Project Inform helped create a revolution in response to HIV/AIDS in its first 25 years. The revolution continues!

Dana Van Gorder

The struggle to protect life from the Human Immunodeficiency Virus has presented perhaps the greatest set of scientific, moral, political and social challenges of any disease in human history, in large part because the people most affected the epidemic are some of the most hated and neglected in our society. Throughout its 25 years, Project Inform has been at the forefront of the epic battle against those challenges. We are known and respected for muscular leadership and efficacy in demanding that some of America’s greatest institutions respond with a sense of urgency, compassion and boldness to the life and death struggles of people living with and at risk for HIV and AIDS.

We helped to lead a movement that revolutionized the drug discovery and approvals process in the US, firmly establishing the precedent that the very people who are affected by life-threatening illnesses must be active participants in all key decisions that will determine whether they live or die. We played a pivotal role in assuring that all people with HIV/AIDS could access the medical care and pharmaceuticals that held promise of a longer life.

Massive gains in combating the epidemic have been made since 1981. But the US should be much further along in controlling HIV than we are. Today, Project Inform is involved in a much quieter but equally important battle for progress against HIV/AIDS. In 2010, the goal of that battle is not so much to revolutionize the way in which government or industry responds to the epidemic as to modernize the approach of AIDS organizations themselves.

If the principal achievements of Project Inform in its first 25 years were to help create the arsenal of effective drugs that now significantly extend life for HIV-positive people, to make certain they knew how to use those medications, and that they had access to them regardless of their ability to pay, our work today and in coming years is to wipe away a set of barriers that prevent more people from taking those medications. It may seem like heresy for Project Inform of all agencies to say it, but today our biggest challenge to ending AIDS is not that we need the drugs to do it, though certainly we need better drugs and a cure. Our biggest challenge is to assure that more HIV-positive people are taking the medications for which we and others fought so hard!

In this issue of In Focus, the smart and capable people it is my joy to work with every day at Project Inform reflect upon the agency’s great contributions to the fight against HIV over these past 25 years — years made up both of the most profound trauma, suffering, camaraderie, empowerment and hard-fought victory. And in each of their articles, staff members describe the work we are currently doing and will be doing in coming years to help secure new gains in controlling HIV/AIDS.

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It is completely unacceptable and unnecessary that the following four major problems characterize the US HIV epidemic after nearly 30 years: Today, 21% of HIV-positive Americans do not even know they are living with HIV; 25% of people who know they are HIV-positive are not receiving care and treatment that could greatly prolong their lives and help them to avoid transmitting the virus to others; year after year for over 10 years, 56,300 people have become newly infected with HIV; and, people of color and women do not have nearly the same HIV health outcomes as other groups affected by HIV.

In response, PI’s programs and services have a laser-like focus on assuring that HIV-positive people know their serostatus as soon after infection as possible; that the percentage of HIV-positive people entering care and treatment increases; that disparities in HIV health outcomes are eliminated; that all HIV-positive people have access to quality, affordable health care and treatment; that new cases of HIV infection are reduced through innovative medical approaches; that increasingly effective treatments and a cure for HIV become available; and that HIV-positive people have access to information upon which to make sound choices about treating HIV and related illnesses. Additionally, we are bringing our skills and experience to the new effort to heighten the nation’s response to the completely neglected US hepatitis C epidemic.

Project Inform firmly believes that today’s powerful HIV medications, imperfect though they are, hold both the promise of greatly prolonging life for HIV-positive people if they are taken early and of preventing significant numbers of new infections. We are not naïve. We do not believe the nation or world can treat its way out of this epidemic. But we do passionately believe that it is time to actively promote HIV testing and treatment once again. We believe the US can greatly reduce and contain the impact of HIV through bold approaches to HIV testing; urgently linking HIV-positive people to care, treatment and social services; and by guaranteeing that every HIV-positive American can pay for or receive at no cost these lifesaving services. In this regard, the recent adoption of national health care reform is one of the most urgently needed and welcomed of steps toward truly controlling HIV.

As with every significant issue facing this nation, there are significant differences of opinion about how to achieve new gains against HIV, too few forums in which to work out differences of opinion in order to make greater progress, old and non-scientific ways of thinking about a changing epidemic, resistance to new approaches, and fears about the implications of shifts in funding to new programs. And so, through forums like our December 2009 Think Tank that resulted in a recommendation of a new approach (called TLC+) to improving the health outcomes of HIV-positive people and preventing new infections, we are working hard to lead a conversation and build consensus about bold new approaches to ending this epidemic. We have many great allies, and we feel the wind at our back.

In Focus is primarily a newsletter for our donors and supporters. And so, the Board, staff and volunteers of Project Inform take this opportunity to thank you from the bottom of our hearts for standing behind us as we continue to do battle against HIV and AIDS. We are moved by the confidence you have placed in us and we pay scrupulous attention to making good on the trust you place in us to work effectively and efficiently to end a disease that has caused the loss of your children, loved ones, friends and colleagues. Through this current economic crisis, Project Inform is largely holding its own, but we, too, have experienced an impact on our funding and need increased support.

We are deeply committed to being a catalyst for major new gains in controlling HIV/AIDS. We hope you will continue to be with us as we build upon the incredible legacy of Martin Delaney and the thousands of Project Inform volunteers and staff who have worked so hard and so well over these 25 years on behalf of all people living with HIV and so sadly gone because of it.
Project Inform fought hard for the current arsenal of HIV drugs and leads advocacy for even better treatments, and a cure!

Matt Sharp

It has been nearly 25 years since AZT was first approved for treating HIV. Since those dark days of single drug therapy, almost 30 more drugs have been developed to combat the virus — an unprecedented accomplishment for a new and complex viral disease. Mortality has dropped and survival rates have increased significantly, especially since the advent of combination therapy (HAART) in 1996. HIV treatment is so effective today that up to 80–90% of people who take drugs on schedule can expect to achieve undetectable viral levels.

HAART may play a significant role in HIV prevention in future years, as well. Data show that HIV-positive people on effective treatment are less likely to transmit the virus to others, and Project Inform and other agencies are promoting treatment in support of prevention. Studies underway seek to determine whether HIV-negative people who take an HIV drug every day and practice safe sex can avoid infection. PI is helping to determine how this intervention might be implemented.

The success of these drugs is due in large part to significant drug company investment and extensive government support for research over the past 25 years. But without enormous pressure from people living with HIV and their advocates, who insisted upon expanded research, shaped clinical studies to be patient friendly, argued against use of highly toxic compounds, and sped the FDA approval process, HIV treatment would not be as effective as it is today. As a result of successful HAART, other disease advocates now look to AIDS activism as a model for mobilization and success.

From early on, AIDS activists taught themselves the complex science behind HIV and the immune system. We were a necessary and recognizable catalyst at government and industry meetings, bringing a remarkable understanding of HIV disease to discussions about drug development while advancing the needs of the people actually living with the disease. We made ourselves a force to be reckoned with, and to the credit of the major institutions we sought to change, most responded well. AIDS activism revolutionized the drug discovery and approvals process forever and made it much more patient focused.

Project Inform was at the forefront of treatment advocacy from the earliest days of the AIDS crisis. Through Martin Delaney’s leadership, we joined with other treatment activists from New York, Los Angeles and other communities to spearhead this effort to demand safe and effective treatments for a disease that was killing thousands of our friends, lovers and relatives. Activists insisted upon being at the table where key treatment decisions were being made. Marty and others at Project Inform not only provided grassroots support to people living with HIV, they were in the face of government officials to demand strategic leadership and “outside the box” thinking on HIV drug research. We worked with researchers, first in San Francisco, a hub of the epidemic, and then nationally and internationally to speed innovation. We fought drug companies for ethical and speedy studies, the FDA to permit access to drugs for people not in studies but who desperately needed them, and later for fair drug pricing.

Even though we have come a great distance in treating HIV, this epidemic is far from over and we face major challenges in making additional strides. In some ways, we are victims of our own success in creating an arsenal of mostly safe and effective medications. Almost 30 years since the first cases of HIV were reported, drug development has virtually stalled. The drugs we have are now so effective in managing HIV disease that developing superior drugs is extremely difficult and costly. The number of companies engaged in drug discovery is shrinking. Some AIDS researchers have transitioned into more profitable diseases where great new discoveries are to be made. AIDS treatment activism has waned as desperation over survival has dissipated.

Today, there are many gaps in HIV treatment that urgently need addressing. Newer, more effective agents are needed for those who have and will become resistant to all the current drugs. There is a need for more studies to understand how best to use the current drugs. Because these drugs must be taken for life, they can cause cumulative toxicities and cannot reach hidden reservoirs of HIV in the body. The paradox that HIV medications are advancing inflammation and aging as they seek to promote longer life needs to be better understood and dealt with.

Fundamental understanding of the immune system has been a tough nut for researchers to crack, but promising new immune-based strategies are in clinical studies. New research seeking to understand chronic inflammation, reduced but not eliminated as a result of HIV treatment, is an exciting and essential field, gaining much attention by a growing number of people aging with HIV.

A cure for AIDS is not to be left out of the treatment activist agenda. While the field is relatively new — the last focus of Marty’s advocacy efforts — it is far from hair-brained or impossible. This challenge is being addressed today by some of the sharpest minds in AIDS research.

Making HAART easier to take so that more people will take and be adherent to it is a great ongoing challenge. We have already seen important advances in fixed-dose regimens that can be adherent to it is a great ongoing challenge. We have already seen important advances in fixed-dose regimens that can

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Providing hope through treatment education—thanks to 25 years of exceptional volunteerism

Alan McCord and Anne Donnelly

Simply put, volunteers created Project Inform.

Many of our significant milestones and some programs that continue today are due to the compassionate contributions of several thousand devoted individuals over 25 years. Most of PI’s original staff started out as volunteers, many of whom came on board earlier in our history in response to the public scrambling for information on how to treat HIV.

Project Inform’s information programs, such as the National HIV Treatment Hotline, our popular Town Meetings and the PI Perspective, began with the guidance and resourcefulness of these early volunteer activists. Indeed, three integral aspects of our information program — our Hotline, translation of materials into Spanish, and our website — were all initiated and managed by volunteer groups. Having answered more than a half-million calls since 1985, our dedicated Hotline operators who live with or are impacted by HIV continue to volunteer, support callers nationwide, and link them to important support services.

The years surrounding 1993 exploded with ever more volunteers who helped accomplish several major milestones on behalf of people living with HIV. It was these volunteers, notably Paul Witsosky, who started the first policy advocacy team — the Treatment Action Network — which still (as PI Action) helps those with HIV make their voices heard in Washington and Sacramento. At the same time, other volunteers helped found the first AIDSWatch, the largest constituent lobby day in Washington, which continues to this day as an important cornerstone of national advocacy.

Another notable milestone at this time included a campaign to increase funding to the National Institutes of Health and the massive reform of the federal AIDS research program, all of which was supported by volunteer sweat and tears. David Lewis volunteered full time for several years to ensure victories in those areas. Other volunteers, notably Jessie Dobson, started a series of nine Immune Restoration Think Tanks that coalesced international experts to better understand the complexities of the immune system in order to more effectively treat HIV disease.

Throughout our history, PI has been buoyed by a steady cadre of volunteers and interns who not only support our programmatic activities but also assist with administrative and fundraising tasks. A popular weekly group, the Tuesday Night Crew, regularly folded, stuffed and packaged Project Inform publications and special event materials for more than 10 years.

Local AIDS activist, Ron Wilmot, began raising funds for Project Inform through his namesake Bike Ride. Over its 13 years, volunteers helped raise more than $750,000 and expand awareness of the importance of knowing one’s HIV status and getting into care. Our ever-dutiful Board of Directors has provided an unending line of leadership and fundraising prowess. Where would we be today if it were not for dedicated Tom Kelley? Likewise, hundreds of volunteers have helped staff and fundraise for our annual Evening of Hope and the numerous third-party events around the Bay Area.

Even as many have returned to the work force over the years due to better care and treatments, the volunteers and interns at Project Inform continue to provide valuable support. As we fight to obtain adequate funding for critical health care programs and to expand quality health care, our volunteers have rallied, testified before legislative committees, and contacted their elected officials. They continue to participate in advocacy trainings and lobby days throughout the country. And we’ve been fortunate to have younger adults volunteer with us recently, such as Alicia Dithmart, Grant Hiura, Jen Schuster, Colleen Farrell and others, who have become our newest ambassadors for ending HIV/AIDS.

As one can see, our volunteers and interns over these 25 years have dramatically influenced and sustained programs that have helped transform the standard of care for people living with HIV. Conservatively speaking, these selfless individuals have given more than 250,000 hours of service — an average of nearly 5 FTEs per year. We are forever indebted to them for their inspiration and vision. If you would like to volunteer at PI, contact volunteer@projectinform.org.
A history of effective leadership of sound public policy to end HIV/AIDS

Anne Donnelly

Project Inform spearheaded its first formal public policy efforts in 1993. Still a largely volunteer organization, we worked with Treatment Action Group and the American Foundation for AIDS Research (amfAR) to secure adequate federal funding for AIDS research. This effort resulted in the largest single HIV research funding increase ever.

That same year Project Inform, in partnership with the Harvard AIDS Institute and University of Wisconsin, held "Future Directions in AIDS Research", bringing top researchers, clinicians, advocates and elected officials together for discussions aimed at strengthening and reinvigorating AIDS research. Later that year, we co-founded AIDSWatch, the first national constituent lobby days in Washington, DC. AIDSWatch signaled a new approach as it brought together advocates for prevention, care and research to lobby together for a comprehensive response to the epidemic. 1993 was also the year that we founded our grassroots advocacy program, now known as PI Action.

Project Inform's policy staff has never exceeded two people. Working at the Federal and California state level, we analyze policies, advocate for appropriate funding and legislation, work on program implementation, monitoring and reform and engage in community organizing. We focus our work by strictly adhering to our mission of ensuring that people with HIV have access to quality, comprehensive and affordable health care and treatment and addressing the programs and efforts that serve the most vulnerable in the epidemic.

Following these criteria, in 1995, we recognized that the promise of protease inhibitors, the new, effective and expensive HIV drugs, could not be realized unless low-income uninsured and underinsured people could access them. Thus, we became a founding member of the ADAP Working Group, an ad-hoc coalition of advocates and drug industry representatives working to ensure increased federal and state funding to the AIDS Drug Assistance Program. Significant funding increases ensured that people with HIV across the country got access to life-prolonging HIV therapies they couldn't otherwise afford.

In the late 90s, it became clear that more work was needed on Medicaid, the federal safety net program serving the low-income and disabled. It serves more than 50% of people with AIDS and 90% of children with HIV. A national study revealed that those served by Medicaid were receiving similar levels of HIV treatment to those who were uninsured. At the same time, the administration attempted to institute major cuts in the program and remove the status that allows all who qualify to receive benefits. Very few HIV advocates worked on this vital safety net. PI became a founding and steering committee member of the HIV Medicaid Defense Working Group, a significant voice fighting to protect of the program.

In 2003, Congress began to discuss a new prescription drug benefit for Medicare, the federal insurance serving seniors and the disabled. The Medicaid Defense Group became the HIV Medicaid Medicare Working Group (HMMWG) and fought to protect HIV-positive people under Part D. While the drug benefit was far from ideal, significant protections were enacted for people with HIV, including the requirement that all plans cover all HIV drugs and that ADAP could provide coverage for gaps in the benefit. Project Inform worked to educate the community about the complex benefit, trouble-shoot access problems for beneficiaries, and communicate regularly with the Centers for Medicaid and Medicare Services to enact systemic changes correcting significant access problems.

In 2009, when the Obama Administration signaled its commitment to overhaul health care, the HMMWG morphed into the HIV Health Care Access Group and undertook the work of health care reform. Project Inform helped lead efforts to ensure that reform includes provisions that will significantly improve health care access for people living with HIV, including Medicaid expansion to all low-income people. At the California state level, Project Inform spearheaded the fight against severe program cuts, including cuts to ADAP. In spite of a staggering budget deficit and draconian cuts to health and human services, Project Inform — working with its partners and, most importantly, people affected by the epidemic — has successfully maintained nearly full funding for ADAP and is working to avoid and mitigate additional funding cuts.

The goal of our policy department has remained consistent through the years: to ensure access to quality health care and treatment for people with HIV, and now for people with viral hepatitis. Our activities change according to need. In 2010, the Public Policy Department will begin to monitor the implementation of health care reform, and educate the community about provisions of the bill and navigating in a new health care program. We will continue our work at the Federal and California state levels on funding for necessary health care and treatment programs, particularly focused on ADAP, as well as work on program reform and policy changes. And, in keeping with our long-held commitment to grassroots advocacy, we will continue to encourage people living with and affected by HIV to have a voice in the policies that affect their health care and their lives.
Project Inform leads advocacy to build a response to America’s unaddressed hepatitis C epidemic

Ryan Clary

AIDS advocates have created a model for how to respond to a life-threatening disease, particularly during a time of government inaction and public indifference. We were forced to learn how to change policies, establish support programs, write and pass legislation, and secure funding. We have employed a variety of strategies to achieve these successes, including civil disobedience, rallies, grassroots organizing, media campaigns and lobbying. Through these actions, we have demonstrated that the most powerful and effective way to create change is to involve those most impacted by an issue and make sure their voices are heard by key decision-makers.

Three years ago, Project Inform expanded its public policy agenda to include hepatitis C (HCV) issues. Our goal is to help share the skills and knowledge we’ve developed over the past 25 years to improve the government’s dismal response to the viral hepatitis epidemic. Last year, PI also added HCV treatment development and pricing advocacy to our work. We began HCV advocacy in response to the number of people living with HIV who are co-infected with HCV. However, it became immediately apparent that in addition to the need to address co-infection, there was a great need for increased policy and grassroots activism on behalf of the millions who are infected only with HCV and often have less access to the treatment and health care they need to survive.

Between 3 and 4 million Americans live with chronic hepatitis C, and the overwhelming majority are not aware of their status. Chronic HCV can lead to cirrhosis and liver failure, and is the leading cause of liver cancer in the US. Nearly 15,000 people die each year from hepatitis B and C, both preventable diseases. In addition, an estimated 25-30% of people with HIV are co-infected with HCV, which increases the morbidity of each disease. End-stage liver disease is now a leading cause of death among people with HIV.

Despite these staggering statistics, the response at all levels of government has been abysmal. The federal government provides a miniscule amount of money each year for viral hepatitis prevention services and there is no effort to establish programs to provide access to care and treatment for uninsured people living with HCV. Meanwhile, most states and localities lack resources and a plan to offer adequate screening, testing, care and prevention services.

Project Inform works in coalition with national, state and local partners to advocate for a comprehensive strategy to address the HCV epidemic. At the national level, we advocate for increased federal funding by participating in the Hepatitis C Appropriations Partnership, led by the National Alliance of State and Territorial AIDS Directors. We have taken a leadership role in the Fair Pricing Hepatitis Working Group, a national coalition of advocates working to ensure that new HCV drugs are priced affordably and that patient assistance programs are available for uninsured people. We also participate in the steering committee of the National Viral Hepatitis Roundtable (NVHR), a coalition of hepatitis B and C advocates. NVHR is leading efforts to pass the Viral Hepatitis and Liver Cancer Control and Prevention Act, which would establish a national hepatitis surveillance, prevention, screening, and testing program.

At the California state level, we serve on the steering committee of the California Hepatitis Alliance (CalHEP), a statewide coalition of hepatitis B and C advocates. CalHEP played a major role in the development of the recently released California Adult Hepatitis Prevention Strategic Plan, a proposed roadmap to addressing the hepatitis epidemic in the state, and will focus on its implementation in 2010. To that end, we will be helping to organize a hearing in the California State Legislature on World Hepatitis Day.

In San Francisco, PI played a leadership role in establishing the Mayor’s Hepatitis C Task Force and we chair its Public Policy Subcommittee. The task force was formed in September 2009 and is composed of 32 advocates, medical and social service providers, and people living with HCV. Its goal is to develop a list of recommendations to the Mayor to improve San Francisco’s response to the hepatitis C epidemic.

Project Inform continues to consider other ways to bring our skills, experience and expertise to fight the viral hepatitis epidemic, particularly in our information and outreach program. Your input and thoughts are appreciated as we engage in this process. For more information, contact Ryan Clary at rclary@projectinform.org or 415-558-8669 x224.
ADVOCACY IN ACTION: Preventing thousands from going without treatment

Thanks to your support of our Public Policy Department, Governor Schwarzenegger recently committed an additional $97 million in general fund support to the AIDS Drug Assistance Program (ADAP). Without this additional funding, 8,500 people who depend upon these lifesaving medications would have been removed from the program!

In early January, Project Inform led other AIDS organizations in hosting a rally on the steps of City Hall in San Francisco to demand that the Governor fully fund this vital program. That 100+ person strong rally included the voice of a new community activist who spoke eloquently and from his heart about how radical budget cuts would drastically affect his life.

Jason Villalobos took a stand that day not only for himself but for all those living with HIV/AIDS and spoke truth to power. Here in his own words is what Jason has to say about his experience as a young Latino man living with HIV and about how Project Inform made a difference in his life:

“Allow me to get right to the point, because the truth of the matter is a simple one: I am not currently working and I have no private insurance plan, so without ADAP and the work Project Inform has done on behalf of people like me, I would most certainly, barring some unforeseen miracle, be dead today.

As I said in a speech I gave on behalf of Project Inform at a rally to save California’s ADAP from budget cuts, this program allowed me to grow from a boy into a man filled with compassion. The work Project Inform has done on behalf of people like me means that I too can enjoy a right to live how I choose.

The stress of knowing I couldn’t afford my healthcare without ADAP is a heavy burden to carry, but with the recent victory in California, I am with hope. Victories are often hard fought, and Project Inform and its staff have been there every step of the way. I thank them for it with all of my heart.

Please join me in supporting Project Inform and the right to life we should all enjoy. I’m not exaggerating when I say their work has literally saved my life, and I’m willing to help them in any way on behalf of the thousands of lives they touch every year.”

Check out the following ways you can help us achieve our mission ...

- Have a House Party and collect donations to support Project Inform. Visit our website for more information or contact Tyler Juel at 415.558.8669, x206;
- Set up a recurring monthly gift to be deducted from your credit or debit card;
- Encourage your friends to become involved with PI and direct them to our website for more info;
- Consider leaving a portion of your estate to Project Inform. Contact Henry Lucero at 415.558.8669, x227;
- Donate your car to Project Inform. We have a system in place that requires very little effort on your part;
- Sign up for our PI Action Network of volunteer public policy advocates at www.projectinform.org/action.shtml and let your legislators know you are concerned about HIV/AIDS issues;
- Shop or donate items to Community Thrift at 623 Valencia Street in San Francisco. Reference #18 when donating. A portion of the proceeds from items you donate reach PI;
- Set up an account with eBay and register proceeds of your sales to be donated to PI;
- Volunteer at one of Project Inform’s fun events or in our office.

Email volunteer@projectinform.org to talk about your interests.
Donors to Project Inform  
January 1, 2009-December 31, 2009

We thank the many individuals, trusts, estates, foundations and corporations for their generous contributions. Their support assists people affected by HIV by ensuring that the latest AIDS treatment information reaches over 150,000 constituents annually. It amplifies our advocacy efforts that strive to remove barriers to care and treatment. And it provides the inspiration someone may need in to choose hope over despair.

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<td>Eileen Blumenthal &amp; Pat Dunn</td>
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<td>Lenny Broberg</td>
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<td>Jeff Campbell</td>
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<td>Robert Clausen &amp; Randy Spriggs</td>
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<td>Georgia DeCaro</td>
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<td>Randall Drain</td>
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<td>Paul Gabel &amp; Michael Mendiola</td>
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<td>Joe Garrett &amp; John Lomibao</td>
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<td>Krisjan Gavin</td>
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<td>Gail Gilkey &amp; Martin Weinstock</td>
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<td>Gregory Gordon</td>
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<td>Paul Herman</td>
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<td>Chad Kenney</td>
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<td>Brenda Laribee</td>
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<td>Michelle Martin</td>
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<td>Kevin McCarthy &amp; David Fong</td>
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<td>Frances E. McLean</td>
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<td>Janet Minden</td>
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<td>Kate Minott</td>
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<td>Alvin Nash</td>
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</tbody>
</table>

Project Inform regrets any omissions or errors in this listing. Individual contributions to community and workplace campaigns are not always made available to us and may not be included. For questions about your donation, contact Henry at 415-558-8669 x211. Thank you.
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Carol & Alan Wartenberg  
Anita Weissberg  

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Project Inform Financial Statement  
(for the year ended June 30, 2009)

| ASSETS | | PUBLIC SUPPORT AND REVENUES | |
| -- | -- | -- | |
| Current assets | | Individual gifts | $272,693 |
| Cash and equivalents | $341,327 | Corporate & foundation support | $651,341 |
| Grants receivable | 138,000 | Estates & bequests | 158,796 |
| Prepaid expenses | 15,907 | Special events | 112,316 |
| Program service fee receivable | -- | Program service fees | 23,967 |
| Investments | 153,000 | Other | 16,250 |
| Total current assets | 855,138 | Total Public Support & Revenues | $1,233,363 |
| Assets held by others | 1,137,988 | EXPENSES | |
| Security deposits | 9,169 | Advocacy & information | $691,418 |
| Property & equipment | 12,204 | Health care advocacy | 418,314 |
| Total Assets | $2,014,499 | Fundraising | 212,770 |
| | | Administration | 63,356 |
| | | Total Expenses | $1,385,858 |

These figures are excerpted from the audited financial statements for fiscal year ending June 30, 2009.
MARKING 25 YEARS
PROVIDING TLC + TO END HIV AND AIDS

On Sunday, April 25, 2010, Project Inform will mark 25 years of leadership in the fight against HIV/AIDS with a wonderful brunch at the very hip and interesting Flora Grubb Gardens in San Francisco. *We would love to have you join us as we reflect on 25 years of major achievements and anticipate our continued, effective stewardship to help end the HIV/AIDS epidemic within the next 25 years.

Project Inform has tenaciously and effectively pursued a strategic approach to ending the AIDS epidemic by helping build the arsenal of safe, powerful treatments that are now available; counseling individuals and their caregivers about how to treat HIV and manage their healthcare; and pressing government to assure that all HIV-positive people have unlimited access to quality, affordable medical care, treatment and support services. The TLC we have delivered has inspired, comforted and prolonged life for countless people.

**Individual Tickets – $75.00**

For more information regarding Project Inform, sponsorship opportunities or to purchase tickets, please contact Henry Lucero, Deputy Executive Director for Development at 415.558.8669 x211 or hlucero@projectinform.org