

Paul's and Jean's first school photographs

Annual Report & Accounts 2004

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Fighting Britain's biggest child killer disease

CHILDREN with LEUKAEMIA

Registered Charity No. 298405. Inaugurated in 1988 by Diana, Princess of Wales in memory of Jean and Paul O'Gorman

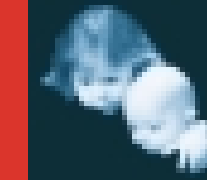


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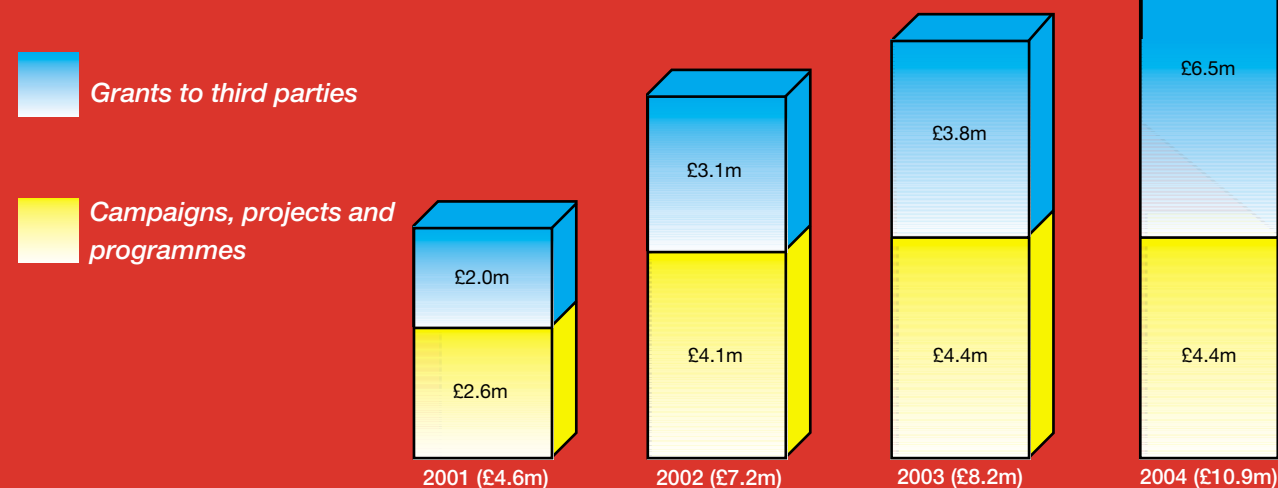
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	PAGE
Foreword by the Chairman	3
Information about the Charity	4
How we began	5
What is leukaemia?	6
First international conference on the causes and prevention of childhood leukaemia	8
Developing young talent in leukaemia research	10
Focus on research:	12
Radiation and childhood leukaemia	12
Stratification of chemotherapy based on levels of minimal residual disease	14
Understanding infant leukaemia	15
Paul O’Gorman centres of excellence in childhood leukaemia research	16
Institute of Child Health, Great Ormond Street Hospital, London	16
Northern Institute for Cancer Research, University of Newcastle upon Tyne	16
Paul O’Gorman Leukaemia Research Centre, University of Glasgow	16
Institute of Cancer Sciences, University College London	17
Relief of suffering:	18
Paul O’Gorman Patient Hotel, Great Ormond Street Hospital	18
Paul O’Gorman House, Royal Free Hospital	19
Lifeline	19
Paul O’Gorman Respite Centre, Green Hedges	19
CHASE Hospice Care	19
The 17th Amazing Great Children’s Party	20
Raising awareness	21
The Third Children’s Marathon Challenge	22
Where does the money come from?	23
Running events	23
Special events	24
Appeals	26
Trustees’ policies and responsibilities	27
Independent auditor’s report	28
Statement of Financial Activities	29
Balance sheet	30
Financial activities 2004	31
Cash flow statement	32
Notes to the accounts	32-35

Charitable expenditure exceeded £10 million for the first time in 2004



2004 has been a year of growth and modernisation for CHILDREN with LEUKAEMIA. What began as a small memorial charity back in 1988 is now handling more than 1,000 donations on an average day. This enabled our annual charitable expenditure to pass the £10 million mark for the very first time in 2004. The following pages describe how these funds were raised and spent.

As trustees, we face the perennial difficulty of balancing the needs of children who need our help now, in the form of better treatment and support, with the need to unravel the causes of childhood leukaemia and so protect future generations of children. As you read this report I hope that you will feel that we have got the balance right.

The year saw a major switch in our research funding portfolio – funding more research and fewer buildings. We continued to invest in the provision of welfare services and also to carry on our work to increase public understanding of the nature and

extent of the problem of childhood leukaemia.

Our commitment to causation and prevention was reinforced by our successful conference on the causes and prevention of childhood leukaemia – the first ever international conference on this theme. During the conference we launched a new £1 million fund for research into the causes of childhood leukaemia. The first tranche of money was awarded as Paul O’Gorman Prizes to promising young researchers presenting their work at the conference. The remainder is to be distributed as project grants to researchers who successfully apply for funding.

On the welfare front, 2004 saw the opening of the Paul O’Gorman Patient Hotel at Great Ormond Street Hospital, taking the number of Paul O’Gorman welfare facilities to four. The grant of Green Hedges and the completion of transfer of Paul O’Gorman House to the Royal Free Hospital close a chapter on us operating this kind of facility ourselves.

The continued growth in our income and expenditure has demanded a strengthening of our financial management and this has been achieved with the appointment of Ros Lewis as our first Head of Finance, the engagement of Sayer Vincent as internal auditors and the selection of Deloitte to take on the increasingly specialist role of external auditor with effect from 2005. The Charity has also been incorporated to Limited Company status to achieve modernisation of our charitable objectives and governance structure and opening the way to widening the trustee base in 2005.

As ever, we are indebted to our friends, staff, volunteers and supporters whose continuing dedication has made possible the vital work described over the coming pages. On behalf of the trustees I would like to record our gratitude for their help in honouring the memory of Jean and Paul through the life-saving work of CHILDREN with LEUKAEMIA.

Information about the Charity

CHILDREN with LEUKAEMIA is the registered working name of the Foundation for Children with Leukaemia (formerly The Paul O'Gorman Foundation for Children with Leukaemia) which was constituted as a charity under a Trust Deed dated 4 January 1988, in memory of Paul O'Gorman who died on 6 February 1987 and his sister Jean, who died on 3 November 1987. The Charity was inaugurated by Diana, Princess of Wales on 12 January 1988 at Mill Hill County High School where Paul had been a pupil.

The objects of CHILDREN with LEUKAEMIA during the year of 2004 were:

- **The relief of children suffering from leukaemia.**
- **The promotion of research into the causes of childhood leukaemia.**
- **The promotion of research into the treatment and cure of childhood leukaemia.**

Details of the Charity's activities are available from the principal office of the Charity:
51 Great Ormond Street
London WC1N 3JQ

Tel: 020 7404 0808
Fax: 020 7404 3666
email: info@leukaemia.org
www.leukaemia.org

The current serving Trustees who all served for the whole of the year are:

Eddie O'Gorman (Chairman)
The Earl Cadogan DL
The Lord Carlisle of Bucklow PC, QC, DL
Marion O'Gorman

Registered Charity Number:
298405

Solicitors:
Nabarro Nathanson
Lacon House, Theobald's Road
London WC1X 8RW

Auditors:
UHY Hacker Young
St Alphage House, 2 Fore Street
London EC2Y 5DH

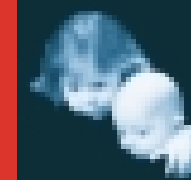
Bankers:
National Westminster Bank Plc
30 North Audley Street
London W1A 4UQ

Developments since year end
On 1 January 2005, the Foundation for Children with Leukaemia transferred its assets and operations to Children with Leukaemia, a company limited by guarantee with Company number 4960054. The registered charity number for this new company remains the same as for the Foundation.

The objects of the new company are:

- **The relief of children suffering with leukaemia.**
- **To raise public awareness and knowledge in matters relating to childhood leukaemia.**
- **The promotion of research into the causes, alleviation, prevention, treatment and cure of childhood leukaemia and to publish the results of such research.**

How we began



In February 1987 leukaemia killed Paul O'Gorman. He was fourteen years old. The O'Gormans' agony did not stop there. Just nine months later cancer also killed Paul's sister, Jean.

Always a caring boy, Paul had made his parents promise to help other children with leukaemia and within weeks of his death they started fundraising.

In November 1987, just days after Jean's death, they met Diana, Princess of Wales. Deeply moved by the double tragedy, she personally helped start this

charity which she inaugurated in January 1988.

The Paul O'Gorman Foundation for Children with Leukaemia is today simply called CHILDREN with LEUKAEMIA but Paul's spirit continues to inspire our work.

What began as a small memorial charity is now Britain's leading charity dedicated exclusively to the conquest of childhood leukaemia through pioneering research, new treatment and support of leukaemic children and their families.



Leukaemia is a cancer affecting the blood-forming cells in bone marrow. It is the most common childhood cancer and it kills more children than any other disease in the UK.

In leukaemia, normal control mechanisms in the blood break down and the bone marrow starts to produce large numbers of abnormal white blood cells, disrupting normal production of blood cells.

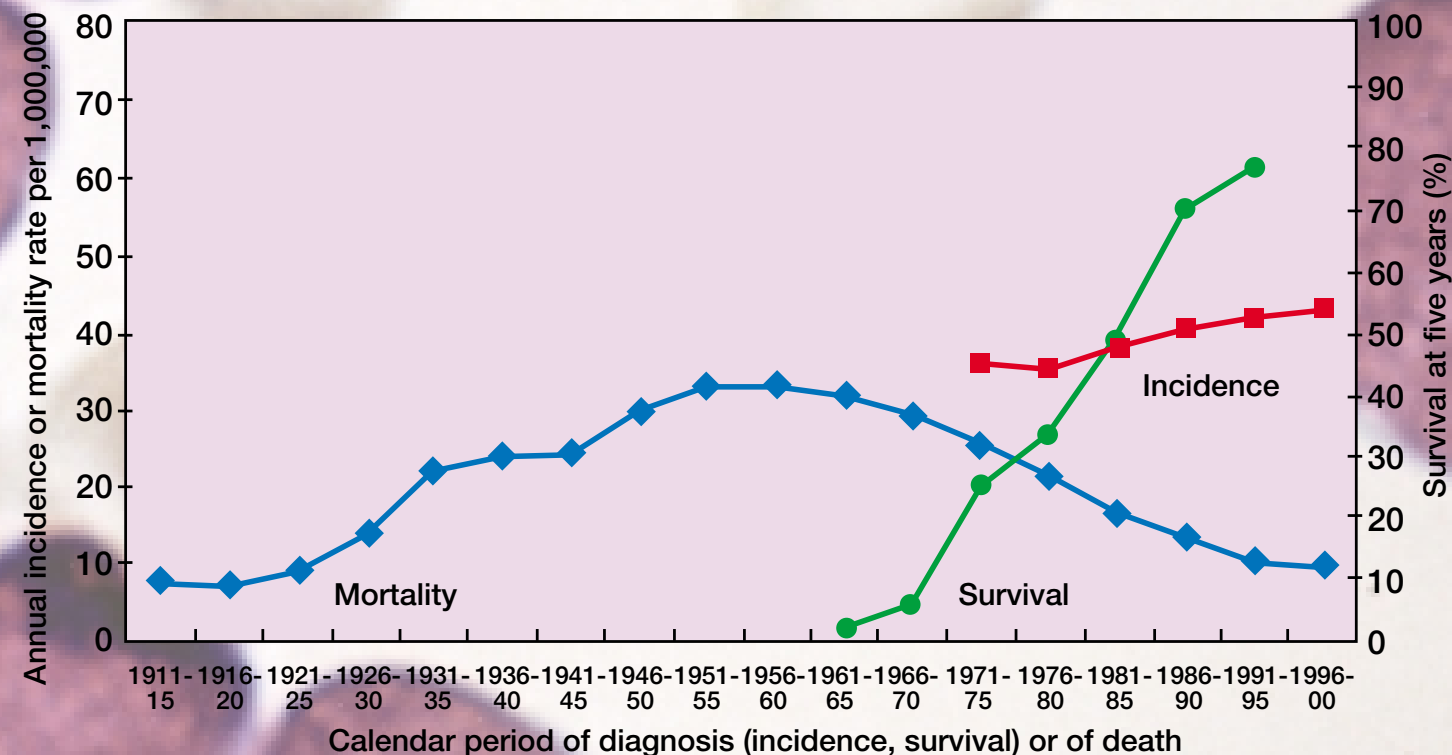
There are two main types of leukaemia in children - acute lymphoblastic leukaemia (ALL) and acute myeloid leukaemia (AML). These acute forms of leukaemia come on quickly and progress rapidly if left untreated. ALL accounts for 85 per cent of all cases of childhood leukaemia. It is the only form of leukaemia – and one of the few forms of cancer – that is more common in children than in adults, occurring most commonly in children between the ages of two and four years. Without effective treatment, both ALL and AML are rapidly fatal – only 40 years ago the survival rate was less than five per cent. Thankfully, today's children have a much brighter outlook since remarkable breakthroughs in treatment mean that three in four children now survive.

However over the same period in which the number of deaths from childhood leukaemia has been falling, the number of new cases diagnosed each year has been rising. Children under the age of five years are worst affected - over half of all childhood leukaemias occurred in this age group in the period 1996 - 2000.

The reasons for the increasing incidence remain unclear. Despite the breakthroughs that have been achieved in the treatment of the disease, we still know very little about what causes childhood leukaemia. This is now one of the main priorities of our research programme.

“...only 40 years ago the survival rate was less than five per cent. Thankfully, today's children have a much brighter outlook since remarkable breakthroughs in treatment mean that three in four children now survive.”

Leukaemia incidence, mortality and survival trends, England and Wales, 1911 to 2000.



From presentation by Professor Michel Coleman and Anjali Shah, CHILDREN with LEUKAEMIA International Scientific Conference, September 2004.





The increasing incidence of childhood leukaemia, combined with emerging concerns about the long-term effects of leukaemia treatments, made prevention a top priority for us in 2004.

In September we hosted the first ever international conference focusing on the causes of childhood leukaemia. The conference attracted delegates and speakers from leading research centres around the world. Over five days, these scientists shared their findings and exchanged their expert views, all with one purpose in mind – the prevention of childhood leukaemia.

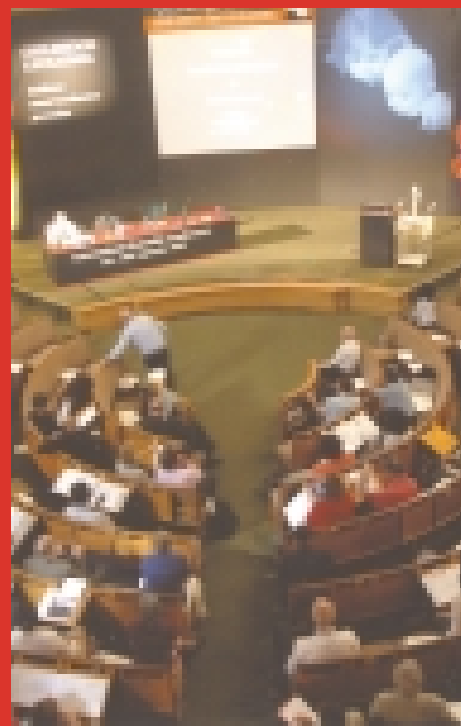
The presentations included some ground-breaking research, with topics ranging from the role of viruses and infections in childhood leukaemia to the effects of ionising and non-ionising radiation, 'light at night' and melatonin suppression, air pollution and diet. By bringing together scientists from a range of disciplines and from all over the world, the conference stimulated a great deal of discussion and debate, generating new ideas which we hope will flow through into the research setting.

The conference generated extensive broadsheet coverage as well as national television and

radio exposure, with diverse stories covering the range of topics presented during the conference. This helped to raise awareness of the need for further research into the causes of childhood leukaemia and boosted awareness of the charity's vital work to a new high where one in seven adults in Great Britain had heard of our work.

To increase the pace of research, we announced new funding of £1 million for projects investigating the causes of childhood leukaemia. We received applications totalling almost £5 million and as we enter 2005 we face the difficult task of deciding which projects are most worthy of support. We must also raise the £1 million needed to pay for the selected projects.

We are indebted to Professor Denis Henshaw, who chaired the Conference Scientific Committee, and to all members of the Committee for their hard work and dedication in ensuring the success of our first ever conference.



Conference Scientific Committee:

Professor Denis Henshaw,
University of Bristol
(Conference Chairman)
Professor Bryn Bridges,
University of Sussex
Professor Michel Coleman,
London School of Hygiene and Tropical Medicine
Dr Thomas Erren,
University of Cologne
Professor Dudley Goodhead,
MRC Harwell
Professor Roy Harrison,
University of Birmingham
Alasdair Philips, *Powerwatch*





One of our aims has always been to attract young talent into leukaemia research, to nurture in tomorrow's top scientists an interest and enthusiasm for solving some of the complexities of childhood leukaemia. Previously we have funded PhD students at both the University of Bristol and the London School of Hygiene and Tropical Medicine.

To encourage the participation of young scientists in our conference we announced our intention to award prizes for the best 'poster presentations' presented by scientists under the age of 30 years. Members of the judging panel were impressed with all 17 entries but the six Paul O'Gorman Poster Prizes were awarded to the following authors:

• **Elizabeth Ainsbury, 23 years old**
University of Bristol
 "An investigation into polarisation as a possible metric with regard to human exposure to ELF magnetic fields from appliances within the home"

• **Donna Hammal, 29 years old**
University of Newcastle upon Tyne
 "Paternal occupation as a risk factor for leukaemia and non-Hodgkin's lymphoma in children and young adults. A study from the north of England."

• **Marilyn Kwan, 28 years old**
University of California, Berkeley
 "Food consumption of children and risk of childhood leukaemia"

• **Michelle Morrow, 27 years old**
Paul O'Gorman Centre for Childhood Leukaemia, Institute of Child Health, London
 "Functional analysis of TEL-AML1 fusion protein in haemopoietic progenitor cells in vivo and in vitro."

• **Stuart Peirson, 28 years old**
Imperial College London
 "Experimental validation of novel and conventional approaches to quantitative real-time PCR data analysis"

• **Kevin Urayama, 27 years old**
University of California, Berkeley
 "Influence of cytochrome P450 IAI genetic polymorphisms on the association between residential exposure to traffic and childhood leukaemia"

Poster prize winner
 Dr Michelle Morrow outside the Paul O'Gorman Research Centre, Great Ormond Street, where she works with CHILDREN with LEUKAEMIA grant-holder
 Dr Hugh Brady

The host institutions of each of these six young researchers were awarded a grant of £15,000, with the stipulation that the funds be used to support any aspect of the researcher's work relevant to childhood leukaemia. Prize winners have been asked to provide a report in one year's time on how they have spent the funds.

The intention behind these awards is to give these promising young scientists the opportunity to pursue some innovative new research into childhood leukaemia, pump-priming new lines of enquiry. Who knows where this might lead?





We continue to fund a wide variety of research projects and in 2004 we were able to increase our research grant expenditure by one third – to £3.7 million. Over the next few pages we describe some of the projects we are funding.

Radiation and childhood leukaemia

Professor Denis Henshaw and team in the Human Radiation Effects Group at the University of Bristol received funding of £1.3 million in 2004 – a five year grant to enable them to continue their ground-breaking work examining the effects of electromagnetic fields on human health.

We have been funding the team at Bristol for nine years now, in which time the link between electromagnetic fields (such as those given off by high voltage power lines) and childhood leukaemia has become widely accepted. In response to the growing body of evidence, agencies such as the UK National Radiological Protection Board (NRPB), the International Agency for Research on Cancer and the US National Institute of Environmental Health Sciences have now agreed that electric and magnetic fields are possible human carcinogens. NRPB guidelines now caution against prolonged exposure at 0.4 microTesla (the level at which studies have found a doubling of risk of childhood leukaemia).

However the mechanism by which these fields act to cause leukaemia remains unclear. Professor Henshaw's team have demonstrated how high voltage power lines emit electrically charged 'corona ions' that can create tiny 'nano-particles' of air pollution, capable of penetrating deeply into the lung and passing into the blood stream.

Professor Henshaw has also worked with Professor Russel Reiter of the University of Texas to develop the 'Melatonin hypothesis' which has been proposed as a means by which exposure to magnetic fields increases the risk of leukaemia. The theory is that magnetic fields suppress the body's production of melatonin, a hormone which has been proved to act as a natural anti-cancer agent. Any reduction in melatonin levels may therefore reduce the body's ability to protect itself against cancer. Exposure to light at night is thought to have a similar effect on melatonin production.

Richard Box, artist in residence at the University of Bristol, helped draw attention to the dangers of usually invisible electromagnetic fields, by 'planting' 1,301 fluorescent bulbs under a power line. The tubes are powered only by the emissions from the overhead cables. This striking image attracted widespread media attention, including the front page of The Independent.

photo: Lewis Whyld/SWNS





Scientists in Bristol using the latest technique to measure Minimal Residual Disease. This provides the information the child's doctor needs to determine the right treatment regime.



Paul Archer, Research Technician. Cell fraction containing leukaemic cells being separated from bone marrow samples



Extraction of the DNA from separated cells.



Dr Nigel Wood: Real-time quantitative MRD assay in preparation



Dr Jeremy Hancock, Scientific Co-ordinator: Analysis of real-time quantitative MRD assay

Clinical trial: stratification of chemotherapy based on levels of minimal residual disease

In 2004 we made a further grant towards a study being led by Dr Nick Goulden of Bristol Royal Hospital for Children. Working with colleagues from laboratories in Bristol, Glasgow, London and Sheffield, Dr Goulden is co-ordinating a national clinical trial of a new molecular technique for measuring the precise number of leukaemia cells in a child's bone marrow – known as minimal residual disease or MRD.

The level of MRD present in a child's bone marrow when they complete their first 28-days of chemotherapy has been shown to be a good indicator of relapse risk and use of the new measurement technique has been incorporated into the current national childhood leukaemia trial, ALL 2003. Doctors and scientists are working together to establish whether children's treatment regimes can be individually tailored according to their MRD status.

The theory is that children with low level MRD are responding well to chemotherapy and could

have their dose reduced at an early stage, reducing the risk of long term side effects without compromising the chance of a cure. On the other hand, those children who have high level MRD are responding badly and could benefit from early intensification of therapy to reduce their risk of relapse and maximise their chance of survival.

420 children were registered on the trial by the end of year one and are now progressing through their treatment. These trials should result in increased survival rates and a reduction in the serious long-lasting side effects which can be caused by the high doses of powerful drugs used to treat leukaemia in children.

This project has been acclaimed as the most promising way forward in improving the prognosis for children with leukaemia. We have so far contributed £1.44 million and will continue fundraising until we reach the £2 million necessary to complete this stage of the trials. We are deeply grateful to Bunzl who have now contributed £40,000 towards this project, to the Foyle Foundation who have made a grant of £26,000 and to all the other trusts, companies and individuals who have helped fund this important work.

Understanding infant leukaemia

We awarded a further grant of £666,372 to Dr Hugh Brady at the Institute of Child Health, topping up the funding that was awarded last year to fund Dr Brady's full five-year programme of work.

The high overall cure rate for childhood leukaemia masks an extremely poor outlook for children with certain forms of the disease. Children who are diagnosed with leukaemia at less than one year of age have a particularly poor prognosis. Fewer than 20 per cent will reach their fifth birthday.

Working in collaboration with their colleagues at Great Ormond Street Hospital, Dr Brady and his team at the Institute of Child Health are making important discoveries about the genetic changes which lead to infant leukaemia.

Dr Brady, who is Head of the Molecular Haematology and Cancer Biology Unit, explains:

"The vast majority of infant leukaemias are caused by a genetic change involving a break within the MLL gene on chromosome 11. The broken chromosome then fuses with other broken chromosomes (usually chromosome 4), forming a new gene at the fusion point. This leads to the production of a novel protein which switches on

genes in white blood cells in an inappropriate way, causing them to mutate into leukaemia cells."

The team are breaking down this complex series of events to understand precisely what happens at each stage. Having discovered which genes are switched on in the white blood cells as a result of the chromosome fusion, the team now have a two-pronged approach:

- To determine the effects of these genes on the development, proliferation and resilience of leukaemic cells by expressing the genes in bone marrow stem cells; and
- To define the role of the same genes in the normal function of the bone marrow stem cells, ie. what happens to cells if this gene is deleted?

The ultimate aim of this programme of work is to improve the poor outlook for infants with leukaemia by developing new treatments which can effectively block the series of events which are causing their white blood cells to malfunction.

Scientists at Great Ormond Street studying the genetic changes which lead to infant leukaemia. This should pave the way for new, more effective treatments.



Manipulation of leukaemic blood cells in culture to enable identification of the target gene sets.



Using the DNA sequencer enables scientists to determine genetic changes within individual nucleotides of DNA.



Examination of especially prepared leukaemic blood cells to find ways of blocking their development.



Paul O'Gorman centres of excellence in childhood leukaemia research



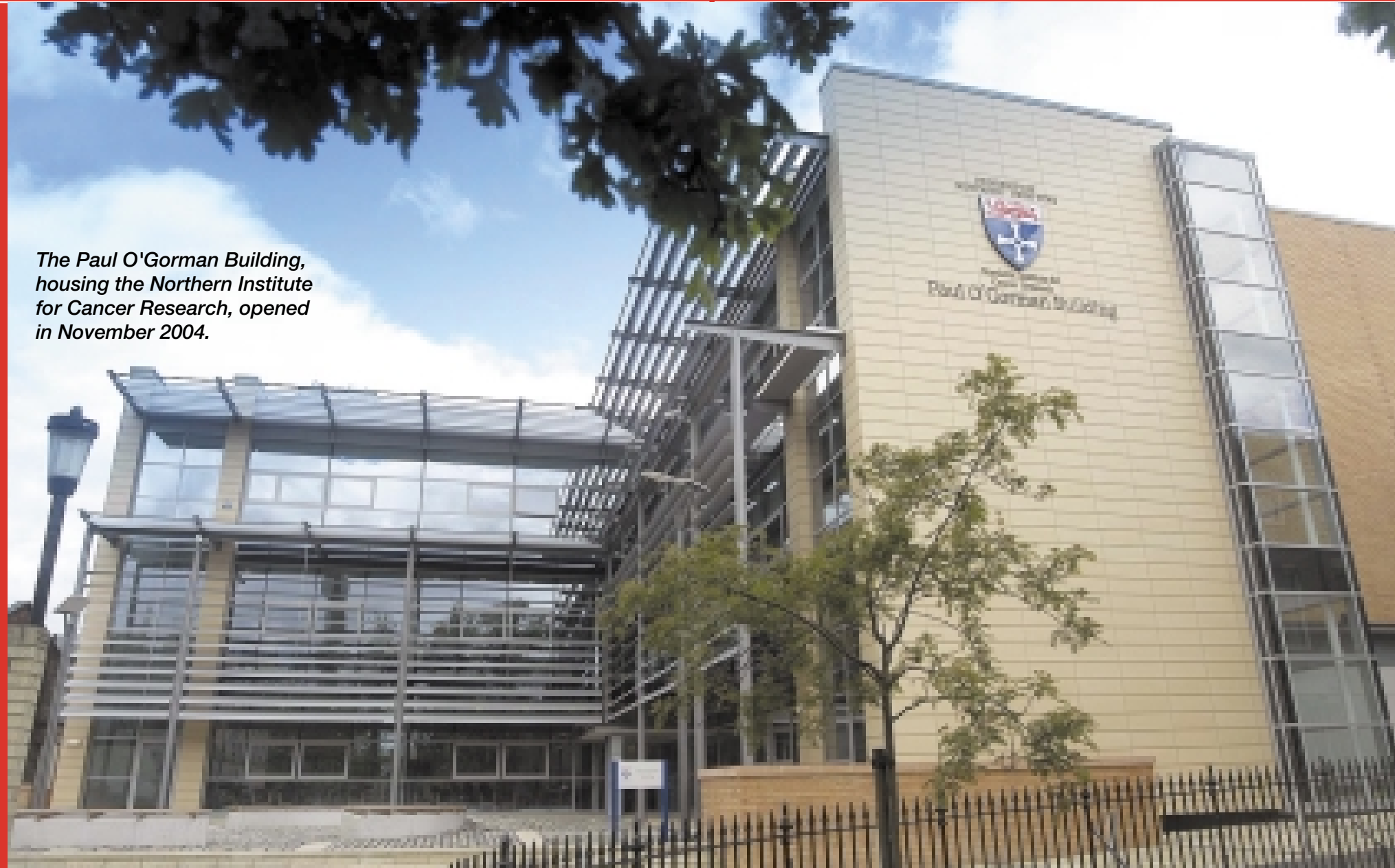
As a new charity back in 1988, our first goal was to raise £2 million for a new leukaemia research centre at London's Great Ormond Street Hospital for Children. It took seven years for us to achieve this goal, but the Paul O'Gorman Childhood Leukaemia Research Centre there now houses one of the UK's leading childhood leukaemia research teams.

Our commitment to the Paul O'Gorman Centre at Great Ormond Street continues and we have also established further Paul O'Gorman Research Centres in Bristol, Manchester and Newcastle. Two new Paul O'Gorman facilities will soon be opening – at the Institute of Cancer Sciences in London and at the University of Glasgow.

Paul O'Gorman Building, Northern Institute for Cancer Research, Newcastle upon Tyne

The latest Paul O'Gorman Centre to open is at the University of Newcastle where the new Paul O'Gorman Building houses the Northern Institute for Cancer Research. The three-floor centre has four laboratories and brings together 120 scientists from four different sites across the University.

Professor Herbie Newell, Newcastle University Head of Cancer Therapeutics, said "The new facilities will provide a major



The Paul O'Gorman Building, housing the Northern Institute for Cancer Research, opened in November 2004.

boost for our research. They will help scientists to collaborate more effectively and enable us to fast track new treatments from the laboratory bench to the patient's bedside. Our aim is to identify two new targets for anti-cancer drugs each year and to take one treatment from development in the lab to clinical trials."

We were able to complete payment of our £2 million pledge

in 2004, helped by the sponsorship success of CHILDREN with LEUKAEMIA runners in the 2004 BUPA Great North Run.

The Paul O'Gorman Leukaemia Research Centre, University of Glasgow

We are working with the Leukaemia Research Fund and the University of Glasgow to provide a major new leukaemia research

centre which will bring together Glasgow's existing leukaemia expertise. Haematology research is currently scattered around six different sites in Glasgow, making collaboration much more difficult than it might otherwise be since it means that routine NHS work, essential research and clinical activity are separated, with staff often working with outdated equipment or inadequate facilities.

The new centre, due to open in autumn 2005, will provide a much-needed translational research laboratory that will give both clinicians and researchers access to the most advanced facilities and equipment. We have pledged to try to raise £500,000 towards the £2.25 million cost of the new centre and have so far raised and given £300,000 towards this pledge.

The Institute of Cancer Sciences, Paul O'Gorman Building, University College London

Work began in the summer of 2004 on the new Institute of Cancer Sciences which will coordinate all of UCL's cancer research, providing a focus for excellent basic science and translational studies across the College's different sites. The Institute will ultimately house over 200 scientists.

The Department of Haematology will occupy a quarter of the space of the new Institute, with half of their resource being devoted to research into the causes and treatment of leukaemia. It is intended to establish a new professorial unit there dedicated to the study of leukaemia in adolescents.

The relationship between CHILDREN with LEUKAEMIA and UCL is now 17 years old and we are pleased to support the development of this new centre of excellence. We have pledged to try to raise £2 million towards the £30 million cost of the new building, due to open in 2006, and have so far raised and given £500,000 towards this total.





Eddie and Marion O'Gorman with HRH Princess Alexandra at the opening of the Paul O'Gorman Patient Hotel.

Paul O'Gorman Patient Hotel, Great Ormond Street

In 2004 we paid the first £1 million of the £2 million we plan to raise towards a wonderful new facility for children being treated at Great Ormond Street Hospital (GOSH) – the Paul O'Gorman Patient Hotel.

As one of the UK's leading children's hospitals, GOSH is a national centre of excellence for many conditions and children travel from all over the UK to be treated there. The Hospital is the UK's biggest referral centre for childhood leukaemia, with the team there treating almost one fifth of all cases.

The team at GOSH face an enormous demand on their services and have developed a new model of care to help keep pace. Their aim is to keep non-critical children out of the acute wards. Not only does this minimise the amount of time that children spend in hospital and disruption to their lives, but it helps to ensure that beds are available for the most critical patients.

The Paul O'Gorman Patient Hotel, which opened in October 2004, is part of this model, supporting the work of the hospital's daycare wards, including Elephant Daycare, the cancer day care unit. Just across

the road from the Hospital, this free 'Hotel' provides somewhere safe, comfortable and convenient for parents and children to stay before and after treatment. Children must usually arrive at 8am to begin their outpatient treatment. Early guest Maggie from Rochester, whose three year old child is being treated for leukaemia, told how they previously had to leave home by 5.45am to be at the Hospital by 8am. Now they can travel to London the day before and have a restful night at the Hotel. Being able to stay the night after treatment is also a relief for children and parents exhausted after a day's gruelling therapy.

Paul O'Gorman House

During its first year of operation, Paul O'Gorman House has provided 471 nights' accommodation to the parents of children being treated for leukaemia and cancer at the Royal Free Hospital.

Situated five minutes' walk from the hospital, Paul O'Gorman House gives parents somewhere to go once their child has settled for the night. They can relax, cook dinner and get a good night's sleep in comfortable, spacious accommodation, safe in the knowledge that they are close by if their child needs them.

We granted the House to the Trustees of the Hospital at the end of 2003, along with five years' running costs, and we are delighted that it is being so well used. Putting the Hospital in control of the facility means that the staff on the ward can provide immediate access for families who need it. One family stayed for 47 consecutive nights, showing just how important it is for them to have a local base whilst their child is in hospital. Paul O'Gorman underwent his leukaemia treatment at the Royal Free and his parents know only too well how hard it can be for family members, often having to steal what sleep they can in waiting room chairs or simply lying on the hospital floor. This was our motivation behind establishing this new accommodation facility.

Lifeline

In 1996 we began our association with what was then called 'Russian Lifeline', contributing to the cost of bone marrow transplants at Hammersmith Hospital for two teenage leukaemia sufferers from St Petersburg. Alexey and Sasha are now healthy young adults.

Over the years Lifeline's work has widened to include children from other countries where children do not have access to life-saving leukaemia treatment, including Georgia, Krygyzstan and Ukraine. Lifeline's long-term aim is to support the development of local facilities and expertise so that children no longer have to travel overseas for treatment. But this is a long job and in the meantime there are seriously ill children who cannot wait.

The number of children being referred to Lifeline is increasing rapidly and in 2004 they dealt with referrals for 107 children, taking to 265 the total number of children helped. We responded by increasing our funding to £800,664, directly funding the cost of medical treatment for these children. Our partnership with Lifeline enables them to continue helping the children who need urgent treatment today whilst building the local resources to treat the children who will need help tomorrow.

Green Hedges

For eleven years we have been offering families going through the trauma of leukaemia treatment the opportunity to enjoy a free seaside holiday at the Paul O'Gorman Respite Centre, Green Hedges in West Sussex. As part of a review and consolidation of our activities in 2004 Green Hedges was granted to the trustees of the Venik Trust, along with one year's running costs. The Venik Trust will continue to use the facility for the benefit of children with leukaemia but, with its considerable expertise in caring for patients and their families, Venik will be best placed to use this limited resource to optimal effect.

CHASE Hospice Care

CHASE Children's Hospice Service provides help to children who are not expected to reach their 19th birthday. They offer care and support in the family home and at St Christopher's, their hospice in Guildford, working with families through to bereavement and beyond. In 2004 we were able to provide a grant of £100,000. This was used to help meet the cost of the services for the families of children whose leukaemia treatment had failed.



Every year we organise the most enormous party for children suffering from leukaemia. Some bring brothers and sisters. And to make sure it really is an enormous party we invite thousands of other disadvantaged children as well.

This year's party was no exception. Held in London's Battersea Park, we welcomed around 6,000 children. Chart-topping singer Jamelia entertained and enthralled the children – as did the many other stars and attractions including

fairground rides, clowns and costume characters, bouncy castles and many other entertainments, all laid on free of charge.

As always we relied on our huge team of volunteers to make the day run smoothly. Around 800 individuals donated their time and talent to give the children a truly memorable day out. And many companies donated the products we need to throw such a grand party – including food, drink, goodies and prizes.



On 13th October 2004 Lloyd Scott, our best known fundraiser, set off across Australia on a penny farthing. His challenge was to cycle across some of the most inhospitable terrain on the planet - from Perth to Sydney.

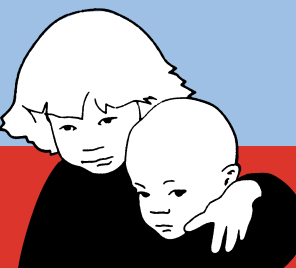
After completing challenges on six of the seven continents – including walking the Flora London Marathon in a deep sea diving suit and finishing the first ever underwater marathon in Loch Ness, Lloyd made history again, reaching his destination of Bondi Beach, Sydney after 50 days and 2,642 miles. The journey was full of incidents,

including numerous close encounters with thundering road trains and all manner of local wildlife. He pedalled his way through extreme weather conditions – ranging from blistering heat to torrential rain and gale force winds.

Said Lloyd, who has himself suffered from leukaemia "At times it reminded me of my battle against leukaemia: a long, slow, often painful struggle. Fortunately the outcome was once again successful."

By completing this remarkable feat, Lloyd raised £322,262 for

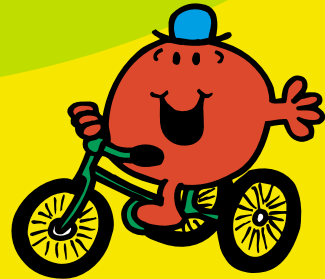
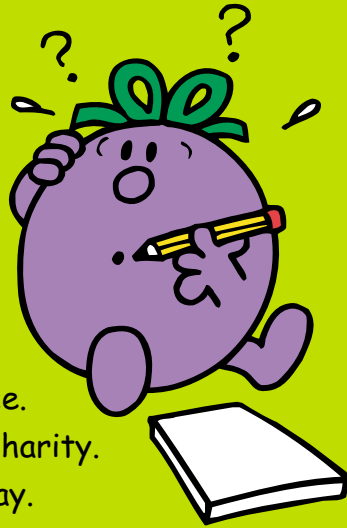
CHILDREN with LEUKAEMIA. He also gained worldwide media coverage, drawing public attention to the problem of childhood leukaemia. Tracking showed that the serious messages behind Lloyd's headline-grabbing antics are hitting home. People who recalled receiving information about Lloyd's challenge were 75 per cent more likely than the general population to name leukaemia as the UK's biggest child-killer disease.



THE CHILDREN'S MARATHON CHALLENGE

THE CHILDREN'S MARATHON CHALLENGE

- is for Time to make a difference.
- is for Help to raise money for charity.
- is for Enthusiasm goes a long way.
- is for Cherished memories.
- is for Happiness helps in the bad times.
- is for Involve as many people as possible.
- says **LEUKAEMIA MUST GO.**
- is for Dreams of today, are realities of the future.
- is for Research has made a big difference to survival rates.
- is to Enjoy the time you have.
- is to Never stop hoping.
- is to Stay focused.
- is to Make every penny count.
- is to Accept any offers of help.
- is to Raise as much money as possible.
- is for All children are precious.
- is to say **THANK YOU GREAT ORMOND STREET**, without you I would not be here today.
- is to Highlight the successes.
- is to Organise more fund raising.
- is for No donation is ever too small.
- is for Chemotherapy worked for me.
- is for Helping others, helps you feel good too.
- is for Acute Lymphoblastic Leukaemia.
- is to Enjoy being alive.
- is to Never give in to any illness.
- is for Great things lay ahead in life.
- is to Experience everything you can.



Once again, more than 100,000 children took part in our annual Mr Men and Little Miss Children's Marathon Challenge. Altogether they raised almost £2 million for their schools, guide units, scout sections, clubs, groups and CHILDREN with LEUKAEMIA. That's around £20 per child – a phenomenal achievement.

Each child took on a personal challenge relating to the number 26 – the number of miles in a marathon. There are over 100,000 tales of innovation, excellence and achievement to tell. We have picked just one to tell you here, from Sarah, a member of the 1st Great Chart and Singleton Guide Unit, who herself has survived leukaemia. Her challenge was to write a 26 line poem.

For many years we have been fortunate to benefit from the generous support of the Hargreaves family who have given us free use of the Mr Men and Little Miss Characters. We are enormously grateful to Chorion plc who have now made CHILDREN with LEUKAEMIA the Official Charity of the Mr Men and Little Miss Characters, enabling us to continue to use these wonderful images free of charge.



Tim Rogers, running for CHILDREN with LEUKAEMIA dressed as Mr Bump, made the front page of The Times!

We have had another successful year in fundraising terms and the work described over the previous pages was only made possible by the generosity and hard work of the thousands of people who contributed to this fundraising success.

We are so fortunate to benefit from the effort and imagination of these supporters who, as well as donating their own money, organise all manner of weird and wonderful fundraising events, sell our raffle tickets and take part in sponsored events such as the Flora London Marathon. Our supporters never fail to amaze us with the lengths to which they will go to raise funds. We are profoundly grateful to each and every one of them.

Our legacy income grew six-fold this year – to almost £600,000 –

and we are forever grateful to all those who remembered CHILDREN with LEUKAEMIA in their will.

Running events

In 2004 more than 2,200 people chose to support CHILDREN with LEUKAEMIA by taking part in runs and walks both at home and abroad. Many of our runners have personal reasons for taking part in these events. Many tell us how they have lost loved ones to leukaemia. Others have fought leukaemia themselves. This goes a long way towards explaining the remarkable dedication shown by runners, not only in reaching the finish line but in raising astonishing sums of money in the process.

A team of 1,100 runners represented CHILDREN with

LEUKAEMIA in the 2004 Flora London Marathon. Distinctive in their Mr Men and Little Miss running vests, the team attracted a great deal of media attention - Tim Rogers as "Mr Bump" made the front page of The Times. Between them the team ran 28,820 miles on the day. To put this in perspective, if they had started off in relay from Greenwich, they could have run to the finish line in The Mall via Sydney, Australia!

The outcome of this incredible feat was a staggering £1.6 million to support our research into childhood leukaemia. This is equivalent to almost £1 per inch of the 26.2 mile route!



Special events

Over the 17 years since we began, a well-established social calendar has evolved. The key events making up this calendar have achieved success thanks to the imagination and hard work of a number of dedicated individuals and committees.

In February, our great friend and supporter Caroline Randerson kicked off the fundraising year with her annual Spring into Summer Ball. Sandown Park Racecourse was the venue for what was Caroline's most successful Ball yet, raising more than £50,000 towards our work.

Jeremy Beadle's Quiz Party in March proved yet again to be a huge success, also enjoying a record-breaking year in fundraising terms. Celebrity teams pitted their wits against teams of supporters in a crazy night of cerebral nonsense, raising close to £150,000 to help children with leukaemia.

Over two nights in June, Diva Opera performed Donizetti's *Lucia de Lammermoor* and Mozart's *Die Entführung aus dem Serail* in the Great Conservatory at Syon. Guests all enjoyed a fabulous evening in grand surroundings, raising nearly £90,000 in the process.

Elizabeth, Duchess of Northumberland kindly continues as Patron of this successful event.

Our annual Captains' Cup in September was another successful event, with Golf Club Captains, who have been raising funds for CHILDREN with LEUKAEMIA during their year in office, joining Sandy Lyle and a host of celebrities to play the prestigious West Course at Wentworth. Each team comprised three Captains and one celebrity and despite a short, sharp downpour of rain, a magnificent day's golf raised almost £60,000 towards our work.

The Paul O'Gorman Banquet and Ball is our longest running, annual event. First held in 1987, only months after Paul died, Paul's sister Jean insisted on attending even though she was critically ill and was to die only two days later. Today the Ball holds a special place not only in the hearts of the O'Gorman family but the hundreds of people who return every year.

The 18th Ball, hosted at London's Grosvenor House in November, featured Abba tribute band, Björn Again, as the star attraction. More than 1,000 guests enjoyed excellent food,

top class entertainment and plenty of fun and games. And most importantly, the evening raised over £250,000 towards our work.





Appeals

Our appeals have a dual aim. Not only are they intended to raise vital funds to support our programme of work, they also help us get across key messages about childhood leukaemia. We are fortunate to benefit from a great deal of celebrity support in getting these messages out.

Hollywood actress Brenda Blethyn, a long-time supporter of our work, led our spring appeal to raise funds for the MRD trials coordinated from the Paul O'Gorman Building at Bristol Royal Hospital for Children (see p14). Her appeal raised a fantastic £456,185 towards this vital project. Brenda also joined the Mr Men and Little Miss team to run the Flora London Marathon on our behalf for the third year running.

Sir Michael Caine and Jeremy Beadle headed up our two summer appeals, raising a

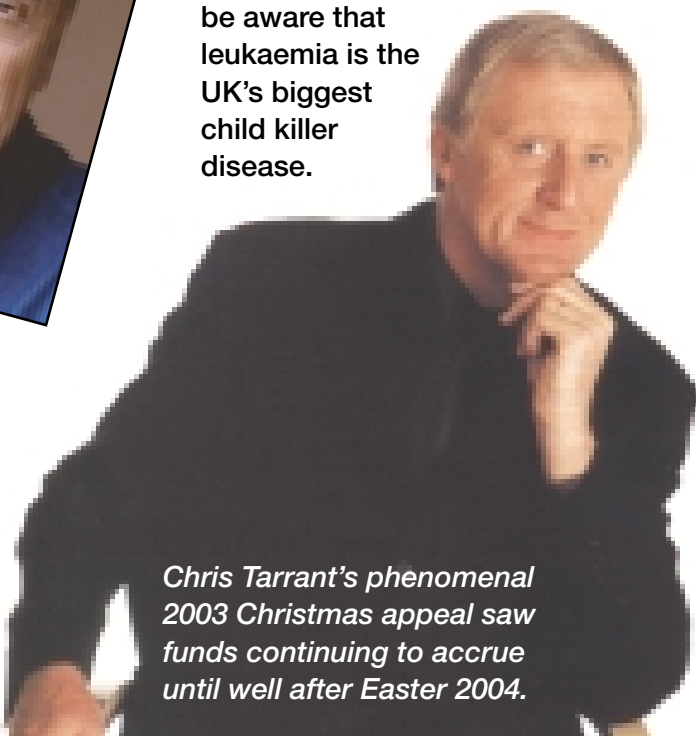


combined total of £1.4 million, a tremendous contribution towards our work.

Our autumn appeal was penned by fundraiser extraordinaire, Lloyd Scott, seeking sponsorship for his penny farthing challenge described on page 21. His record-breaking achievement captured the imagination of people from all over the world who sponsored Lloyd to the tune of £322,262.

And our annual Christmas Grand Draw was headed by TV personalities Ant and Dec (Anthony McPartlin and Declan Donnelly), taking our Christmas appeal income for 2004 to more than £2 million.

We continue to track the impact of these mailings and analysis showed that people who recalled receiving information from Ant and Dec, for example, were more than twice as likely to be aware that leukaemia is the UK's biggest child killer disease.



Chris Tarrant's phenomenal 2003 Christmas appeal saw funds continuing to accrue until well after Easter 2004.

Organisational structure and approach

During 2004, under the terms of the Trust Deed (dated 4 January 1988) and Variation of Trust Deed (dated 10 December 2003), the trustees retained all powers to determine how the charity operated except the power to change the Charity's objects which required Charity Commission agreement. Trustees were responsible for all strategic decisions which were implemented by the Chief Executive.

Following the transfer of the assets and undertakings of the charity on 1 January 2005 to a company limited by guarantee, the new company is governed by its Memorandum and Articles dated 11 November 2003 as amended by special resolution dated 30 November 2004. Under these Articles, trustees are appointed by a majority vote of the members (who are all the current trustees) by ordinary resolution.

It is the trustees' policy to work with other relevant charities and during the course of 2004, the charity worked closely with the Leukaemia Research Fund, the Great Ormond Street Hospital Children's Charity and the Venik Trust.

Risk assessment

The trustees keep under regular review the major risks that could affect the achievement of the charity's objectives. During the year, a risk assessment was carried out by the charity's new internal auditors, Sayer Vincent. In 2005, it is intended for Sayer

Vincent to focus on risk areas to review the internal controls in place and recommend any improvements to controls and methods to mitigate exposure to the risks.

Reserves and investment policies

The charity has very low fixed costs, with payroll costs for example less than 4% of the total expenditure, and therefore there is little need of large reserves. Furthermore, the fixed asset base is now at zero after the grant of the Green Hedges property in the year. The trustees feel it is sufficient to maintain an unrestricted reserve of no more than three months of the annual expenditure and have adopted this as their policy. Free reserves at 31 December 2004 amounted to £2.0m (2003: £1.7m), which represents eight weeks of the annual expenditure in 2004 and therefore meets the policy requirement. In order to facilitate the disbursement of these reserves, the trustees continue to think it prudent to keep the entire fund on short term deposit.

Statement of trustees' responsibilities for the financial statements

Charity law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the charity's incoming resources and application of resources during the year and of its state of affairs at the end of the year. In preparing those financial statements the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping proper records which disclose with reasonable accuracy the financial position of the charity and enable them to ensure that the financial statements comply with the Charities Act 1993. They are also responsible for safeguarding the charity's assets and hence taking reasonable steps for the prevention and detection of fraud and breaches of law and regulations.

Eddie O'Gorman
Chairman of Trustees

23rd March 2005



We have audited the financial statements of CHILDREN with LEUKAEMIA on pages 29 to 35 for the year ended 31 December 2004 which comprise the statement of financial activities, the balance sheet, the cash flow statements and related notes. These financial statements have been prepared under the historical cost convention, as modified by the revaluation of freehold properties.

This report is made solely to the charity's trustees, as a body, in accordance with Section 44 of the Charities Act 1993. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditors

The trustees' responsibilities for preparing the annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards are set out in the Statements of trustees' responsibilities.

We have been appointed as auditors under Section 43 of the Charities Act 1993 and report in accordance with regulations made under Section 44 of that

Act. Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and United Kingdom Auditing Standards.

We report to you our opinion as to whether the financial statements give a true and fair view and are properly prepared in accordance with the Charities Act 1993. We also report to you, if in our opinion, the Trustees' Annual Report is not consistent with the financial statements, if the charity has not kept proper accounting records or if we have not received all the information and explanations we require for audit.

We read the other information contained in the Report and Accounts of the trustees and consider whether it is consistent with the audited financial statements. We consider the implications for our report if we become aware of any apparent misstatements or material inconsistencies with the financial statements. Our responsibilities do not extend to other information.

Basis of opinion

We conducted our audit in accordance with United Kingdom Auditing Standards issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgements made by the trustees

in the preparation of the financial statements, and of whether the accounting policies are appropriate to the charity's circumstances, consistently applied and adequately disclosed.

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 give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

Opinion

In our opinion the financial statements give a true and fair view of the state of the charity's affairs as at 31 December 2004 and of its incoming resources and application of resources in the year then ended and have been properly prepared in accordance with the Charities Act 1993.

UHY Hacker Young

UHY Hacker Young
Registered Auditor
Chartered Accountants

St. Alphage House
2 Fore Street
London EC2Y 5DH

23rd March 2005

STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 DECEMBER 2004

Note	Total restricted funds £	Total unrestricted funds £	Total 2004 £	Total 2003 £
Incoming resources				
Donations, appeals and fundraising activities				
	-	456,185	456,185	149,657
	-	1,407,284	1,407,284	830,556
	-	322,262	322,262	-
	-	2,010,473	2,010,473	3,410,511
	-	466,152	466,152	284,684
	-	1,218,967	1,218,967	1,379,961
	-	1,862,539	1,862,539	1,730,587
	87,775	1,012,302	1,100,077	963,438
	-	565,994	565,994	474,770
	87,775	9,322,158	9,409,933	9,224,164
Other incoming resources	2	-	2,300,000	305,295
Legacies	-	595,504	595,504	98,038
Investment income	-	110,205	110,205	66,444
	87,775	12,327,867	12,415,642	9,693,941
Less: Cost of generating funds				
Fundraising costs	3	-	1,640,327	1,273,760
Publicity costs	-	-	215,471	179,100
	87,775	10,472,069	10,559,844	8,241,081
Net incoming resources available for charitable application				
Charitable expenditure				
Cost of activities in furtherance of the objects of the charity:				
Grants to third parties	14	-	-	-
Relief of children's suffering		12,000	2,723,664	2,735,664
Research into causes		3,500	1,739,532	1,743,032
Research into treatment		66,275	1,911,086	1,977,361
		81,775	6,374,282	6,456,057
Campaigns, projects and programmes	3, 15	-	-	-
Relief of children's suffering		6,000	2,605,366	2,611,366
Research into causes		-	1,021,970	995,906
Research into treatment		-	733,315	1,009,283
		6,000	4,366,651	4,359,216
Management and administration	3	-	54,252	40,591
		87,775	10,789,185	8,221,977
Total charitable expenditure				
Total resources expended				
		87,775	12,644,983	9,674,837
Net (resources expended)/ incoming resources before revaluation				
		-	(317,116)	19,104
Other recognised gains and losses				
Gain on revaluation of freehold property	6	-	343,076	-
Net movement in funds				
		-	25,960	19,104
Fund balance at start of the year		-	1,989,639	1,970,535
Fund balance at end of the year				
		-	2,015,599	1,989,639
		=====	=====	=====

All recognised gains and losses have been included in the Statement of Financial Activities and the amounts included are derived entirely from the continuing activities of the charity.

Some of the comparatives have been reclassified to conform to the figures in the current year. This included a movement from donations, appeals and fundraising activities to other incoming resources.

The notes on pages 32 to 35 form part of these financial statements.



BALANCE SHEET AS AT 31 DECEMBER 2004

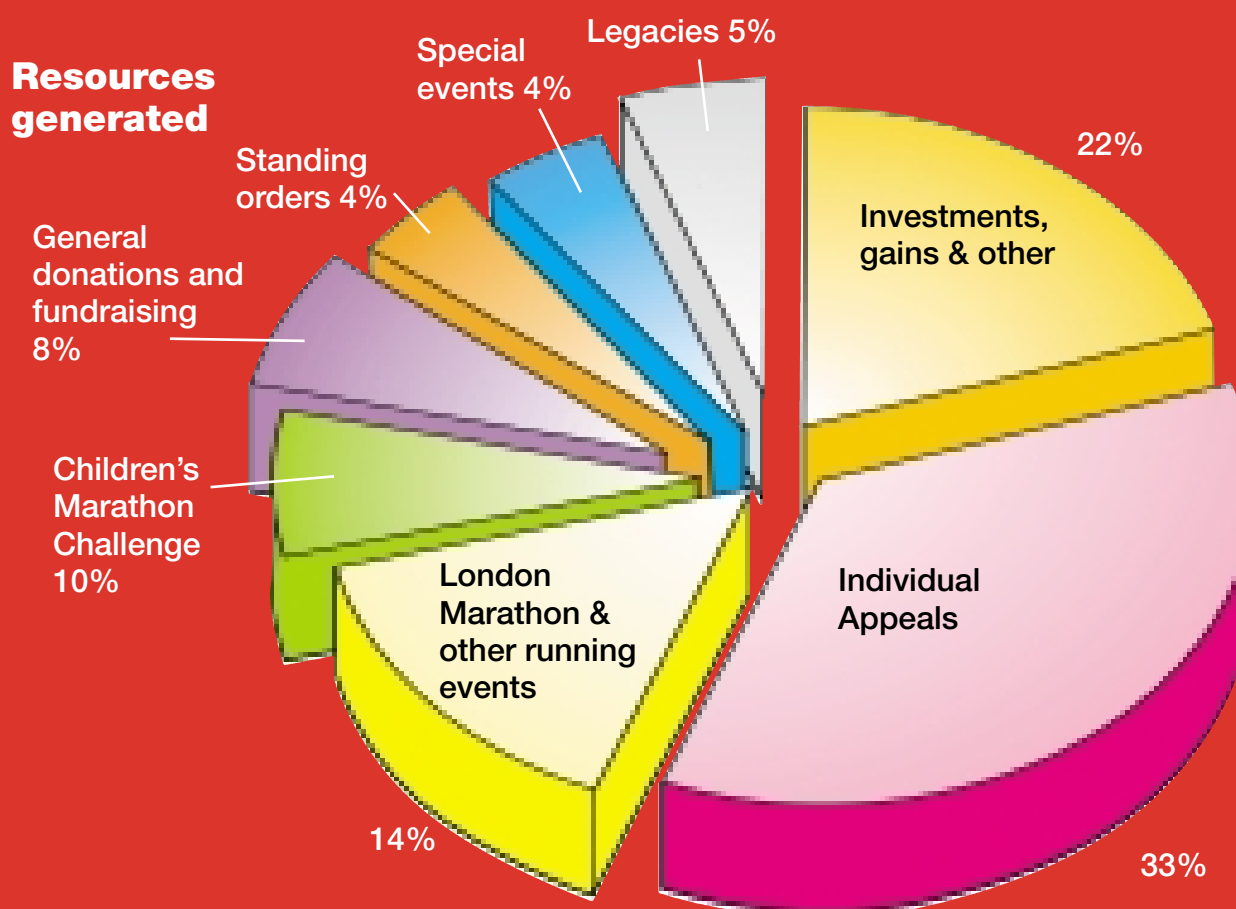
	Note	2004		2003	
		£	£	£	£
Fixed assets					
Tangible assets	6	-	-	967,294	-
Investment in subsidiary	4		100		100
Current assets					
Debtors	7	442,357		551,984	
Cash at bank and in hand		4,280,704		1,218,132	
		<u>4,723,061</u>		<u>1,770,116</u>	
Creditors: amounts falling due within one year	8	(1,072,591)		(747,871)	
Net current assets			3,650,470		1,022,245
Total assets less current liabilities			<u>3,650,570</u>		<u>1,989,639</u>
Creditors: amounts falling due after more than one year	9		(1,634,971)		-
Net assets			<u>2,015,599</u>		<u>1,989,639</u>
			=====		=====
Represented by:					
Unrestricted funds	10		2,015,599		1,989,639
			=====		=====

The notes on pages 32 to 35 form part of the financial statements.
 Approved and signed on behalf of the Trustees on 23rd March 2005

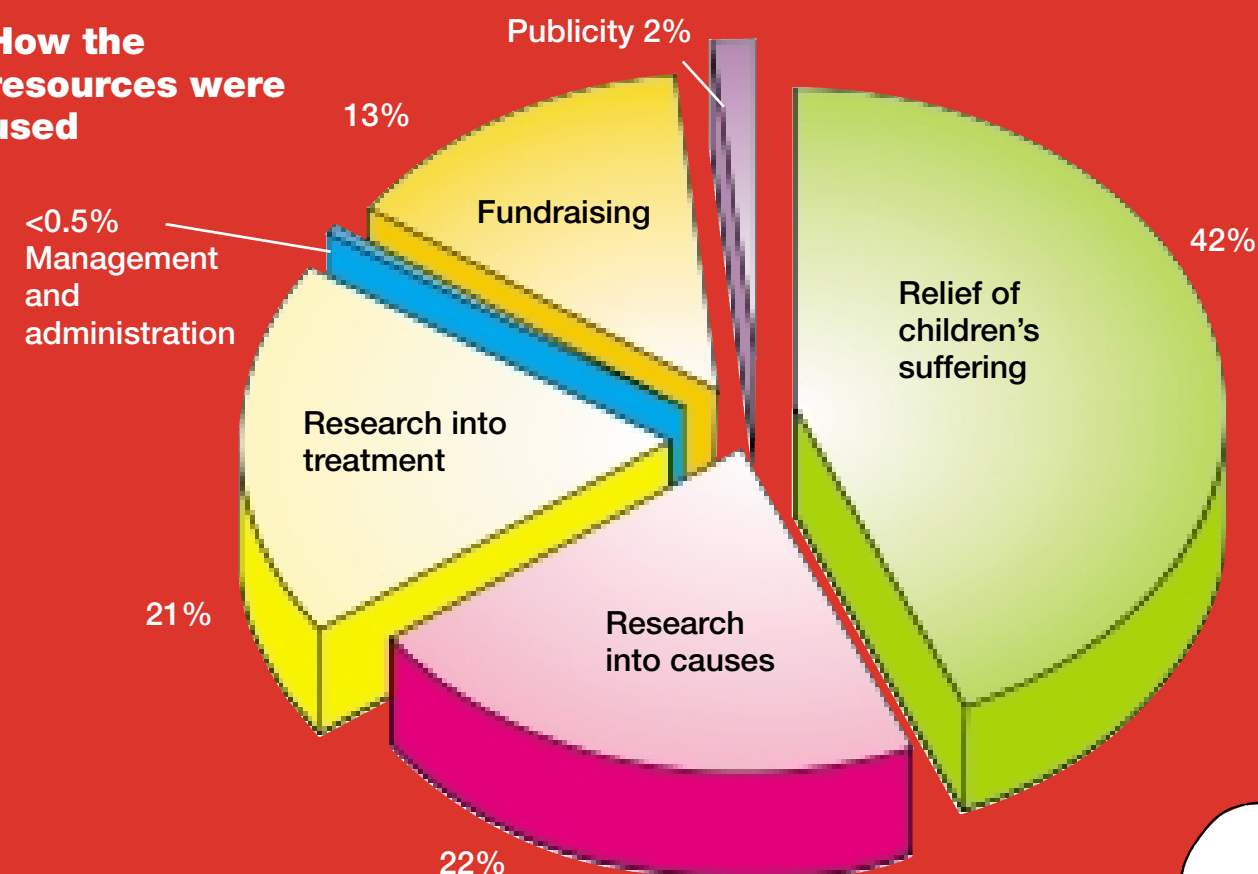
The Earl Cadogan
Trustee

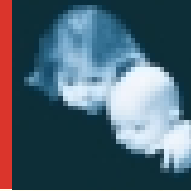
Eddie O'Gorman
Trustee

Resources generated



How the resources were used





CASH FLOW STATEMENT FOR THE YEAR ENDED 31 DECEMBER 2004

	Note	2004 £	2003 £
Net cash inflow from operating activities	a)	2,952,367	239,563
Interest received		110,205	66,444
Increase in cash in the period	b)	3,062,572	306,007
Notes to the Cash flow Statement			
a) Reconciliation of changes in resources to net cash inflow from operating activities		2004 £	2003 £
Net (resources expended)/incoming resources before revaluation		(317,116)	19,104
Depreciation		-	23,842
Investment income		(110,205)	(66,444)
Changes in debtors		109,627	(176,862)
Changes in creditors		1,959,690	745,218
Grant of tangible fixed assets		1,310,371	-
Gift in kind received		-	(305,295)
		2,952,367	239,563
b) Analysis of net funds			
	1 January 2004 £	Cashflow £	31 December 2004 £
Cash at bank and in hand	1,218,132	3,062,572	4,280,704

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2004

1. Accounting policies

(a) Accounting conventions

The financial statements are prepared in accordance with applicable accounting standards, the Charities (Accounts and Reports) Regulations 2000 and the related Statement of Recommended Practice for Accounting and Reporting by Charities (SORP) published in October 2000 in all material respects and are prepared under the historical cost convention, as modified by the revaluation of freehold properties.

The charity owns the whole of the share capital of Helping Children with Leukaemia Limited, a company registered in England. The company was dormant throughout the current and previous years. In the opinion of the trustees, the company is not material in the context of the overall accounts and therefore, the consolidated financial statements have not been prepared.

The particular accounting policies adopted by the trustees are described below:

(b) Tangible fixed assets

Tangible fixed assets costing more than £10,000 are capitalised and included at cost including any incidental costs of acquisition.

Depreciation is provided at rates calculated to write off the cost less estimated residual value, of each asset over its expected useful life, as follows:

Freehold property	4% straight line
Fixtures and fittings	15% straight line

(c) Incoming resources

Income is recognised in the period in which the charity is entitled to receipt and the amount can be measured with reasonable certainty.

In accordance with this policy, legacies are included when the charity is advised by the personal representative of an estate that payment will be made or property transferred and the amount involved can be quantified.

Voluntary income in the form of donations, proceeds of appeals and other fundraising activities are recognised upon receipt.

(d) Resources expended and basis of allocation of costs

Grants to third parties are included in the Statement of Financial Activities when

approved by the trustees and agreed with the other organisations. Payment is made when the conditions of the grant have been met.

Expenditure on campaigns, projects and programmes is included when incurred. The majority of the costs are directly attributable to specific activities. Other indirect costs are apportioned to activities in accordance with staff activity and an assessment of where the resources have been applied.

(e) Fundraising costs

These costs include the direct expenditure and overhead costs relating to the appeals and fundraising functions. They also include the allocation of costs incurred to support and co-ordinate fundraising activities.

(f) Publicity costs

These are costs incurred in promoting the charity's aim, objectives and fundraising. In part, they support the charitable activities but cannot be precisely allocated to specific programmes.

(g) Management and administration costs

This represents costs incurred to manage the charity in compliance with constitutional and statutory requirements.

(h) Fund accounting

Unrestricted funds are available for use at the discretion of the trustees in furtherance of the general objectives of the charity and have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The costs of raising and administering such funds are charged against the specific fund.

(i) Taxation

CHILDREN with LEUKAEMIA is a registered charity whose income is not subject to income tax.

	2004 £	2003 £
Repayment of Lifeline Building grant	2,300,000	-
Gift in kind - work performed on Agincourt Road property	-	305,295
	2,300,000	305,295

During the years 1998 to 2002, £1.95m was granted to the University of Bristol in order to build the Paul O'Gorman Lifeline Building. Owing to reorganisation at the

3. Total costs

	Note	Fundraising Costs 2004 £	Publicity Costs 2004 £	Relief of children suffering 2004 £	Promotion of research into causes 2004 £	Promotion of research into treatment 2004 £	Management & Administration 2004 £	Total 2004 £	Total 2003 £
Staff costs	12	104,339	18,926	188,405	122,052	45,780	-	479,502	379,428
Direct campaign costs		-	-	2,422,961	899,918	687,535	-	4,010,414	3,979,788
Printing, postage & stationery		899,025	-	-	-	-	-	899,025	722,144
Function and venue costs		628,793	196,545	-	-	-	-	825,338	722,662
Other expenditure		8,170	-	-	-	-	-	8,170	8,054
Audit fee		-	-	-	-	-	19,750	19,750	7,500
Other office costs		-	-	-	-	-	34,502	34,502	33,091
		1,640,327	215,471	2,611,366	1,021,970	733,315	54,252	6,276,701	5,852,667

4. Investment in subsidiary

CHILDREN with LEUKAEMIA holds 100% of the share capital of Helping Children with Leukaemia Limited. The net assets of the company as at the year end were £100 (2003: £100).

The company did not trade during the year.

5. Trustees' emoluments

The trustees or any persons connected with them neither received nor waived any emoluments during the year. The trustees do not hold indemnity insurance.

6. Tangible fixed assets

	Freehold properties £	Fixtures & fittings £	Total £
Cost			
At 1 January 2004	1,048,441	130,174	1,178,615
Revaluation	343,076	-	343,076
Disposals	(1,391,517)	(130,174)	(1,521,691)
At 31 December 2004	-	-	-
Depreciation			
At 1 January 2004	169,774	41,547	211,321
Disposals	(169,774)	(41,547)	(211,321)
At 31 December 2004	-	-	-
Net book values			
At 31 December 2004	-	-	-
At 31 December 2003	878,667	88,627	967,294

Paul O'Gorman House, Agincourt Road was transferred to the Royal Free Hospital during the year (net book value £710,370 including fixtures & fittings).

The remaining property, the Paul O'Gorman Respite Centre (Green Hedges), was externally valued by Holland Alexander & Co Limited on the basis of open market value as defined by the Appraisal and Valuation Manual issued by the Royal Institution of Chartered Surveyors. The open market value of this property was £600,000. The net book value of this property (including associated fixtures & fittings) was £256,924. This property, along with associated fixtures and fittings, was subsequently granted to Venik Trust.

	2004 £	2003 £
Trade debtors	53,270	-
Other debtors	115,592	551,984
Accrued income	273,495	-
	442,357	551,984

Accrued income represents legacies, as the charity has been formally notified by the personal representative of the estates. The trustees are reasonably certain that amounts in respect of these legacies will be received after the year end.

	2004 £	2003 £
Trade creditors	637	-
Sundry creditors	-	745,371
Taxes and social security	28,357	-
Grants payable	1,032,597	-
Accruals	11,000	2,500
	1,072,591	747,871

university, it was no longer able to use the building entirely within the charity's objects. Therefore the university refunded the original grant of £1.95m plus £0.35m as an allowance against the part not used in furtherance of the charity's objects to that date. With this payment, the university fully discharged its obligations to the charity under the terms of the original grant. However the building will remain named the Paul O'Gorman Building and the university will use its reasonable endeavours to locate work within the charity's objects in that building in the future.

9. Creditors: amounts falling due after more than one year

	2004 £	2003 £
Grants payable	1,634,971	-

10. Statement of funds

	At 1 January 2004 £	Income £	Expenditure £	Recognised gains £	At 31 Dec 2004 £
Unrestricted funds	1,989,639	12,327,867	12,644,983	343,076	2,015,599
Restricted funds	-	87,775	87,775	-	-
Total funds	1,989,639	12,415,642	12,732,758	343,076	2,015,599

The restricted funds comprised donations given from Trust Funds to be spent on specific projects and these funds were all discharged during 2004, £81,775 on grants to third parties and £6,000 on campaigns, projects and programmes.

11. Analysis of net assets by funds

	Unrestricted funds £	Restricted funds £	Total funds 2004 £	Total funds 2003 £
Fixed assets	100	-	100	967,394
Net current assets	3,650,470	-	3,650,470	1,022,245
Creditors: more than one year	(1,634,971)	-	(1,634,971)	-
	2,015,599	-	2,015,599	1,989,639

12. Staff costs

	2004 £	2003 £
Salaries and wages	433,180	340,049
National Insurance	46,322	39,379
	479,502	379,428

One employee earned between £100,000 and £110,000 during the year.

The average weekly number of employees during the year, as calculated on a full time equivalent basis, was as follows:

	Number of employees 2004	2003
	14	11

All employees contributed to fundraising campaigns, projects and programmes and the management and administration of the charity.

13. Capital commitments

There were no capital commitments at 31 December 2004 (2003: Nil).



	Relief of children suffering 2004	Promotion of research into causes 2004	research into treatment 2004	Total 2003
	£	£	£	£
14. Grants to third parties				
Professor Denis Henshaw, The Paul O’Gorman Childhood Leukaemia Centre, Physics Department, University of Bristol. <i>Programme funding – research into the possible environmental causes of childhood leukaemia</i>	-	1,322,309	-	54,000
Great Ormond Street Hospital Children’s Charity. <i>Capital funding for the Paul O’Gorman Patient Hotel, London</i>	1,000,000	-	-	-
Lifeline Italia and Bone Marrow Transplantation Units, various hospitals.				
<i>Lifeline: treatment of leukaemic children from Eastern Europe in specialist centres in Western Europe</i>	800,664	-	-	169,558
Dr Nicholas Goulden, Paul O’Gorman Building, Bristol Royal Hospital for Children.				
<i>Project funding – national trials of a new test for detecting presence of leukaemia cells during treatment†</i>	-	-	666,422	271,119
Dr Hugh Brady, The Paul O’Gorman Childhood Leukaemia Research Centre, Great Ormond Street Hospital, London.				
<i>Programme funding – research into improved treatments for infant leukaemia</i>	-	-	666,372	1,094,918
The Venik Trust. <i>Grant of Paul O’Gorman Respite Centre (Green Hedges) and running costs</i>	635,000	-	-	-
University of Newcastle Medical School.				
<i>Capital funding for the new Northern Institute of Cancer Research, Paul O’Gorman Building†</i>	-	-	400,000	400,000
University of Glasgow, Strathclyde. <i>Capital funding for the new Paul O’Gorman Leukaemia Research Centre†</i>	-	-	200,000	100,000
Alasdair Phillips, Powerwatch. <i>Project funding – development of on-line scientific database of research relating to the possible causes of childhood cancer</i>	-	175,000	-	21,000
Royal Free Hospital London. <i>Running costs of Paul O’Gorman House (parental accommodation facility)</i>	140,000	-	-	35,000
CHASE Hospice Care for Children.				
<i>Towards costs of providing services for the families of children with leukaemia</i>	100,000	-	-	-
Various beneficiaries. <i>Paul O’Gorman science award grants. Six grants of £15,000 each – see Trustees’ Report</i>	-	90,000	-	-
Coghill Research Laboratories, Gwent. <i>Capital funding for new laboratory</i>	-	60,523	-	-
The Variety Club of Great Britain. <i>To fund two children’s nurses</i>	60,000	-	-	60,000
Professor Michel Coleman, Non-Communicable Disease Epidemiology Unit, London School of Hygiene & Tropical Medicine. <i>For analysis of incidence trends in childhood leukaemia</i>	-	45,000	-	-
Dr Craig Donaldson, University of the West of England.				
<i>Project funding – a preliminary study of human NKT cells in stem cell transplant recipients</i>	-	-	39,567	23,581
Professor Alan Preece, Oncology and Medical Physics Department, University of Bristol.				
<i>Project funding – epidemiological study into association between power lines and childhood cancers</i>	-	29,800	-	58,123
Alasdair Phillips, Powerwatch. <i>Ongoing research expenses – electromagnetic fields and childhood leukaemia</i>	-	15,400	-	15,000
Dr Mike Sury, Great Ormond Street Hospital for Children.				
<i>Project funding – ultra-short acting anaesthesia for intrathecal chemotherapy in children</i>	-	-	5,000	-
World Cancer Research Fund.				
<i>For provision of educational materials on the causes of leukaemia to the Metropolitan Police</i>	-	5,000	-	-
Royal Free Hospital, London. <i>Gift of Paul O’Gorman House</i>	-	-	-	726,371
University College London.				
<i>Capital grant towards new Paul O’Gorman Building to accommodate Institute of Cancer Sciences</i>	-	-	-	500,000
Molecular Imaging Centre, University of Manchester. <i>Capital support of new blood scanning laboratory</i>	-	-	-	250,000
Coghill Research Laboratories, Gwent. <i>Project funding – research into the role of benzoquinones in treating leukaemia</i>	-	-	-	21,000
The DIPex Charity. <i>Towards the provision of an internet based resource for patients diagnosed with leukaemia</i>	-	-	-	12,000
CLIC. <i>Towards welfare and care services</i>	-	-	-	10,000
Chemobyl Children’s Lifeline. <i>Towards the relief of children affected by radiation in Chernobyl</i>	-	-	-	500
Total grants to third parties	2,735,664	1,743,032	1,977,361	
Grand total			6,456,057	3,822,170

Grants are generally awarded to the host institution in respect of research programmes carried out by the individuals named above.

† Grant administered by the Leukaemia Research Fund (Registered charity No. 216032).

15. Campaign, project and programme costs

The Paul O’Gorman Parental Home, Royal Free Hospital, London	10,299	-	-	6,979
The Paul O’Gorman Recuperation Centre, Green Hedges, Angmering-On-Sea, West Sussex	38,443	-	-	15,000
Welfare services	172,913	-	-	240,503
Summer Awareness Campaign	445,297	23,984	23,984	456,780
Autumn Awareness Campaign	434,166	-	-	-
Winter Awareness Campaign	643,502	386,095	386,095	2,497,838
Relief Promotional Programmes	359,627	-	-	255,001
Schools Education Project	507,119	-	-	379,682
International Scientific Conference	-	391,313	-	-
Treatment and Cure Awareness Programmes	-	220,578	-	247,028
Childhood Leukaemia Research Promotion Activities	-	-	323,236	260,405
Total campaigns, projects and programmes	2,611,366	1,021,970	733,315	

Grand total

4,366,651 4,359,216
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