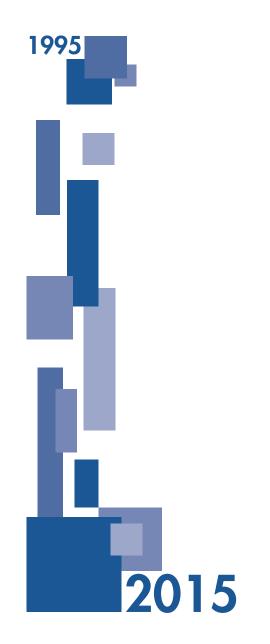


Free legal services for people living with HIV/AIDS in Ontario



Annual Report 2014-2015

#### **HALCO**

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### The HIV & AIDS Legal Clinic Ontario (HALCO) is a not-for-profit charitable organization founded in 1995.

#### **HALCO's Mission**

HALCO's mission is to provide legal services to persons living with HIV/AIDS in Ontario that are relevant to their well-being and that enable them to participate fully in the communities in which they live.

#### **HALCO's Vision**

HALCO's vision is a society where laws and the legal system help reduce discrimination, stigma, poverty and injustice faced by people living with HIV/AIDS.

#### **HALCO's Statement of Principles**

#### It is agreed that:

- 1. People living with HIV/AIDS are confronted with unique legal problems of enormous proportions and complexity;
- 2. Those best equipped to make choices regarding HIV/AIDS issues and problems are those individuals who are HIV-positive themselves;
- 3. People living with HIV/AIDS must have control over their own lives;
- The HIV/AIDS affected communities are very diverse and are confronted by overwhelming challenges derived from both their diversity and from their common experience as people living with HIV/AIDS;
- It is necessary to create and foster a climate of understanding and mutual respect for the dignity and worth of people living with HIV/AIDS; and
- 6. The confidentiality, bodily security, autonomy and privacy of people living with HIV/AIDS must be respected, which include but are not limited to:
  - a) the right of individuals to exercise control over their own medical treatment;
  - b) the right of individuals to exercise control over decisions concerning their own socio-economic position;
  - c) the right of all persons living with HIV/AIDS to be fully informed of all processes and procedures in which their interests are in any way involved; and
  - d) the right of all persons living with HIV/AIDS to consent, or withhold their consent, in all matters affecting them.

# Message from the Chair and the Executive Director

On behalf of the board of directors and staff of the HIV & AIDS Legal Clinic Ontario (HALCO), we are very pleased to provide this year's annual report.

This year marks the 20th anniversary of HALCO's establishment as Canada's sole full service community legal clinic for people with HIV. From 1991 to 1994, we operated on a project basis through the then ARCH Advocacy Resource Centre for the Handicapped (now called ARCH Disability Law Centre). Since opening our doors in 1995, we have handled more than 50,000 legal issues in areas of law including tenancy, income maintenance, human rights, immigration, and privacy. During this time, we have also, amongst other things, conducted countless workshops, provided numerous submissions to governments, and appeared at the Supreme Court of Canada on eight occasions. All of this work is done in partnership with people with HIV and organizations dedicated to human rights.

No words can describe the time in which the clinic was created. Death was an everyday experience. Life was ridden with stigma and discrimination. Since then, tremendous progress has been made with regard to the science of HIV. However, stigma surrounding HIV remains disturbingly pervasive. For example, based on 2012 data, 24% of Canadians feel uncomfortable wearing a sweater once worn by a person living with HIV. People with HIV continue to be charged, prosecuted, and convicted of aggravated sexual assault in relation to behaviours that pose little to approaching zero risk of HIV transmission.

To respond to this reality, HALCO continues to provide direct legal services for people with HIV while also engaging in public legal education, law reform, and community development initiatives. In the past year, HALCO appeared at the Supreme Court of Canada on three occasions and spoke to diverse audiences including people with HIV, health care professionals and students.

### Message from the Chair and the Executive Director

We are very pleased to report that our ability to continue our work has been bolstered thanks to additional funding from Legal Aid Ontario. Having started with one lawyer in 1995, we now have seven.

We are deeply indebted to the brave, hard-working, and compassionate people who founded the clinic during the catastrophic days of the early 1990's. We will not rest until the stigma surrounding HIV is eliminated and all people with HIV are able to enforce their human rights.

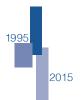
Your ongoing support of and participation in our activities is invaluable and warmly appreciated. Some of the activities of HALCO's busy year are highlighted in the pages that follow (please note that the activity report is for the period of August 1, 2014 to July 31, 2015, while the Audited Financial Statement is for the period of April 1, 2014 to March 31, 2015).

Michael Capp Barrister & Solicitor Chair, Board of Directors

Signature

Ryan Peck Barrister & Solicitor Executive Director

Signature



### Casework

From the beginning, HALCO's primary focus has been the provision of direct legal services for people living with HIV in Ontario. The clinic's direct legal services, referred to as "casework," are comprised of intake (summary advice, brief services, and referrals) and representation. HALCO's areas of legal practice include:

- Income Maintenance
- Human Rights
- Immigration
- Employment
- Privacy
- Health

- Substitute Decision-Making
- Regulated Health Professions complaints
- Tenancy
- Prison matters
- Insurance
- Other administrative law matters

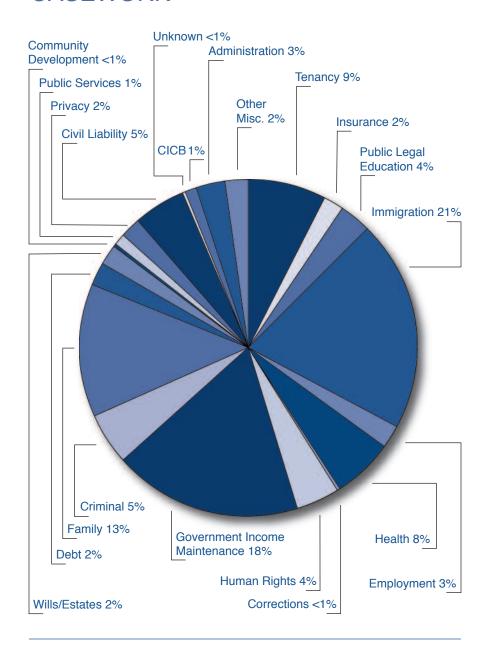
#### Intake - Advice, Brief Services and Referrals

HALCO continues to devote the majority of its resources to intake services, which are available to people with HIV in Ontario regardless of income.

The clinic handled 3773 intakes in this reporting period, which amounts to more than 300 legal issues per month. Income maintenance and tenancy matters comprised 26% of intakes, and immigration matters comprised 21%. The remainder were extremely varied, including criminal, health, human rights, and privacy law matters.

The chart on the following page provides a breakdown of HALCO's intake services for the reporting year of August 1, 2014, to July 31, 2015:

#### **CASEWORK**



#### **CASEWORK**

#### Representation

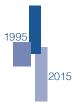
In addition to intake, the clinic provides full legal representation to financially eligible people living with HIV in Ontario. For this reporting period, the clinic opened 181 case files. A case file may be opened to handle a legal matter for an individual (e.g., representation at the Landlord and Tenant Board) or it may be a test case with the potential to benefit many people with HIV.

Almost 40% of the clinic's case files consisted of income maintenance and tenancy matters, and 25% consisted of immigration matters. HALCO also assisted clients with various other legal issues, including human rights, privacy, and health law matters.

#### **Some Case File Examples**

- Assisted a client to seek redress when the client's HIV status was disclosed, without the client's consent, by a staff member of a government agency
- Assisted clients to obtain long-term disability benefits after being improperly denied benefits
- Assisted clients to maintain rent-geared-to-income housing when their subsidies were improperly revoked
- Assisted clients to maintain social assistance when their benefits were improperly suspended

- Assisted a client to successfully sponsor her orphaned relatives
- Seven clients obtained permanent resident status through spousal sponsorships
- Won a precedent-setting case in which the Federal Court ruled that immigration officials must view people with HIV holistically when considering whether discrimination on different grounds (e.g., sexual orientation, HIV status) cumulatively amount to persecution



# Law Reform and Community Development

HALCO works to improve laws and the legal system to better meet the needs of people living with HIV. Law reform activities are frequently based in community development initiatives and seek to involve as many and as broad a range of individuals living with HIV as possible. HALCO has played a leading role in campaigns, court interventions and more.

The clinic's primary law reform activities during this reporting period focussed on the criminalization of HIV non-disclosure, and the intersections between criminal, health, tenancy and human rights law. In this reporting period, HALCO participated in the following court interventions:

#### Supreme Court of Canada:

- Autonomy in medical decision-making (R v. Carter)
- Criminalization of HIV non-disclosure (R v. Wilcox)
- Medical cannabis (*R v. Smith*)

#### Ontario Superior Court of Justice, Divisional Court:

- Health and human rights (Ontario v. De Lottinville)
- Tenancy and human rights (Duncan v. Toronto Community Housing Corporation)

#### Court of Appeal for Ontario

• Right to housing (Tanudjaja v. Canada).

In addition, the clinic provided submissions to the Ontario government regarding standards for police record check procedures, and to the Ontario Human Rights Commission regarding its *Policy and Guidelines on Disability and the Duty to Accommodate.* 

#### LAW REFORM

During this period, HALCO also furthered its work in relation to the trans legal needs assessment project; the medical/legal partnership with St. Michael's Hospital and other community legal clinics; and, the specialty legal clinic co-location project.

#### Criminalization of HIV non-disclosure

The criminalization of HIV non-disclosure continues to be the most pressing legal issue facing people with HIV in Canada. Canada remains one of the world leaders in pursuing these types of prosecutions, with the majority taking place in Ontario. The clinic is involved in various projects designed to bring fairness and consistency to the use of criminal law in relation to HIV non-disclosure.

Due to the Supreme Court of Canada's ruling in 2012, people with HIV continue to be branded as violent sexual offenders and face lengthy jail sentences even when no transmission occurs, a condom is worn and the risk of HIV transmission is so exceedingly low as to be approaching zero.

To ensure that the law is developed in accordance with up-to-date science and human rights, HALCO continues to:

- provide information and advice to people with HIV,
- work with defence counsel throughout Canada to ensure the best possible representation for people accused of non-disclosure offences, and
- fight for prosecutorial guidelines for Crown prosecutors handling allegations of HIV non-disclosure.

This year, HALCO again intervened in a criminalization matter at the Supreme Court of Canada (*R v. Wilcox*). With the Canadian HIV/AIDS Legal Network (Legal Network) and the Canadian Experts on HIV and Transmission Team

#### LAW REFORM

(a group of HIV physicians), HALCO co-sponsored *Bringing Science to Justice: Beyond the Canadian Consensus Statement on HIV and its Transmission in the Context of Criminal Law*, an event at the 2015 Canadian Conference on HIV/AIDS Research (CAHR). In addition, HALCO staff were on the advisory committee of a research study exploring the significance of immigration status and racialization in the context of the criminalization of HIV non-disclosure. The clinic continues to work with others to find alternatives to the use of the criminal law, and, continues to play a leading role in the Ontario Working Group on Criminal Law and HIV Exposure (CLHE).

#### **Autonomy in medical decision-making**

In February 2015, in the matter of *R v. Carter*, the Supreme Court of Canada unanimously ruled that people living in Canada have the constitutional right to medical assistance in dying. HALCO applauds the Supreme Court, and is proud to have intervened in the matter in partnership with the Legal Network.

The issue before the court was specifically about the right to receive assistance, if needed, in controlling the time and manner of death. The larger principle at stake is that the law must respect and protect autonomy in all medical decision-making throughout a person's life.

Autonomy in medical decision-making has always been central to the HIV movement, and HALCO maintains that medical choice throughout life, and not just at life's end, is vital. Instead of criminalizing assisted dying, a society committed to human rights ought to enhance the autonomy of all Canadians, including those living with disabilities, by scaling up access to quality health care and social services, as well as end of life care.

#### LAW REFORM

HALCO looks forward to consultations currently taking place to ensure that the Supreme Court's decision is properly implemented.

#### **Medical Cannabis**

For many years, HALCO has been involved in issues surrounding medical cannabis (marijuana). The clinic has provided input to various bodies on how to effectively manage the issue and intervened in court cases. Unfortunately, there continue to be serious problems surrounding the medical cannabis regime.

The Supreme Court of Canada recently resolved one of the problems. The former *Marihuana Medical Access Regulations* and the new *Marihuana for Medical Purposes Regulations* limited access to medical cannabis in dried form. In August 2014, the British Columbia Court of Appeal released its decision in *R v. Smith*, finding that the restriction relating to dried cannabis is unconstitutional. The decision was appealed to the Supreme Court of Canada, and HALCO, along with the Legal Network and the Canadian AIDS Society, intervened in the case.

HALCO is very pleased to report that the Supreme Court agreed with us, and its June 2015 decision made clear that patients with a legal authorization to use cannabis as medicine are entitled to consume it in various forms such as edible or topical products. As a result, authorized patients are no longer limited to smoking or vapourizing dried cannabis.

The clinic will continue to work on issues surrounding medical cannabis, including the lack of access to affordable cannabis.

#### LAW REFORM

#### **Human Rights, Housing Rights**

HALCO staff routinely provide legal services in relation to human rights issues and housing issues. This year, the two came together in important interventions and HALCO was involved.

The first, at the Court of Appeal for Ontario, was *Tanudjaja v. Canada*, a right to housing challenge brought by four individuals and the Centre for Equality Rights in Accommodation (CERA). Their position was that the governments of Canada and Ontario are in violation of the *Charter of Rights and Freedoms (Charter)* for their failure to address, and their contribution to, the growing crisis of homelessness and inadequate housing. The litigation sought a court order to require the provincial and federal governments to implement provincial and national housing strategies. HALCO, together with ARCH Disability Law Centre, the Dream Team, and the Legal Network, intervened in the matter, making clear, amongst other things, the central importance of affordable housing for people with HIV.

Unfortunately, the Court of Appeal refused to consider the 10,000 pages of evidence detailing the impact of homelessness, and dismissed the matter. The Supreme Court of Canada then refused to consider an appeal of the dismissal. As a result, a *Charter* challenge holding governments responsible for the housing crisis and consequent homelessness will not be heard.

The second was the matter of *Duncan v. Toronto Community Housing Corporation*, before the Ontario Superior Court of Justice, Divisional Court. HALCO, with the Advocacy Centre for Tenants Ontario and CERA, intervened in this matter.

The case involved an appeal from two decisions of the Landlord and Tenant Board (LTB) evicting a tenant from a Toronto Community Housing Corporation (TCHC) apartment. The tenant was evicted by the LTB even though he had missed the

#### LAW REFORM

hearing due to his disability. At the Divisional Court, the tenant argued that both the LTB and TCHC failed to accommodate him as required by the Ontario *Human Rights Code*. HALCO argued that in the circumstances of a tenant with a disability, the LTB and TCHC have a proactive duty to accommodate the tenant when they have information suggesting that the tenant has a disability connected to the matters at issue.

The Divisional Court granted the tenant's appeal and ordered that the LTB hold another hearing.

HALCO will continue to work with its partners to enforce the human rights of people with HIV, and to help ensure that housing is recognized as a fundamental human right.

#### **Access to Human Rights remedies**

HALCO, along with the Mental Health Legal Committee, intervened in the matter of *K.M. v. Kodama* (known as *Ontario v. De Lottinville*) before the Ontario Superior Court of Justice, Divisional Court.

The decision relates to two Human Rights Tribunal of Ontario (the "Tribunal") decisions that were reviewed by the Divisional Court together because they raised the same legal issue: whether a human rights complaint against a regulated professional should be dismissed because a decision has already been made by a regulating body that has oversight over the respective profession. In K.M.'s case, the College of Physicians and Surgeons (CPSO) had decided that there was no discriminatory conduct by a doctor. In the De Lottinville matter, both the Ontario Provincial Police and the reviewing Ontario Civilian Police Commission decided that there was no discriminatory conduct by police.

#### LAW REFORM

"K.M." is a trans man who made a complaint to the CPSO alleging that Dr. Kodama made discriminatory comments. The CPSO completed an initial investigation and found that there was "some degree of miscommunication," but that there was no "independent information" that the doctor had "intentionally treated" the patient in a "discriminatory manner."

K.M. subsequently applied to the Tribunal seeking financial compensation and other remedies for discrimination under Ontario's *Human Rights Code*. The Tribunal agreed to hear the case although the doctor argued that it should not proceed as the CPSO had already made a decision in the matter. The doctor then asked the Court to overturn the Tribunal decision to hear the case.

HALCO argued that a patient should not be prevented from making a complaint to the Tribunal about discriminatory treatment by a doctor solely because the patient already made a complaint to the CPSO. The Court agreed, and made clear that individuals should not have to choose between professional oversight and personal/systemic human rights remedies.

#### **TRANS-forming JUSTICE**

As previously reported, HALCO is leading a trans legal needs assessment project. The *TRANS-forming JUSTICE* project is dedicated to the legal needs of all trans communities in Ontario, and includes a particular focus on trans persons living with HIV.

Data will be gathered from trans communities and legal service providers through surveys, focus groups/workshops and interviews. The focus groups/workshops held for trans communities will include a public legal education component, and those held for legal service providers will include a "trans 101" component. There are four committees providing guidance to the project.

#### LAW REFORM

A report with recommendations will be produced in late 2016. The three-year project is funded by Legal Aid Ontario, with additional funding from the Ontario HIV Treatment Network. For more information, please see www.halco.org/ourservices/trans-legal-needs-assessment-ontario.

#### **Specialty Legal Clinic Co-location Project**

As previously reported, a number of Ontario's specialty community legal clinics and the Association of Community Legal Clinics of Ontario have been exploring the feasibility of a co-location model. The overarching objective of this project is improved service for client communities. The clinics anticipate that co-location will promote further collaboration and information exchange amongst the clinics, enable collective investment in improved information technology, and provide an opportunity to increase the efficiency of administrative systems.

All of the participating clinics have agreed that the project is not about the merging of clinics, but about co-location. All clinics will maintain their current incorporated status and continue to be governed by independent boards of directors representative of the communities they serve.

A lease is being negotiated in downtown Toronto, and it is anticipated that a move will take place in Spring 2016. It is important to note that HALCO will have distinct office space in order to respond to the unique confidentiality concerns of people with HIV. Further information about the project and the move will be announced shortly. For a history of the project, see www. specialtylegalclinics.ca/.



### **Public Legal Education**

HALCO provides information in print, on-line and in-person to help people understand legal issues, advocate for themselves, and seek broader social change.

HALCO also provides public legal education for governmental and non-governmental organizations.

For this reporting period, HALCO opened 198 public legal education files, over 70 of which related to in-person workshops across the province. More than 40% of files related to public health law and the criminalization of HIV non-disclosure, almost 15% related to immigration law, and the remainder were devoted to legal issues including social assistance, privacy, and human rights. The clinic spoke to audiences including people with HIV, AIDS service organization staff, law students, legal clinic staff and health care professionals.

HALCO also continued to engage in specific outreach to various communities such as gay men, women, Francophones, First Nations persons, and newcomers. In relation to newcomers, the clinic is developing, in partnership with other agencies, a public legal education program for the Ethiopian community in the greater Toronto area (anticipated start date is late 2015/early 2016).

The clinic also provided substantive input to documents created by the Legal Network, the AIDS Committee of Ottawa, and the AIDS Committee of Toronto, and assisted with the creation of a website designed for newcomers with HIV. In addition, HALCO produced two newsletters and had over 88,000 website visits.



### HALCO's James Kreppner Award

The late James Kreppner, a local, national and international social justice and human rights advocate, was a great friend to HALCO and to people with HIV and Hepatitis C. In recognition of James' innumerable contributions, HALCO established the **Kreppner Award** in 2010. The award recognizes the efforts of people who have made significant contributions in advocacy for and support of people with HIV, and people with HIV and Hepatitis C, in Ontario.

Our **2015 Kreppner Award** will be presented to **David Hoe** at our Annual General Meeting on October 15, 2015.

David, who has been living with HIV since 1984, has for three decades helped lead the fight against HIV/AIDS locally, provincially, and nationally. David was the founding executive director of the AIDS Committee of Ottawa, and served on the steering committee of *Opening Doors*, a provincial initiative that helps engage social workers and counsellors in caring for people with HIV.

#### JAMES KREPPNER AWARD

An outspoken critic of the criminalization of HIV non-disclosure, David has been interviewed by the media, spoken at public forums and advocated with Ottawa Public Health on this issue. Nationally, David worked as a senior policy advisor on HIV/AIDS with the federal government, and was a driving force behind *Leading Together*, the blueprint for Canada-wide action on HIV/AIDS.

David served as co-chair of Ontario's Advisory Committee on HIV/AIDS, and led the development of Ontario's *Strategy to Address HIV/AIDS to 2008*. As chair of the board of the Ontario HIV Treatment Network, he led the shift to impact-focussed research to ensure that research makes a real difference to the lives of people with HIV and their communities.

He has championed Poz Prevention as one alternative to criminalization in his work with Toronto People with AIDS Foundation and as a strategic advisor with the Gay Men's Sexual Health Alliance. He also served as an advisor to the Ontario Organizational Development Program. David's values and strategic thinking have influenced every part of Ontario's response to HIV.

We are extremely fortunate to have David involved in the HIV movement, and are greatly honoured to present him with the **2015 Kreppner Award**.

# Board of Directors and Staff

### **Board of Directors**

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John Nelson, STAFF LAWYER

Ryan Peck, executive director/lawyer

Amy Wah, STAFF LAWYER

Ashley Jacobs, ARTICLING STUDENT (JULY 2014 – MAY 2015) David Nisker, ARTICLING STUDENT (JULY 2015 – MAY 2016)

#### **Funders and Donors**

The generosity of HALCO's funders and donors allows the clinic to provide legal services to the HIV community. The clinic is grateful to all those who provide support, and particularly to the following funders:

#### **Core Funders**

Legal Aid Ontario
Ministry of Health and Long-Term Care

#### **Funding Partner**

M·A·C AIDS Fund

HALCO also sincerely thanks all of the individuals who provided volunteer services and donations.

#### **Thanks**

HALCO owes a special thanks to the following for their support of the clinic's work:

Dorian M. Needham Michael Battista Mark Blans Mercedes Perez Lizz Bryce **Andrew Pinto** Paul Burstein Michael Power Cheryl Robinson Michael Crystal Matt Cohen Rohan Robinson Richard Elliott Amanda Ross Insiya Essajee Jonathan Shime **Neil Evans** Morgan Sim **Nicole Simes** Sari Feferman Michael Fenrick Niiti Simmonds Cynthia Fromstein Adrienne Smith Jennifer Hild Marshall Swadron Pablo Irribarra Maddy Tosca Jesse Kalyshov Richard Wazana

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Aadil Mangalji Canada

Shane Martinez

Schnurr Kirsh Schnurr
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Anthony Navaneelan

Zeitguys Inc.

#### Audited Financial Statement for period

#### April 1, 2014 to March 31, 2015

# HIV & AIDS Legal Aid Clinic (Ontario) Statement of Financial Position

March 31

	LAO Operating Fund	MOH AIDS Bureau Fund	O Legal sements Fund	Donations Fund	TCTC Fund	Project Funding Fund	2015 Total	2014 Total
Assets Current assets Cash Interfund advances Short-term investments (Note 3) Funding and other receivables Sales tax recoverable Prepaid expenses	\$ 194,724 28,504 - 9,418 16,689 14,306 \$ 263,641	\$ 35,560 432 - - 493  \$ 36,485	\$  1,381 (2,500) - - 693 - (426)	\$ 6,125 (2,403) 75,091 - 333  \$ 78,846	\$ 27,647 - - - 3,162 - - \$ 30,809	\$ 37,579 (24,033) - - - - - - \$ 13,546	\$ 303,016 75,091 9,418 21,070 14,306 \$ 422,901	\$ 151,486 75,091 59,719 10,710 11,453 \$ 308,459
Liabilities and fund balances Current liabilities Accounts payable and accrued liabilities Deferred revenue Interfund payable (receivable)	\$ 55,117 232,096 18,642 305,855	\$ 9,752 25,922 35,674	\$ (4,604) (4,604)	\$ 443 - (21,443) - (21,000)	\$ 3,031 38,565 (964) 40,632	\$ 771 23,556 (17,553) 6,774	\$ 69,114 294,217 	\$ 64,799 209,580 
Fund balances (deficit) Externally restricted Internally restricted Unrestricted	(42,214) (42,214) \$ 263,641	811 - - 811 \$ 36,485	 4,178 	99,846 	(9,823) 	6,772 	1,938 99,846 (42,214) 59,570 \$ 422,901	(36,761) 114,450 (43,609) 34,080 \$ 308,459

#### Audited Financial Statement for period

#### April 1, 2014 to March 31, 2015

# HIV & AIDS Legal Aid Clinic (Ontario) Statement of Operations and Fund Balances

Year ended March 31

	LAO Operating Fund	
Revenue		
Legal Aid Ontario		•
Direct receipts	\$ 650,358	\$ -
Indirect receipts (Note 4) AIDS Bureau	12,419	329,172
Project funding	-	525,172
Donations	-	
Interest	362	29
Recovered from clients		<del>-</del>
	663,139	329,201
Expenses		
Salaries and benefits	423,866	308,644
Occupancy	104,476	-
Supplies and services Communications	29,197	4,074
Travel	22,093 14,182	-
Indirect payments (Note 4)	12,419	-
Equipment and maintenance	11,649	
Fundraising development		-
Legal disbursements	-	-
Professional dues	4,953	3,308
Library	3,313	-
Project expenses	35,596	<del>-</del>
	661,744	316,026
Excess (deficiency) of revenue over expenses	1,395	13,175
Fund balances (deficit), beginning of year	(43,609)	(12,364)
Fund balances (deficit), end of year	\$ (42,214)	<u>\$ 811</u>

Dis	LAO Legal sbursements Fund	Donations Fund	TCTC Fund	Project Funding Fund	2015 Total	2014 Total
-	12,765 - - 2,299 - 15,064	\$ - - - 16,167 9 - - 16,176	\$ 33,710 - - - 22 - - 33,732	\$ - 98,074 - 48  98,122	\$ 696,833 12,419 329,172 98,074 16,167 2,769	\$ 621,029 8,516 329,150 56,397 21,426 1,809 1,066
-	11,798	17,692	-	68,482 - - - - - - - -	818,684 104,476 33,271 22,093 14,182 12,419 11,649 13,088 11,798 8,261 3,313	831,003 100,972 30,955 20,848 9,978 8,516 8,106 16,992 10,221 17,474 9,853
-	11,798 3,266 912 4,178	30,780 (14,604) 114,450 \$ 99,846	34,745 34,745 (1,013) (8,810) \$ (9,823)		76,710 1,129,944 25,490 34,080 \$ 59,570	39,894 1,104,812 (65,419) 99,499 \$ 34,080

### Notes