

HOPE



ANNUAL
REPORT
2006

The Genesis Oncology Trust provides grants to support New Zealand-based initiatives that will lead to improvements in prevention, detection, diagnosis and treatment of cancer, and improvements in the palliative care of patients.

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Allow a Masters or Honours graduate student to undertake a maximum of three years' study towards a doctorate degree in a cancer-related field.

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IS IN THE HEART

HOPE

is the most important thing we give.

*The chance to live a better life, to see
and feel a sense of positivity.*



"I **HOPE** my studies result in more effective treatments for melanoma."

MS CLARE STONES

BSc (HONS)
PHD STUDENT, THE UNIVERSITY OF AUCKLAND

Metastatic melanoma is a serious disease of great significance to New Zealand because of its association with exposure to sunlight. Prevention is the key to ridding New Zealand of melanoma, but it is predicted that these cancers will continue to increase for the next 10-20 years and improved treatment of melanoma is a top priority. In order to develop new therapies for this disease we need a greater understanding of melanoma's "weak points" that might serve as targets for therapy. Once established melanoma is a fast growing cancer and very resistant to treatment. A number of genes including BRAF, NRAS and PTEN are mutated in a significant percentage of melanomas and these mutations are thought to be linked to the rapid proliferation of melanoma cells. Clare Stones is working on a project to take advantage of a unique resource of over 60 melanoma cell lines that

the University of Auckland has developed from tissue donated by melanoma patients. Clare will use these cell cultures to study the role of the BRAF, NRAS and PTEN genes in detail. The results will increase our understanding of melanoma biology and form a basis for the development of new therapies based on inhibition of mutant genes.

For the last two years Clare has been working as a research technician at the Auckland Cancer Society Research Centre in the University of Auckland. She has been developing melanoma and brain cancer cell lines from hospital tumour samples, growing them and sending the melanoma lines to Australia for vaccine research.

Clare enjoys her doctoral studies as the work has the potential to be of direct benefit to the patients whose cells she works with. After she completes her PhD Clare intends to undertake postdoctoral studies in cancer biology in either New Zealand or Australia and look for a permanent position in cancer research.

Transition probabilities

Cell Cycle control

k_1, k_2 transitions

phase
proliferation

cell
division

phase
& division



$$\frac{\partial G_1}{\partial t}$$

=

$$\frac{\partial S}{\partial t}$$

$$k_1, k_2, G_1(z, t)$$

$$-g \frac{\partial S}{\partial z}(z, t) + k_1 G_1$$

$$-bM(z, t) - \mu M$$



“My **HOPE** for this mathematical approach is to shed light on the effects of chemotherapy and radiotherapy.”

DR BRUCE BAGULEY

BSc, MSc (Hons), PhD
PROFESSOR AND CO-DIRECTOR
AUCKLAND CANCER SOCIETY RESEARCH CENTRE
THE UNIVERSITY OF AUCKLAND

The aim of this research is to improve cancer treatment through a better understanding of the way in which tumour cells behave following treatment with radiotherapy or chemotherapy. Recent results from the Auckland Cancer Society Research Centre strongly suggest that the time required for individual cancer cells to complete their cell division cycle is strongly related to their survival.

Professor Baguley and his research team of Britta Basse and Elaine Marshall will use

computer-based mathematical modelling techniques to determine how radiation and anti-cancer drugs change this cell cycle time and thereby determine treatment outcome.

They will initially use existing data for 15 carcinoma and melanoma cell lines derived from human cancers and will extend this as necessary.

The successful development of this model will help to provide an understanding of the behaviour of cancer cells and will ultimately lead to optimisation of the choice of treatments and schedule of administration to individual patients.



“My **HOPE** is for the patient’s journey to be as easy and stress free as possible.”

DR JULIE BROWN

BSc (HONS), PhD
SENIOR RESEARCH FELLOW
THE UNIVERSITY OF AUCKLAND

Colorectal cancer is the second most common cause of cancer death in New Zealand.

Reducing the cancer burden relies on strategies that span the continuum of care from prevention and early detection to diagnosis, staging, treatment, rehabilitation and supportive care. In addition to these separate aspects of the journey the timeliness of the individual patient’s journey is an important consideration and receives specific mention in the New Zealand Cancer Control Strategy action plan.

There are many factors that may affect how quickly patients with cancer seek and receive advice in the health sector. Variations in the time taken at different stages of this journey and the overall time to complete treatment

may influence how patients recover both physically and emotionally.

This study by Dr Julie Brown is designed firstly to gather information about the variations in the timeliness of the colorectal cancer patient’s journey and then to survey patients for ratings of their satisfaction with their care. The results will guide the conduct of a subsequent national study and perhaps from this a new prospective process to monitor quality of care.

This research project will primarily involve mapping the clinical journey of the patient, from the development of symptoms, to their presentation and passage through the health service throughout their stages of care. Within this mapping process, variations in the timeliness of different aspects of the journey, the overall journey itself and the different groups of people receiving care will be examined.



Guidelines for
Wound Management
in Palliative Care

“For me  is dealing with the human condition, bringing all I can to build self-esteem, physical well-being and for a better life to be lived.”

MR WAYNE NAYLOR

BSc (HONS)
POST GRAD CERT CLINICAL NURSING
CERT ONCOLOGICAL NURSING
DIP COMPREHENSIVE NURSING
CLINICAL NURSE EDUCATOR – ONCOLOGY/
HAEMATOLOGY, WELLINGTON BLOOD AND
CANCER CENTRE

Wound management can be a challenging area of patient care, given the continuing developments in our understanding of the process of wound healing, and the array of dressings and devices available for the treatment of wounds. While wound care in a healthy person can at times be difficult, the situation becomes considerably more complex in patients with chronic disease. Palliative care patients are particularly vulnerable and can develop complex wounds as a direct result of their disease, a complication of their disease or as a side effect of treatment.

Wayne Naylor is a recognised international expert in wound care for cancer and palliative care patients many of whom are at risk of developing wounds that are distressing and complicated to manage. In 2004 Wayne worked with an Auckland hospice to develop wound care guidelines. With the support of the Genesis Oncology Trust these guidelines have been published in book form and are now available for free distribution to cancer specialists and palliative care providers throughout New Zealand.

The Guidelines for Wound Management in Palliative Care offers information and advice on the main aspects of wound management from published sources, but with the additional benefit of interpretation and presentation by an experienced clinician into an easy to understand and follow guide. When utilised in practice, the Guidelines will help achieve improved patient care when quality of life is of most importance.

The Genesis Oncology Trust board members, pictured from left, are: as of 1 July 2006, Prof. John Gavin, Helen Glasgow, Murray Jackson, Maureen Shaddick, Dr Alan Gray and Betsy Marshall.



CHAIRMAN'S REPORT

It is with great pleasure that I present the Genesis Oncology Trust Annual Report for the financial year ending 30 June, 2006.

The Genesis Oncology Trust provides grants that support New Zealand-based initiatives that will lead to improvements in the prevention, detection, diagnosis or treatment of cancer, and improvements in the palliative care of cancer patients (hospice and home care).

A major development in cancer research is progress in immunotherapy which offers the hope of more effective treatment with fewer side effects. The Genesis Oncology Trust is proud to be associated with research into these new therapies. However, conventional treatment of cancer with surgery, chemotherapy and radiotherapy, is still the mainstay, and has been refined dramatically over the last few years. We are also pleased to be supporting research and education in this area.

Since its inception, the Genesis Oncology Trust has conducted an annual competitive grant round. The number, diversity and calibre of grant applications

received continued to be of a high standard. This year we have entered our fifth annual grant round with results being announced in December 2006. Once again up to \$500,000 will be distributed to successful applicants.

The grants awarded cover postgraduate scholarships, professional development awards, research project grants and special purpose grants. To date the Genesis Oncology Trust has supported:

- Six postgraduate students undertaking PhDs;
- 18 research projects in progress or completed;
- 23 surgeons, doctors, nurses and technicians who are receiving advanced, specialist training in New Zealand and overseas; and
- 11 special purpose projects on cancer.

The Genesis Oncology Trust has recognised the need to further invest in cancer research and education and with the generous support of many customers, we continue to grow the capital invested to carry out this important work.

The work of the Trust has been considerably enhanced by the contribution of Genesis Energy customers.

One of our fund raising initiatives has been to introduce the Genesis Oncology Trust 'Donate \$1 via your energy bill', aimed to raise awareness and to generate more investment funds for the Trust. This has proved to be successful beyond our expectations. At this stage, Genesis Energy customers have responded in their tens of thousands, equating to a considerable increase in the invested funds. Some customers have asked if they can increase their monthly donation, so we now have elected to give them the option of donating either \$1 or \$2 via their energy bill. The work of the Trust has been considerably enhanced by the contribution of Genesis Energy customers.

In addition to contributions from our fund raising initiatives, the Genesis Oncology Trust is a registered charity and welcomes individual donations to this worthwhile cause. I am grateful to those individual donors, your support is much appreciated.

The work of the Trust has been made easier by the dedication of the Trust Administrator, Karen King and Programme Manager, Dr Douglas Ormrod. The grant evaluation process would not be possible without

the help of the cancer care and research experts who generously give their time to the Grant Assessment Committee and I would like to thank Drs Bruce Baguley, Michael Findlay, Graham Stevens, Gail Tripp and Ms Jan Nichols for their efforts in this regard.

Finally, I would like to extend my thanks and appreciation to the Genesis Oncology Trust board - Maureen Shaddick (Deputy Chairperson), John Gavin, Alan Gray, Betsy Marshall and Helen Glasgow. Together we look forward to another year of continued growth and support in helping the fight against cancer.



Murray Jackson
Chairman
GENESIS ONCOLOGY TRUST

Not to be forgotten are the many one-off donors who have generously contributed to the Genesis Oncology Trust.

A BIG THANK-YOU TO ALL OUR DONORS

The response to the Genesis Energy 'donate \$1 via your energy bill' campaign has been truly overwhelming and the Genesis Oncology Trust is most appreciative of the generosity of Genesis Energy's customers.

Not to be forgotten are the many one-off donors who have generously contributed to the Genesis Oncology Trust. The number of individual donations continues to grow and forms an important part of the Trust's income. Each dollar is significant in helping the fight against cancer.

This year the Trust completed its fourth annual grant round.

ADMINISTRATOR'S REPORT

This year the trust completed its fourth annual grant round in which a total of 43 applications were received requesting approximately \$2 million. Following a rigorous review process, \$587,377 was allocated to 17 successful applicants.

For its fifth annual grant round, the Trust has approved the distribution of up to \$500,000. These grants will be awarded during December 2006. There are four categories of awards:

POSTGRADUATE SCHOLARSHIPS

Allow a Masters or Honours graduate student to undertake a maximum of three years study towards a doctorate degree in a cancer-related field.

PROFESSIONAL DEVELOPMENT AWARDS

Allow established cancer researchers and cancer care professionals to travel and participate in advanced training programmes or scientific meetings that will enhance their professional competence or extend their range of skills.

RESEARCH PROJECT GRANTS

Provide contributions toward hypothesis-based clinical or biomedical research projects in the fields of cancer prevention, cancer treatment or the delivery of palliative care.

SPECIAL PURPOSE GRANTS

Provide contributions toward research and development, or activities that will improve the quality of cancer care in New Zealand.

The Genesis Oncology Trust has continued with a series of stakeholder presentations at each of the six oncology centres in New Zealand. This year Hamilton was covered, with the remainder scheduled to take place over the next year. The presentations aim to promote the Trust and educate the medical and research fraternity about the annual grant round process, and also offers the opportunity for a reciprocal discussion as to possible project funding.

A description of the projects initiated, or those which have been completed by successful grant round applicants, have been published in medical journals and mainstream media.

Karen King
Trust Administrator
GENESIS ONCOLOGY TRUST

SUCCESSFUL RECIPIENTS FROM THE 2005 ANNUAL GRANT ROUND

We recently completed our fourth annual grant round, where we distributed a total of \$587,377 to 17 clinicians and scientists. This summary of the grants awarded shows the diverse range of projects we have been able to fund with your help.

POST GRADUATE SCHOLARSHIPS

Mr Vaughn Feisst

(WESTPAC INSTITUTIONAL BANK/GENESIS ONCOLOGY TRUST
POSTGRADUATE SCHOLAR)

PHD STUDENT: THE UNIVERSITY OF AUCKLAND

The skin cancer melanoma develops when the cells that form pigment in the skin, the melanocytes, become cancerous. This project will develop new techniques to grow human melanocytes, both from healthy human skin and also from excised moles. Studying how these cells behave in the laboratory will suggest new ways to detect pre-cancerous melanoma, and new targets for melanoma prevention and therapy.

Ms Clare Stones

PHD STUDENT: THE UNIVERSITY OF AUCKLAND

Clare Stones is working on a project to take advantage of a unique resource of over 60 melanoma cell lines that the University of Auckland has developed from tissue donated by melanoma patients. The results will increase our understanding of melanoma biology and form a basis for the development of new therapies. See page 3 profile.

PROFESSIONAL DEVELOPMENT AWARDS

Ms Carla Arkless

COMMUNITY PALLIATIVE CARE NURSE: HOSPICE SOUTHLAND

To undertake post-graduate studies in Applied Pharmacology for Nursing Practice at Otago Polytechnic.

Ms Jeanette Beardsmore

STAFF RADIATION THERAPIST: DUNEDIN HOSPITAL

Attending the 9th International Electronic Portal Imaging Meeting in Melbourne.

Ms Sarah Gunningham

CHRISTCHURCH SCHOOL OF MEDICINE AND HEALTH SCIENCE

Attending the 97th annual meeting of the American Association of Cancer Research in Washington DC.

Dr Wayne Nicholls

PAEDIATRIC ONCOLOGIST: STARSHIP HOSPITAL, AUCKLAND

Attending the Teenage Cancer Trust 4th International Conference on Cancer and the Adolescent in London.

RESEARCH PROJECTS

Dr Michael Berridge

MALAGHAN INSTITUTE OF MEDICAL RESEARCH

A new cancer drug target in the outer membrane of tumour cells has been identified and this research will investigate the effects of known and novel drugs on the growth of tumours in the laboratory. The approach being taken, which has not been previously attempted, will block cancer cell metabolism at the level of the cell membrane. This has the potential to eliminate the many undesirable side effects associated with most current anti-cancer drugs.

Dr Julie Brown

THE BRUCE BLUE AWARD

THE UNIVERSITY OF AUCKLAND

Dr Julie Brown is studying the variations in the timeliness of the colorectal cancer patient's journey and surveying patients on their satisfaction with their care. The results will guide the conduct of a subsequent national study and perhaps from this a new prospective process to monitor quality of care. See Page 7 profile.

Dr Bruce Baguley

THE UNIVERSITY OF AUCKLAND

The aim of this research is to improve cancer treatment through a better understanding of the way in which tumour cells grow in human cancers following treatment with radiotherapy or chemotherapy. Recent results from our laboratory strongly suggest that the time required for individual cancer cells to complete their cell division cycle is strongly related to survival. We will use mathematical techniques to determine how radiation and anti-cancer drugs change this cell cycle time and thereby determine treatment outcome. See Page 5 profile.

Professor Mike Findlay

PROFESSOR OF ONCOLOGY: THE UNIVERSITY OF AUCKLAND

If breast cancer is detected at an early stage, it is usually possible to treat the cancer with a combination of surgery, followed by radiation treatment. This enables the woman to retain her breast. However, if the radiation treatment is delayed, it may lose some of its effectiveness and the cancer may re-grow. This project will look at the cancer recurrences in New Zealand women who had delays in treatment due to staffing shortages in New Zealand in the past few years. If this demonstrates an increased risk of recurrence, this will help resource planning in the future.

SPECIAL PROJECT GRANTS

Professor Bill Denny

THE UNIVERSITY OF AUCKLAND

International guest speaker at Auckland Cancer Society Research Centre 50th Anniversary Symposium.

Dr Richard Isaacs

MEDICAL ONCOLOGIST: PALMERSTON NORTH HOSPITAL

To enable the MidCentral District Health Board's Regional Cancer Treatment Service (RCTS) to employ a Clinical Trials Research Nurse to improve access to clinical trials. In a time of restricted funding for new therapies, the availability of clinical trials enables greater patient access to potentially better treatments.

Ms Ann Martin

CHIEF EXECUTIVE OFFICER: HOSPICE NEW ZEALAND

The palliative care lecture series, designed and implemented by Hospice New Zealand, is broadcast monthly into more than 45 sites around the country.

Mr Wayne Naylor

WELLINGTON BLOOD & CANCER CENTRE

Wayne Naylor is an expert in wound care for cancer and palliative care patients. In 2004 Wayne worked with an Auckland hospice to develop wound care guidelines. With the support of the Genesis Oncology Trust these guidelines have been published in book form. See Page 9 profile.

Dr Graham Stevens

CONSULTANT RADIATION ONCOLOGIST: AUCKLAND CITY HOSPITAL

The Australian guidelines for the treatment of melanoma are being updated currently and New Zealand has been offered an opportunity to join this project. This Genesis Oncology Trust grant will enable approximately 20 New Zealand clinicians to join and contribute to the work groups, to create the first "Trans Tasman" guidelines for the treatment of cancer.

Ms Lauren Wilkinson

NEW ZEALAND INSTITUTE OF MEDICAL RADIATION TECHNOLOGY

Guest international speaker at the 2006 NZIMRT national conference.

FINANCIAL STATEMENTS

for the year ended 30 June 2006

STATEMENT OF FINANCIAL PERFORMANCE

	NOTES	2006	2005
Revenue			
Interest Received	2	472,631	437,029
Sponsorship Received – Genesis Power Limited	3	200,000	200,000
Camellia Sales		28,794	-
Trust Expenditure Reimbursed		91,859	61,127
Donations Received – General		431,860	76,220
Donations Received – Genesis Power Limited	4	1,000,000	1,067,458
TOTAL REVENUE		2,225,144	1,841,834
Operating Expenses			
Advertising		39,948	37,282
Annual Report Costs		25,851	13,416
Audit Fees		8,500	1,500
Bank Transaction Charges		357	172
Camellia Purchases		23,679	-
Consultants		38,669	36,720
Depreciation		400	400
General Expenses		14,863	1,681
Printing		1,609	4,341
Promotions		-	2,265
Travel		3,604	2,098
Website Costs		1,454	1,355
		158,934	101,230
Grants			
Grants Allocated		587,377	439,586
TOTAL EXPENSES		746,311	540,816
RESIDUAL INCOME CURRENT YEAR		1,478,833	1,301,018

STATEMENT OF MOVEMENTS IN EQUITY

	NOTES	2006	2005
Opening Equity		7,041,309	5,740,291
Residual Income Current Year		1,478,833	1,301,018
EQUITY AT END OF YEAR		8,520,142	7,041,309

FINANCIAL STATEMENTS

for the year ended 30 June 2006

STATEMENT OF FINANCIAL POSITION

	NOTES	2006	2005
Accumulated Funds			
Opening Equity		7,041,309	5,740,291
Residual Income Current Year		1,478,833	1,301,018
TOTAL ACCUMULATED FUNDS		8,520,142	7,041,309
Represented By:			
Current Assets			
Westpac Current Account		1,762,562	831,385
Accounts Receivable		1,044,514	260,465
Accrued Interest on Investment		110,204	116,098
GST Refunds Due		-	15,007
TOTAL CURRENT ASSETS		2,917,280	1,222,955
Non-current Assets			
Investments	5	6,301,091	6,341,189
Property, Plant and Equipment			
Website		1,600	1,600
Less: Accum. Depreciation		(1,276)	(876)
TOTAL PROPERTY, PLANT AND EQUIPMENT		324	724
TOTAL NON-CURRENT ASSETS		6,301,415	6,341,913
TOTAL ASSETS		9,218,695	7,564,868
Current Liabilities			
Accounts Payable		53,559	61,595
GST Payable		11,458	-
Term Liabilities			
Provision for Grants		633,536	461,964
TOTAL LIABILITIES		698,553	523,559
NET ASSETS		8,520,142	7,041,309



Murray Jackson
22 September 2006



Maureen Shaddick
22 September 2006

NOTES TO THE FINANCIAL STATEMENTS

for the year ended 30 June 2006

1. STATEMENT OF ACCOUNTING POLICIES

These Financial Statements are presented in accordance with the Generally Accepted Accounting Practice.

A. GENERAL ACCOUNTING POLICIES

The general accounting policies recognised as appropriate for the measurement and reporting of results, and financial position, under the historical cost method have been followed in the preparation of these financial statements.

The Trust promotes the charitable purpose of cancer research and provides assistance to cancer healthcare providers.

B. PARTICULAR ACCOUNTING POLICIES

The following particular accounting policies, which significantly affect the measurement of residual income and financial position, have been applied.

DIFFERENTIAL REPORTING

The Trust qualifies for differential reporting because it is not large and is not publicly accountable.

The Trust has taken advantage of all differential reporting exemptions with the exception of FRS 19 Accounting for GST.

INCOME TAX

The Trust has charitable status under the income tax act and is exempt from income tax.

ACCOUNTS RECEIVABLE

Accounts receivable are stated at estimated realisable value. Amounts not considered recoverable are written off when identified as such.

DISTINCTION BETWEEN CAPITAL AND REVENUE

Capital expenditure is defined as all expenditure on the purchase or creation of new property, plant and equipment, and any expenditure, which results in a significant improvement to the original functionality of an existing asset.

Revenue expenditure is defined as expenditure that restores an asset to its original operating capability and all expenditure incurred in maintaining assets used in operating the business.

DEPRECIATION

Depreciation of property, plant and equipment, other than freehold land, is charged on a straight line basis so as to apportion the cost of the assets less their estimated residual value over their expected remaining useful lives.

Estimated useful life – software: four years.

INVESTMENTS

Investments are recorded at cost. Any premium or discount to maturity value is recognised as interest expense/income over the remaining period to maturity.

Investment income is accounted for on an accrual basis.

GRANTS AND DISTRIBUTIONS

Grants are included in the Statement of Financial Performance when approved by Trustees.

DONATIONS RECEIVED

Donations are recognised on a cash receipts basis, with the exception of the monthly \$1 donations from Genesis Energy customer accounts. This is accrued at year end.

SPONSORSHIP RECEIVED

Sponsorship funding is recognised on an accruals basis as per sponsorship agreements.

NOTES TO THE FINANCIAL STATEMENTS

for the year ended 30 June 2006

GOODS AND SERVICES TAX

All revenue and expense transactions are recorded net of GST. Where applicable, all assets and liabilities have been stated net of GST with the exception of receivables and payables which are stated inclusive of GST.

FINANCIAL INSTRUMENTS

All financial instruments are recognised in the statement of financial position. The Trust has not entered into any off-balance sheet instruments. The fair value of the financial instruments represents the carrying value of these items as recorded in the financial statements. The maximum exposure to credit risk is represented by the carrying value of each financial asset in the Statement of Financial Position.

C. CHANGES IN ACCOUNTING POLICIES

There have been no changes to accounting policies throughout the year.

2. INTEREST RECEIVED

	2006	2005
Westpac Current Account	85,031	48,004
Investment Portfolio	387,588	389,010
Interest on GST Refunds	12	15
	472,631	437,029

The Westpac current account interest rate has ranged between 6.41 – 6.91%.

Investment portfolio coupon interest rates ranged from 5.5 -8.0%.

3. SPONSORSHIP REVENUE

	2006	2005
Genesis Power Limited	200,000	200,000

As per the Genesis Power Limited sponsorship agreement with the Trust, the annual amount of sponsorship for the year ended 30 June 2006 is \$200,000 (2005: \$200,000).

4. RELATED PARTIES

In addition to the sponsorship transaction above, Genesis Power Limited facilitates its customers making donations via their monthly energy accounts. For the year ended 30 June 2005, Genesis Power Limited had agreed to match its customers' donations up to a maximum of \$500,000. There was no matching donation for the year ended 30 June 2006 (2005: \$67,458). Genesis Power Limited also donated an additional \$1,000,000 this year (2005: \$1,000,000).

Genesis Power Limited provides the Trust with accounting and administrative support free of charge.

Murray Egerton Jackson is the Chief Executive of Genesis Power Limited and the Chairman of the Trust.

Maureen Grant Shaddick is the General Counsel and Company Secretary of Genesis Power Limited and is the Deputy Chair of the Trust.

5. INVESTMENTS

All of the investments held by the Trust are publicly traded bonds. The total carrying value is \$6,301,091 (2005: \$6,341,189), with a face value of \$6,241,000 (2005: \$6,241,000). Maturity date of the bonds range from August 2006 to March 2013. The coupon rates range from 6.25% to 8.00%.

AUDIT REPORT

TO THE TRUSTEES OF GENESIS ONCOLOGY TRUST

We have audited the financial statements on pages 16 to 19. The financial statements provide information about the past financial performance of Genesis Oncology Trust and its financial position as at 30 June 2006. This information is stated in accordance with the accounting policies set out on page 18 and 19.

TRUSTEES RESPONSIBILITIES

The Trustees are responsible for the preparation, in accordance with New Zealand law and generally accepted accounting practice, of financial statements which fairly reflect the financial position of Genesis Oncology Trust as at 30 June 2006 and the results of operations for the year ended on that date.

AUDITORS' RESPONSIBILITIES

It is our responsibility to express to you an independent opinion on the financial statements presented by the Trustees.

BASIS OF OPINION

An audit includes examining, on a test basis, evidence relevant to the amounts and disclosures in the financial statements. It also includes assessing:

- the significant estimates and judgements made by the Trustees in the preparation of the financial statements, and
- whether the accounting policies are appropriate to the Trust's circumstances, consistently applied and adequately disclosed.

We conducted our audit in accordance with New Zealand Auditing Standards. We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to obtain reasonable assurance that the financial statements are free from material misstatements, whether caused by fraud or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

Other than in our capacity as auditor, we have no relationship with or interests in Genesis Oncology Trust.

UNQUALIFIED OPINION

We have obtained all the information and explanations that we have required.

In our opinion the financial statements on pages 16 to 19, fairly reflect the financial position of Genesis Oncology Trust as at 30 June 2006 and the results of its operations for the year ended on that date.

Our audit was completed on 11 October 2006 and our unqualified opinion is expressed as at that date.



HAMILTON, NEW ZEALAND
Chartered Accountants

Deloitte.

DIRECTORY

GENESIS ONCOLOGY TRUST

602 Great South Road
PO Box 17188
Greenlane
Auckland

TRUST ADMINISTRATOR

Karen King
Phone: 09 580 4781
Fax: 09 580 4898
Email: karen.king@genesisenergy.co.nz

FOR INFORMATION ABOUT THE GRANT PROCESS, PLEASE VISIT OUR WEBSITE:

www.genesisoncology.org.nz

OR CONTACT:

Dr Douglas Ormrod
Programme Manager
Genesis Oncology Trust
PO Box 17188
Greenlane
Auckland
Email: douglas.ormrod@genesisenergy.co.nz

WEBSITES:

www.genesisoncology.org.nz
www.genesisenergy.co.nz

DATE OF DEED

17 May 2002

REGISTERED OFFICE:

602 Great South Road
Greenlane
Auckland

TRUSTEES (at 1 July 2006)

Murray Egerton Jackson
John Bevan Gavin
Maureen Grant Shaddick
Alan Gray
Betsy Marshall
Helen Glasgow

BANKERS

Westpac
627 Great South Road
Manukau

SOLICITORS

Taylor Grant Tesiram
PO Box 4039
Auckland

AUDITORS

Deloitte.
PO Box 17
Hamilton

**GENESIS ONCOLOGY TRUST'S
CHARITABLE PURPOSE:**

- A** To promote research in New Zealand into the detection, diagnosis and treatment of all forms of cancer and to provide associated training for health professionals;
- B** To promote the provision of palliative care;
- C** To assist hospitals, and associated health care providers with the provision of facilities in relation to oncology;
- D** To promote such other charitable purposes as the trustees may decide.

