley, CA; Heather Lupa & Karen Pell, Kentfield, CA; Jeanne Artress, Redding, CA; Dr. Bob Milligan, Spokane, WA; Dr. Duane & Mrs. Vi Koenig, Beatrice, NE: Frank Lee & Carol Hall, Boston MA; Bob & Sarah Gould, Prouts Neck, ME; and Dr. Ulli and Gaby Winkler, Bielefeld, Germany.



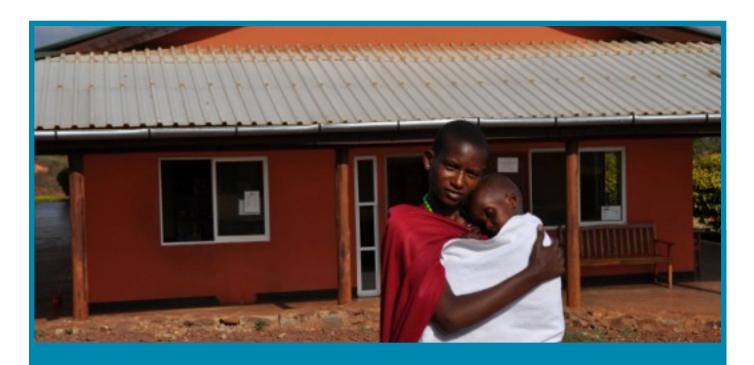
"I am only one, but still I am one. I cannot do everything, but still I can do something; And because I cannot do everything I will not refuse to do the something that I can

- Edward Everett Hale



We had some other very special visitors in 2011. Marshal Merriam, a long-time supporter and friend of FAME, spent ten days with us in Tanzania this year. It's not very often that we get to share our work in person with supporters who have been so instrumental in forwarding our mission here. It was an honor to have Marshal and his son, Hugh, with us.

Ken Oda, also visited us in Karatu this year, having organized a fundraising "Climb for FAME" that involved him tackling Mt. Kilimanjaro. Not only did Ken summit the highest mountain on the continent, he visited us just after the climb and looked good as new! We deeply appreciate Ken's efforts to raise money for FAME's work in Tanzania.



#### **DONORS, PARTNERS & FRIENDS IN 2011**

THANK YOU for your absolutely crucial funding in grants and donations this year. Your long-term support and commitment has quite literally changed the face of medical care in rural Tanzania. We could not ask for more dedicated partners in YOU.

Chauncey and Marion D. McCormick Foundation

Izumi Foundation

Andy Rockefeller

Seed the Dream Foundation

The Pinkerton Foundation

Rift Valley Children's Fund

Malaria No More Netherlands

Segal Family Foundation

Marshal F. Merriam

Dr. Duane & Mrs. Vi Koenig

**Bob & Sarah Gould** 

Prudence Hay

Medical Relief Foundation

Tanzanian Children's Fund

Dr. Axel & Mrs. Angelika Epe

Africa Dream Safaris

Our heartfelt thanks to each and everyone of our donors, 502 in all, who have consistently given of their resources (even during tough economic times) to help FAME turn a dream into a reality. Your generosity, your encouragement, your prayers demonstrate how the collective commitment of a few can bring about great change and make the world a better place.

A special thanks to Dr. Eugen Sandica and his team at the Department for Surgery of Congenital Heart Defects at the Heart & Diabetes Center NRW, Germany, for donating time and resources to provide a little girl with life saving heart surgery.

Finally.... a huge thank you to our supporters who have given "gifts in kind" this year, to help us better serve our patients. The medical supplies, medical and laboratory equipment, the many needs on our "wish list" you have fulfilled have been invaluable.

# Financial Report & Summary Statement of Operations

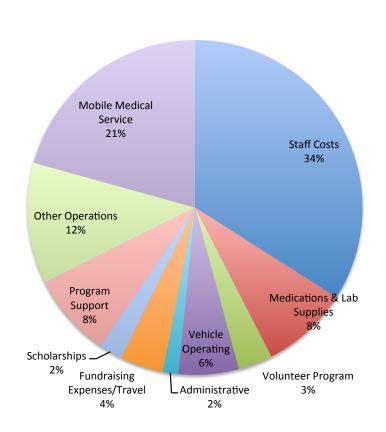
Revenues for the year ending December 31, 2011, totaled \$643,842. Of this, contributions of \$534,315 were received from 502 donors. Grant income totaled \$108,500 - and consisted of the following grants: the final installment for the Laboratory for \$12,500 from the Izumi Foundation; \$40,000 for general operating from the McCormick Family Foundation, the first of three equal installments over three years; \$51,000 for program support from the Izumi Foundation, the first of three installments over two years and \$5,000 for general operating from the Segal Foundation, the first of four equal installments over one year. Interest income for the year was \$1,027.

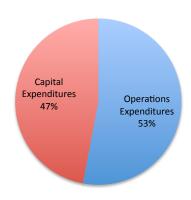
Total Expenditures for FAME (USA) for the year amounted to \$605,194 of which \$582,548 or 96.2% was applied to our primary partner and sister organization in Tanzania, also called FAME. FAME (Tanzania) was successful in fundraising as well, receiving \$48,383 in grant funding from Malaria No More, Netherlands and Rift Valley Children's Fund. In addition, individual contributions in the amount of \$6,235 were received. Patient fee income from the Outpatient Clinic increased from \$71,000 in the prior year to \$89,066 in 2011, an increase of 23%. The total amount that FAME (Tanzania) raised was \$143,684.

Operating expenditures for FAME (USA) and FAME (Tanzania) combined were \$413,326. Of this fundraising expenses and administrative costs were 5.7%, while staff costs, medications and supplies, vehicle operating costs, and mobile medical services combined accounted for 69% of expenses.

Total Capital expenditures for the year were \$366,845. This represents 47% of total expenditures and went towards continuing construction of the hospital, volunteer and staff housing, infrastructure development and investment in diagnostic equipment.

### **2011 Operating Expenditure**





#### **Financial Summary 2011**

#### **Statement of Activities**

Support and Revenues for FAME USA		Expenditures for FAME USA and FAME Tanzania combined		
Operations		Operations		
General Operations	111,799	Staff Costs	140,558	
Scholarships	1,500	Medications & Lab Supplies	34,959	
Volunteer Program	11,466	Volunteer Program	13,700	
Total Operations Support	124,765	Vehicle Operating	24,057	
	•	Administrative	6,160	
Unrestricted	468,250	Fundraising Expenses/Travel	17,256	
		Scholarships	9,334	
Capital Program		Program Support	33,481	
Laboratory Construction	12,500	Other Operations	48,291	
Infrastructure Development	19,300	Mobile Medical Service	85,528	413,326
Volunteer Housing Construction	17,000			
Dispensary Equipment	1,000			
Total Capital Program	49,800	Capital Program		
		Hospital Construction	210,730	
Interest Income	1,027	Laboratory Construction	22,195	
		Volunteer Housing Construction	3,812	
Total Income	643,842	Staff Housing Construction	6,939	
		Equipment Purchases	8,049	
Change in Net Assets	38,648	Vehicle	35,478	
		Furniture & Fixtures	27,979	
Statement of Financial Position		Infrastructure Development	51,663	366,845
Assets	482,831	Total Expenditures	780,171	
Total Assets	482,831		,	
15-1-1146				
Liabilities Current Liabilities				
	20,000			
Long Term liabilities  Total Liabilities	<b>20,000</b>	Cupport and Davanua for	EAME Tonzor	nio.
Total Liabilities	20,000	Support and Revenue for <b>FAME Tanzania</b> Patient fees 89,066		IIa
Net Assets		Mobile Clinic Grants	48,383	
Unrestricted Assets	412,074	Donations	6,235	143,684
Designated Funds	50,807	Donations	0,233	143,004
Designated Funds	50,007			
Total Net Assets/Fund Balances	462,881			
Total Liabilities & Net Assets	482,881			

### 2010 Board of Directors

Frank Artress, President Graham Pierce, Director Karatu, Tanzania Hughson, California

Susan Gustafson, Vice President Jack Paddon, Director Karatu, Tanzania Newcastle, California

Jeanne Artress, Sec./Treasurer Nancy Paddon, Director Redding, California Newcastle, California

The Foundation for African & Education (FAME) is a registered 501(c)(3) not for profit.

Please direct all inquiries and donations to:

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Credit card donations can also be made thru the Network for Good. For more information, go to our website at <a href="www.fameafrica.org">www.fameafrica.org</a>

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