Annual Report

2025-2026

OUR PATRONS

JOINT PATRONS
HIS EXCELLENCY
THE HONOURABLE CHRIS DAWSON AC APM,
GOVERNOR OF WESTERN AUSTRALIA
AND MRS. DARRILYN DAWSON

EMERITUS PROFESSOR GEORGE YEOH BSc, PhD
LABORATORY HEAD, LIVER DEVELOPMENT
& CANCER, HARRY PERKINS INSTITUTE OF
MEDICAL RESEARCH

Dear Friends of the Institute

Numerous functions I attended this year have strongly reinforced my view that engagement with our community in delivery of beneficial outcomes in health is important. The activities of the Lions Cancer Institute of WA clearly demonstrate this. It is a Virtuous Cycle. In both health delivery and health research it has achieved significant results it can be proud of. It is an undertaking by the community, for the community!

The scope and impact of its screening activity will, no doubt be documented in this annual report. The Mobile Screening Clinic has visited 41 locations and its contribution towards combatting skin cancer, including melanoma, among our rural community through early detection cannot be overstated.

The Institute's support of research has been substantially increased. It continues to do more to support vacation scholars, undergraduate and postgraduate research scholars. Medical research is a labour-intensive undertaking based on the involvement of dedicated scholars. Funding by The Institute enables discovery activity in our state, supports WA "grown" researchers and mitigates the brain drain to the east. It is worth noting that it is increasingly challenging to obtain federal funds to support WA-based medical research and the contribution of not-for-profit organisations is vital to maintain our competitiveness. The Lions Cancer Institute of WA is doing its bit! As a researcher, I am especially grateful for the support of the WA community and its prioritisation of health, research in particular, to achieve better outcomes for all West Australians.

To all friends, supporters and volunteers, sincere thanks for keeping the wheels of The Lions Cancer Institute of WA turning.

Best wishes to you and your loved ones,

George Yeoh
Patron

BOARD OF DIRECTORS

ELECTED MEMBERS

Lion John Osborne	Chairman
Lion Gail Jenkins	Vice Chairman
Lion Rob Garratt	Treasurer
Lion Graham Bateman	Director
Lion Jim Foster	Director
Lion Christine Walker	Director
Lion Hans Hoette	Director
Lion Phil Chinnery	Director

APPOINTED MEMBERS

Mr William Crosthwaite CPA	Secretary
Dr Alan Wright RFD, MBBS, MFM, GCUT	Medical Director
Ms. Kylie Laverty RN, MNurs, BHealthSc	Assistant Medical Director
Mr Rob Fitzpatrick AM FRCS, FRACS	Medical Advisor
PDG Garry Irvine OAM	Director Business Development, Multiple District & New Zealand Liason
PDG Neil F. Saunders	Finance & Administration Advisor

EX OFFICIO MEMBERS

DG Ros Barnes	District 201WA
2nd VDG Hazel Masters	District 201WA

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Lions Cancer Institute (WA) Inc.

ABN: 26 521 960 054

The Lions Cancer Institute (WA) Inc. is a “Not For Profit” medical research institution.

The Institute holds an Endorsement from the Australian Tax Office as an income tax exempt charitable entity (ITEC) and is a deductible gift recipient bracket (DGR).

The Institute holds a licence issued under the provisions of the Charitable Collections Act.

Auditor/Accountant is Dharam Ghangas – Auditax Accountants

Institute website: www.lionscancerinstitute.org.au

CHAIRMAN'S REPORT

LION JOHN OSBORNE
CHAIRMAN

I am pleased to present this report and to acknowledge Lion Phil Chinnery for his stewardship of the Lions Cancer Institute (WA) Inc. (LCI) during the preceding 12 months, from January 2025 to January 2026. I commenced my term as Chairman in January 2026.

During the year, LCI maintained its commitment to providing skin screening services across remote and regional Western Australia. The Institute also continued to support research into the causes and effects of cancer and to promote the vital message of skin protection.

SKIN CANCER SCREENING

The skin screening program reached communities from the Kimberley to the Goldfields, the Eastern Wheatbelt and the Great Southern. In all, 38 locations were screened during the year.

RESEARCH

LCI continued to strengthen its relationship with Curtin Medial Research Institute (MRI). Ongoing scholarships include the Colin and Sue Beauchamp Research Scholarship in Melanoma Research and the Karen and Joshua Chinnery Memorial Scholarship. Agreement was also reached to provide rolling three-year top-up scholarships under the Lions-Lotus PhD Scholarship for three students undertaking liver research, commencing in 2027.

GOVERNANCE

LCI's volunteers are drawn from the medical and nursing professions and are therefore governed by the requirements of the Australian Health Practitioner Regulation Agency. During the year, LCI undertook a comprehensive review of its operations to ensure LCI operations are voluntarily aligned with AHPRA regulations.

PROMOTION

LCI was represented at the Health Cert Skin Cancer Conference in Queensland, where we developed a closer relationship with the Lions Tasmanian Cancer Foundation. This relationship has led to ongoing collaboration in the development of their skin screening proje

■ **Lion John Osborne — Chairman**

OUR INCOMES

Current funding is primarily from:

a. **Telemarketing:** Telemarketer is contracted to source donations from parties excluding Lions clubs and private individuals in particular special attention is given to the Children's Big Day Out event. There are substantial fees for the collection of these funds.

b. **Donations from Lions Clubs:** These are usually annual donations and vary in size from club to club depending on available funds and knowledge of the Institute.

c. **Sponsors of the new Screening Truck:**

Recharge Petroleum	Fuel
Great Southern Fuels	Fuel
MLG	

d. **Major Suppliers:**

Truck Centre (WA)	Volvo Dealer
Omnibus Services	Body Builder

e. **Bequests**

f. **Private Donations**

g. **Corporate Donations**

h. **Grain Growers**

Special Children's Big Day Out

Competitors for these funds include:

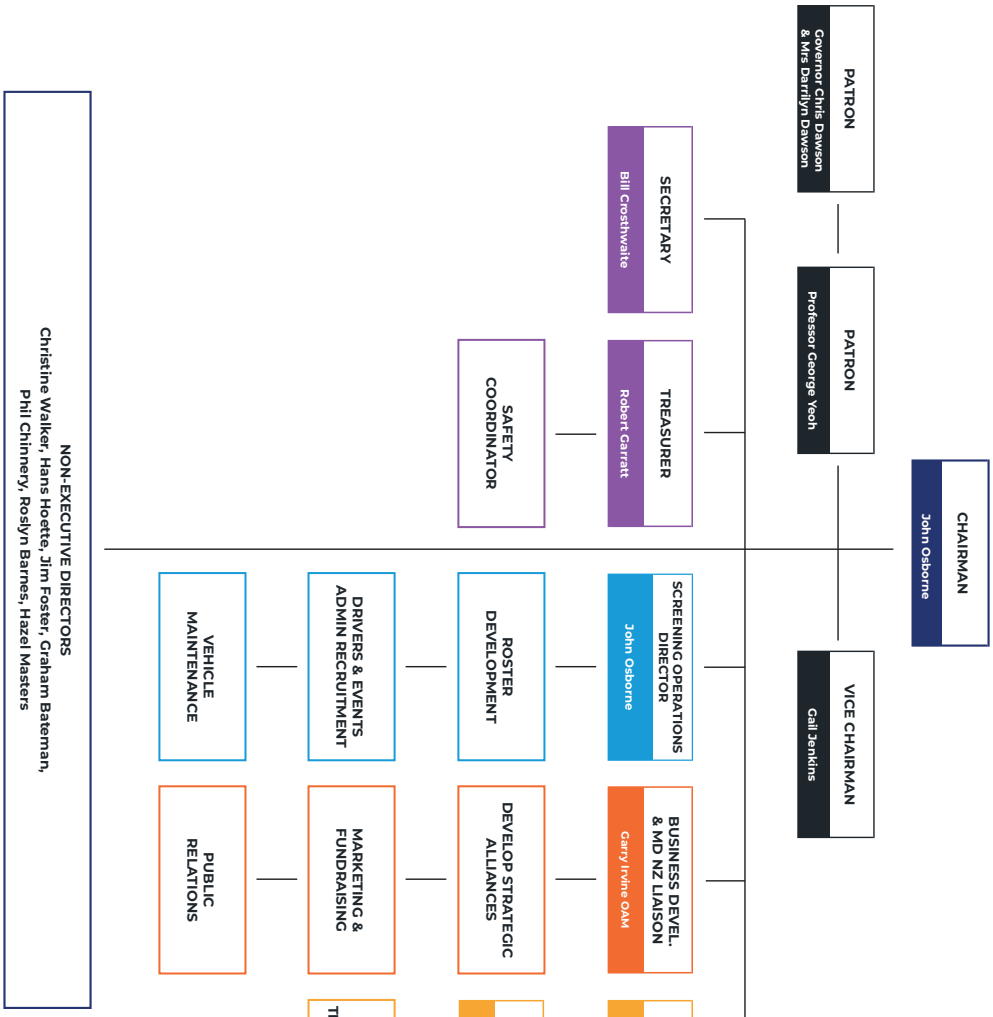
a. **Other Lions Projects**

b. **Other Telemarketing Operations**

c. **Other Charities**

d. **Other Research Organisations**

ORGANISATIONAL CHART



BUSINESS DEVELOPMENT, MULTPLE DISTRICT AND NEW ZEALAND LIASON REPORT

KYLIE LAVERTY RN MNurs, BHealthSc

2025-2026: BUILDING REACH, RELATIONSHIPS AND IMPACT

During 2025–2026, the Lions Cancer Institute strengthened the partnerships, communications and public profile supporting the delivery and long-term sustainability of free community skin screening across rural, regional and remote Western Australia.

CUMULATIVE COMMUNITY IMPACT TO 30 JUNE 2026

19,000+ people screened

123 Western Australian locations reached

80,000+ kilometres travelled

20,000+ volunteer hours contributed

1 in 5 people screened advised to seek further medical assessment

Behind these figures are thousands of individuals, families and communities.

LCI's screening service is visual, observational and non-diagnostic. Each interaction provides an opportunity to increase awareness of skin changes, encourage self-checking and help participants understand when to seek medical advice.

This knowledge is often shared with families, friends and workplaces, extending the program's influence beyond the screening room.

COMMUNITY PARTNERSHIPS AND VOLUNTEERS

LCI continued working with Lions Clubs, Shires, Community Resource Centres, health services and community organisations to support local screening events and awareness. These partnerships provide local knowledge, trusted connections, venues, promotion and practical support, enabling LCI to reach communities that may otherwise experience barriers to accessing skin screening.

More than 20,000 volunteer hours demonstrate the extraordinary contribution of LCI's screeners, drivers, administrators, Board members and community hosts.

SCREENING TEAM ONBOARDING AND FAMILIARISATION

A familiarisation session for prospective screening team members was held on 19 January 2025. Well-attended and positively received, this session provided an introduction to LCI's mobile skin cancer screening program, clinical dermatoscopy procedures, and expectations while on tour. A guided walkthrough of the screening coach was included. Participants expressed strong enthusiasm for joining the program and contributing to rural outreach.

STRATEGIC COMMUNICATIONS AND MODERNISATION

During the year, a comprehensive Public Relations and Marketing Framework was developed and presented to the Board. It proposed a coordinated approach to media and digital communications, regional promotion, stakeholder engagement, volunteer recruitment, sponsor recognition and reporting measurable community impact.

Development of LCI's new website also commenced, alongside updated public-facing resources and community host materials.

Regional photographers Rhiannen Austin in Corrigin and Ann of Rustic Pics in Donnybrook were engaged to build a library of authentic regional imagery, enabling LCI to better represent the communities, volunteers and partnerships behind its impact.

Together, this work established a foundation for more consistent promotion, clearer information, stronger sponsor recognition and a modern public identity. LCI's regional screening activities also attracted interest from ABC Kimberley, Triple M Regional News and 7NEWS Regional WA, creating opportunities to broaden awareness and strengthen the Institute's regional profile.

BUSINESS DEVELOPMENT, MULTPLE DISTRICT AND NEW ZEALAND LIASON REPORT

SPONSORS AND COMMUNITY PARTNERS

LCI's work is made possible through the commitment of its sponsors, Lions Clubs, volunteers and community partners.

The support of **CBH Group, MLG Oz, Curtin University, Great Southern Fuel Distributors and Recharge Petroleum**, together with LCI's other valued sponsors and supporters, contributes to community engagement, cancer research, equipment and screening services across Western Australia.

LCI sincerely acknowledges every sponsor, host organisation, community partner and volunteer whose contribution made this work possible during 2025–2026.

SUPPORTING CANCER RESEARCH

Through its relationship with Curtin University and the wider cancer research community, LCI continued providing PhD top-up scholarship support to emerging cancer researchers.

This investment strengthens research capability and reflects LCI's broader contribution to cancer research, education and community impact.

LIONS SKIN SCREENING ACROSS AUSTRALIA

Lions-supported skin screening continues to grow across Australia, creating opportunities for stronger relationships, reciprocal learning and collaboration.

South Australia brings more than a decade of regional screening experience, while the Lions V Districts Cancer Foundation provides mobile screening across Victoria and southern New South Wales.

Tasmania continued developing its community skin screening program during the year, progressing preparations for future service delivery.

Together with LCI's established Western Australian program, these initiatives reflect the growing reach of Lions-supported community skin screening across Australia.

NEW ZEALAND

During 2025–2026, the Lions Cancer Trust moved from the launch of its first mobile screening unit in March 2025 into active community screening. This represents an important milestone in a long-standing relationship with LCI WA, which has shared its experience and established screening model with New Zealand Lions over many years.

LOOKING AHEAD

Building on the foundations established during 2025–2026, LCI will continue strengthening its regional partnerships, public profile, sponsor recognition and relationships with Lions-supported screening programs across Australia and New Zealand.

■ **Kylie Laverty RN MNurs, BHealthSc**

MEDICAL DIRECTOR'S REPORT

DR ALAN WRIGHT
RFD, MBBS, MFM, GCUT
MEDICAL DIRECTOR

2026 has been a busy year not only in terms of actual skin screening, but also, in terms of updating our policies and procedures and the documentation supporting those, and also in continuing to recruit new screeners.

SKIN SCREENING

The screening year started in February and will conclude in November of this year.

As of 24 September, 37 sites have been visited with 45 days of screening. The sites visited were in the northern, central and southern wheat belt and also the goldfields.

In this time, 2470 clients were screened, and of these 496 were advised to see their General Practitioner. This represented a suspicious lesion pick up rate of 20%. This is consistent with our role in screening populations that are at risk, as opposed to general population screening.

For the screening year 12 screeners participated and 3 trainees will have undergone supervised screening.

OTHER ACTIVITIES RELATED TO SKIN SCREENING

1. The Assistant Medical Director, Kylie Laverty is undertaking a review and amendment of all documents related to screening to ensure that they conform to National Regulatory Guidelines. The reason for this is that the type and style of these documents changes and we have to conform to National Guidelines. The goalposts for social and regulatory requirements have moved significantly since the Institute was established.
2. Kylie Laverty attended the HealthCert conference again this year and has established relationships with the members of the review party currently reviewing the guidelines for Population Skin Screening. At this conference she also established contact with the newly formed Tasmanian institute and is assisting them in their setup. This bodes well for future cooperation and collaboration.
3. We continue to recruit a steady trickle of new screening recruits. Their training has been enhanced by introducing supervised sessions for the new screeners who have completed the course. These sessions were introduced to address the apprehension of new recruits about missing things. They have been well received by the trainees.
4. After discussions with Kylie at the HealthCert conference, HealthCert has agreed to finance 5 scholarships to recruit and train regional trainees.

SCREENING UNIT

The new screening unit has been in operation for about 18 months now and is a marked improvement over the "old bus".

We had some improvements to the lighting carried out at the beginning of 2026 and these are working well. We also had some new furniture to increase the working comfort of the screeners.

Most importantly the screeners are more comfortable in the new environment.

OVERALL IMPRESSION OF SKIN CANCER PREVENTION IN THE AUSTRALIAN POPULATION

My overall impression of skin cancer prevention in the Australian population garnered from my own screening and travel experience is as follows:

1. The prevalence of suspicious lesions in the generations older than 50 years of age remains high as would be expected.
2. The prevalence among workers aged under 50 is low and I think can be attributed to employer policies of wearing long and long and wide brimmed hats while on the job.
3. Farmers are also more aware and dress accordingly.
4. The recommendations for prevention by the Cancer Council have changed and we should promulgate these changes during our screening encounters.
5. The generations under the age of 25 seem to have lost the message and tanning has become popular again. For this reason, screeners are being encouraged to take the screening opportunity to educate our clients on skin cancer prevention.

SCHOLARSHIPS

Our Scholarship programs continue and these are discussed in detail elsewhere in the LCI report.

■ **Dr Alan Wright — Medical Director**

SCREENING EVENTS MANAGER'S REPORT

LION JOHN OSBORNE
SCREENING MANAGER

The screening program continued traveling north from where we left off from last year. Screening clinics were held in 38 locations and included 45 days of screening during the period covered by this report. The locations were Onslow, Pannawonica, Karratha, Wickham, Roebourne, Port Hedland, Broome, Derby, Kununurra, Wyndham, Tom Price, Paraburdoo, Newman, Kulin, Hyden, Gingin, Toodyay, Lions Health Awareness Day Maylands, Dowerin, Wickepin, Dowerin, Wyalkatchem, Southern Cross, Merredin, Kalgoorlie, Menzies, Leonora, Laverton, Leinster, Collie, Donnybrook, Boyanup, Narrogin, Kojonup, Tambellup, Albany, Denmark and Mount Barker. The screening clinics were hosted by local community organisations including Lions Clubs, nurse stations, medical centres, St John Ambulance, Men's Sheds, Country Women's Association, Rotary, Nintirri Centre, Karingal Centre, and Community Resource Centres.

LCI acknowledges the support and thanks to all host organisations involved with the Screening program.

Online booking was utilised by all hosts during the year. This system sends out reminders and reduces the number of "no shows" on screening days.

SCREENING RESULTS 2025-2026

Males	1075
Females	1395
Total	2470
Further Investigation Recommended	17%

2470 TOTAL SCREENED

Last screened within 6 months	73
Last screened 6 - 12 months	272
Last screened over 12 months	1357
Never Screened	768

Hours Driving	181
Hours Screening	1356
KM Travelled	13544

Note: Hours Screening does not include travel time.

SCREENING RESULTS 1991-2025

Total Screened	96638
Further Investigation Recommended	24143
Further Investigation Recommended	25%

VOLUNTEERS

During the year we increased our active screener volunteer number to 20 and maintained the driver administrator number at 11.

We acknowledge and thank the volunteers for their continued support and dedication to bring the Screening Service to the rural and remote areas of Western Australia.

INFORMATION AND TECHNOLOGY

The Screening Data application was updated to enable our information to be better aligned with the information that the National Targeted Skin Cancer Screening Road Map will be seeking.

SCREENING UNIT

The screening unit travelled 13,500 Km during the year with no major issues. Additional lighting was installed in the examination rooms.

■ **Lion John Osborne — Screening Manager**

KAREN AND JOSHUA CHINNERY SCHOLARSHIP PHD STUDENT REPORT

JORDAN FYFE

PROJECT TITLE

Shooting the messenger; targeting exosomes for the detection and treatment of pancreatic cancer.

LEAD RESEARCHER

Ms. Jordan Fyfe

PROJECT SUMMARY

Pancreatic cancer (PC) is one of the deadliest cancers, with 90% of people dying within five years of diagnosis. PC is usually detected late in disease as the cancer cells grow quickly and can spread to other parts of the body (known as metastasis) before causing symptoms. PC is also very hard to treat, and the therapies currently used don't often work. With the number of people diagnosed with PC on the rise, we urgently need to improve our ways of detecting and treating this fatal disease. PC cells can communicate with other cells, like immune cells, by sending small bubble-like particles called exosomes. Exosomes are naturally released and carry many different molecules (proteins, lipids, genetic information and other substances) usually found inside cells. When other cells take up exosomes, these molecules are delivered and can change how the cell functions.

Our research group recently discovered an important lipid molecule inside exosomes produced only by PC cells. This lipid is known to control normal immune responses but is also involved in various immune disorders, including cancer. In this project, we explore how exosomes transport this lipid to immune cells to stop their tumour-killing functions. We aim to see if blocking this transport can boost immune cells to find and kill cancer cells. We also want to study other materials inside exosomes from PC patients to know if they can be used as a non-invasive way to detect PC. This study will help us understand how PC cells control immune cells and may provide new ways to detect and treat this deadly disease.

PROJECT UPDATE

Pancreatic cancer (PC) is one of the deadliest types of cancer, which has a five-year survival rate of only 11%. PC is usually detected very late as the cancer cells grow rapidly and can spread around the body before symptoms appear. PC is also very hard to treat, and the therapies currently used don't often work. For these reasons, finding new ways to detect PC early and improving the treatments used are critical for us to increase the survival and quality of life for patients.

My research focusses on understanding how PC cells transform the body's immune cells by sending tiny 'bubbles', called exosomes. Exosomes are naturally released and carry many different molecules (proteins, lipids, genetic information and other substances) usually found inside cells. Cells use exosomes as a way of communicating as they can deliver these molecules to change how the receiving cells function.

In my PhD, I am examining how PC cells use exosomes to transport biologically active lipids to other cells, particularly immune cells, and how they modify these cells to facilitate disease progression. Our recent study has revealed that PC cells, but not normal pancreatic cells, release exosomes containing an important lipid molecule called sphingosine-1-phosphate (S1P). This lipid is known to be involved in many cell processes, and is also a key player in controlling the movement and functional activity of immune cells.

The first part of my project has focussed on understanding whether S1P is actively involved in shaping the immune responses induced by PC-derived exosomes. I am currently looking at how these exosomes prevent macrophages (a subtype of immune cell) from polarising into anti-tumour phenotypes, which are involved in recognising and killing tumour cells. To study this, I have treated macrophages in different resting states (pro- or anti-tumour) with exosomes isolated from PC cell lines. These macrophages have then been analysed

KAREN AND JOSHUA CHINNERY SCHOLARSHIP PHD STUDENT REPORT

using different techniques to assess protein and DNA expression) to determine how the exosomes are affecting their phenotype and function. In addition to this, I have treated the cells with inhibitors specific to the S1P receptors to see if blocking S1P prevents the effect of the exosomes. Interestingly, my data shows that when two of these receptors are blocked together, the effect of the exosomes is significantly decreased, and the anti-tumour activity is rescued.

In the next part of my project, we will validate if PC patients' exosomes contain abnormal amounts of S1P. If confirmed in the clinic, this will provide a novel marker for detecting PC. Additionally, several studies have attempted to address PC's increasing the death toll, yet many therapies fail to improve tumour responses and are often accompanied by high levels of toxicity. We will also reveal if inhibiting S1P signalling can boost anti-cancer immune responses to improve patient outcomes in PC. This is promising as targeting S1P can provide a safe, yet effective way to treat various immune controlled disorders.

OUTCOMES / IMPACT

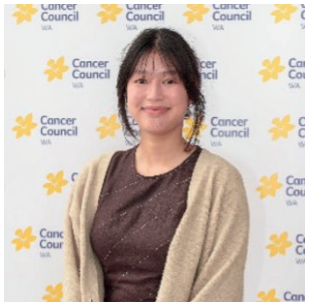
Thus far, we have found that PC-derived exosomes have a unique lipid composition, which can be distinguished from healthy exosomes. We have also identified that exosomes can transport bioactive lipids, like S1P, to immune cells as a way of altering their tumour-fighting capacity. Along with this, we have seen that we can rescue the anti-tumour functions of macrophages by blocking certain S1P signals.

In whole, this project will add valuable insight into how exosomes promote PC development and progression. Exosomes are also an attractive source for disease-specific markers as they appear very early in disease are found in all body fluids (blood, urine, saliva, tumour ascites), meaning samples can be collected early and non-invasively. Our data can provide novel, non-invasive markers to aid in detecting PC during its early stages. These results may also offer new ways to predict or track how different patients will respond to treatment, guiding the use of personalised therapies. As a result, this will improve the poor outcomes seen in PC by increasing patient survival and quality of life. Indeed, we believe this project can aid in the fight against pancreatic cancer.

Ms Fyfe also made the following comments: "This research would not be possible without the generous donations from the community. Without the generosity of our donors, I could not dedicate the time and resources to pursue this research. I am incredibly lucky to receive this funding and am truly thankful to be part of the community. Thank you to everyone who has donated."

■ **Jordan Fyfe — PhD Student**

KAREN AND JOSHUA CHINNERY SCHOLARSHIP PHD STUDENT REPORT



ABIGAIL LIM

PROJECT TITLE

Novel therapy to promote recovery for leukaemia patients undergoing haematopoietic stem cell transplant.

PROJECT SUMMARY

Abigail Lim was awarded the Karen and Joshua Memorial PhD Scholarship in January 2026. An outline of Abigail's PhD project follows:

Leukaemia is a blood cancer that originates in the bone marrow and characterised by the growth of abnormal blood cells. Bone marrow transplant is one of the life-saving treatments used to treat high-risk leukaemia patients.

However, complications post-transplantation including infections often occur and may be life-threatening. OM-85 is an oral treatment for respiratory infections and made from inactivated cell wall components of several respiratory bacteria that are no longer capable of causing disease.

Our pilot studies suggest that OM-85 can increase blood stem cell populations. Therefore, the purpose of this project is to investigate if OM-85 can accelerate blood cell recovery post-bone marrow transplant with the hope that this will lower the risk of life-threatening infections in patients.

Using mouse model systems and cell culture methods, I am testing whether OM-85 can help the blood system recover after bone marrow transplant. I will study how it affects stem cell recovery, function, and behaviour—both in healthy mice and in mice with leukaemia.

Positive results from this study could improve survivorship not only for leukaemia patients undergoing bone marrow transplant, but for patients with other cancers and diseases treated with bone marrow transplant.

Given OM-85 is well tolerated in adults as well as children and has been approved for use by the European Medicines Agency and now in clinical trials in Australia, findings from this project can be readily fast-tracked for translation into clinical trials for children with high-risk leukaemia.

■ **Abigail Lim — PhD Student**

LIONS-LOTUS PHD SCHOLARSHIP STUDENT REPORT

ANJALI GHIMIRE

PROJECT TITLE

Predicting liver cancer prior to its development to improve early detection and survival

PROJECT TIMELINE

March 2022 - July 2026

PROJECT SUMMARY

Cancer has always been a disease associated with fear and loss, and this became deeply personal to me after losing my father to lung cancer. His experience strengthened my determination to contribute to cancer research and, in particular, to improve the chances of detecting cancer before it becomes difficult to treat. This personal motivation has remained an important part of my PhD journey and has driven my interest in understanding the earliest stages of cancer development.

Liver cancer, particularly hepatocellular carcinoma (HCC), is a major cause of cancer-related death worldwide and its incidence continues to rise in Australia. Most HCC develops in people with underlying chronic liver disease caused by conditions such as viral hepatitis, alcohol-related liver damage, or fatty liver disease. Although people with advanced liver disease are regularly monitored, current screening methods do not always detect cancer early enough. By the time HCC is diagnosed, treatment options can be limited, and survival outcomes are often poor.

My PhD research has focused on understanding the changes that occur in the liver before cancer becomes established, with the long-term goal of improving early detection. A particular focus of my work has been a population of liver cells known as disease-associated hepatocytes (daHeps). These cells emerge within chronically damaged liver tissue and may represent an important stage in the progression from liver disease towards cancer. Understanding where these cells occur and the environment in which they develop may help us better understand how liver cancer begins.

During my PhD, I used advanced spatial profiling techniques to investigate the location and characteristics of daHeps within human liver tissue. Using the GeoMx Digital Spatial Profiler, I examined different regions of liver tissue from patients with chronic liver disease and liver cancer to understand the molecular features surrounding these cells. I also used immunofluorescence staining to investigate the relationship between daHeps, inflammation and fibrosis. In particular, I examined CD45, a marker of immune cells, and α-SMA (alpha smooth muscle actin), a marker associated with liver fibrosis and scar formation. My findings showed that daHeps are associated with areas of increased immune activity and fibrosis, supporting the idea that these cells may be involved in the changes that occur as chronic liver disease progresses towards HCC.

A second major component of my PhD involved studying DNA methylation, an important epigenetic process that can alter how genes function without changing the DNA sequence itself. I generated a whole-genome methylation atlas using long-read Oxford Nanopore sequencing of DNA isolated from resected human liver tissue, including non-cancerous liver parenchyma and malignant hepatocytes. This allowed me to identify regions of the genome where methylation patterns differed between non-cancerous and cancerous liver cells. These tumour-associated methylation patterns provide a valuable resource for identifying molecular signatures that may distinguish liver cancer from non-cancerous liver tissue.

Importantly, this work provides a foundation for the future development of circulating tumour DNA (ctDNA)-based methylation assays. Such blood-based tests, if successfully developed and validated, could potentially provide a minimally invasive approach for detecting tumour-associated changes and complement existing liver cancer surveillance methods.

Overall, my PhD has brought together spatial biology and whole-genome epigenetic profiling to improve our understanding of the biological changes that occur during the development of liver cancer. The findings from this work provide new insights into the environment surrounding disease-associated hepatocytes and identify tumour-associated methylation patterns that may have future value as biomarkers for early detection. This work is ongoing, with further validation and translation of these findings underway. Ultimately, I hope this research will contribute to the development of better approaches for detecting liver cancer earlier and improving outcomes for patients.

I would like to sincerely thank the Lions Cancer Institute and its generous donors for supporting my PhD through the Lions-Lotus Top-Up Scholarship. This support has been invaluable throughout my PhD, helping to ease the financial pressures of undertaking a long research journey and making a meaningful difference to both my academic journey and my family. I am deeply grateful for the support, encouragement and confidence that the Institute and its donors have placed in me and in my research

■ **Anjali Ghimire — PhD Student**

Million Dollar View

Community Day Leinster

Screening Crew: Kylie, Peter, Jim, Rob and Gail

TREASURER'S REPORT

TREASURER'S REPORT

Treasurer's Report:
We are pleased to present the Treasurer's Report for Lions Cancer Institute (WA) Incorporated for the financial year ended 30 June 2026.

The 2025/2026 financial year saw a continuation of the very generous support of the Western Australian business community, Lions Clubs across Western Australia, and the many cash donors who attended over 41 skin screening events in rural and remote communities stretching from The Great Southern region, the wheatbelt and out to the Goldfields regions.

These generous donations have enabled the Lions Cancer Institute (WA) Incorporated to continue its screening program in addition to supporting four PhD students across three scholarship programs over the year and into the future. They have also enabled the institute to invest surplus funds to ensure these programs will continue into the foreseeable future through a strengthened Balance Sheet and investment portfolio.

We continue to work to spread the word of the importance of skin cancer awareness, early detection, and prevention. Our screening events are now attracting a younger demographic which supports our efforts to raise awareness in rural and remote communities.

Financial Performance:
During the year, the institute received total net income of $465,267 (including unrealised gains of $67,667 in its Investment Portfolio), compared with $505,312 (including unrealised gains of $73,896 in its Investment Portfolio and the one off Capital Gain on the sale of the old Screening Unit of $27,273) in the previous financial year. This income comprised donations from the business community, Lions Clubs and individuals, investment income and unrealised gains in the value of its Investment Portfolio.

Total expenditure for the year was $281,956 compared with $257,036 in the previous year. The principal areas of expenditure were screening event expenses, research scholarships and administration expenses.

The charity recorded a surplus of $183,311 for the year compared to $248,276 for the previous financial year. The result reflects a reduction in donation income and a slight increase in costs of administration and non-vehicle related screening costs.

Financial Position:
At the end of the financial year, the charity had total assets of $2,934,077 and total liabilities of $178,279, resulting in net assets of $2,755,798.

Cash and other financial reserves remain adequate to support the institute's planned activities and meet its ongoing commitments. The Net Cash Position of $279,719 was an improvement over the 2024-2025 Financial Year of $138,354. The Board continues to monitor cash flow and reserves carefully to ensure that the institute remains financially sustainable.

Financial Management and Accountability:
The Board recognises its responsibility for ensuring that the institute's funds are managed prudently and used in accordance with the institute's purposes.

Appropriate financial controls and reporting processes are maintained, and the Board receives regular financial reports to assist with monitoring it's financial performance and position.

Outlook:
Looking ahead, the institute will continue to focus on seeking support from the Western Australian business community, managing costs and the prudent investment of any surplus funds. Maintaining a sustainable financial position will remain an important priority, particularly in relation to fundraising and managing rising costs - in particular fuel, accommodation and air travel costs as we will be traveling to the Pilbara and Kimberley regions in the 2026-2027 financial year.

The Board will continue to monitor income, expenditure, cash flow and reserves closely while ensuring that available resources are directed towards achieving the institute's objectives.

Acknowledgements:
We would like to thank our retiring Treasurer, Lion Robert Garratt for his dedication to the role and to the institute since 2020. Rob's commitment to the prudent management of the institute's finances is greatly appreciated by the Board.

We would also like to thank our fellow Board members, volunteers, and particularly our donors, members and supporters for their continued commitment to Lions Cancer Institute (WA) Incorporated.

Their generosity and support enable the institute to continue its work and make a meaningful contribution to skin cancer detection and awareness in remote and rural communities in Western Australia.

■ **Lion John Osborne & William Crosthwaite**
CPA — Co-Acting Treasurers

DIRECTOR'S REPORT AS AT 30.06.26

Your directors present their report on the Institute for the financial year ended 30 June 2026.

The names of the Directors in office at the date of this report are:

Elected members:
Lion John Osborne. Chairman, Screening Event Co-Ordinator
Lion Gail Jenkins. Vice Chairman
Lion Phil Chinnery. Director
Lion Hans Hoette. Director.
Lion Jim Foster. Director.
Lion Graham Bateman. Director.
Lion Robert Garratt. Treasurer.
Lion Christine Walker. Director

Appointed members:
Lion Robert Garratt. Treasurer
William Crosthwaite CPA. Secretary
Mr. Rob Fitzpatrick, FRCS, FRACS. Chair Medical & Scientific Advisory Committee
PDG Neil Saunders, Finance and Administration Advisor.
Dr Alan Wright, RFD, MBBS, MFM, GCUT. Medical Director.
Kylie Laverty, RN, MNurs, BHealthSc. Assistant Medical Director.
PDG Garry Irvine OAM. Public Relations, Business Development & New Zealand Liason

Ex Officio members:
DG Roslyn Barnes District 201WA.
2nd VDG Janet Spellissey District 201WA

No significant changes in the Institute's state of affairs occurred during the financial year.

The Lions Cancer Institute (WA) Inc. is a "Not for Profit " medical research institution. The Institute holds endorsements for the Australian Taxation Office as an Income Tax exempt Charitable Entity (ITEC) and is a Deductible Gift Recipient (DGR). The Institute is also registered with Australian Charities and Not for Profits Commission (ACNC).

The Institute holds a current West Australian Charitable Collections Licence under the provisions of the Charitable Collections Act 1946.

No significant change in the nature of these activities occurred during the year.

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the Institute, the results of those operations, or the state of affairs of the economic entity in future financial years.

Signed in accordance with a resolution of the Board of Directors:

Lion John Osborne
Chairman and Co-Treasurer
Place: Mandurah

Dated: 10/05/2026

William A Crosthwaite CPA
Secretary and Co-Treasurer
Place: Mandurah

Dated: 10/02/2026

INCOME AND EXPENDITURE STATEMENT FOR THE YEAR ENDED 30 JUNE 2026

	NOTES	2026
Income		
Donations		1,312,528
Total Income		**1,312,528**
Cost of Sales		
Donation Costs		992,506
Screening Costs		114,431
Truck Costs		50,239
Total Cost of Sales		**1,157,176**
Gross Surplus		**155,352**
Other Income		
Interest Received		180
Investment Portfolio Income		77,398
Investment Portfolio Unrealised Gain/Loss		67,667
Realised Gain on Sale of Assets		-
Total Other Income		**145,245**
Expenditure		
Accounting, Audit & Taxation		6,689
Advisor fees		12,234
IT Costs		3,834
Depreciation		57,130
General Administration		2,480
Scholarship and Awards		28,000
Training and Certification		-
Volunteers Dinner		6,919
Total Expenditure		**117,286**
Current Year Surplus/ (Deficit) Before Income Tax Adjustments		**183,311**
Current Year Surplus/(Deficit) Before Income Tax		**183,311**
Net Current Year Surplus After Income Tax		**183,311**

ASSETS AND LIABILITIES STATEMENT AS AT 30 JUNE 2026

	NOTES	30 JUNE 2026	30 JUNE 2025
Assets			
Current Assets			
Cash and Cash Equivalents		279,719	138,354
Trade and Other Receivables		6,170	8,444
Other Current Assets	2	8,484	17,696
Total Current Assets		**294,373**	**164,494**
Non-Current Assets			
Financial Assets	3	1,877,689	1,597,937
Plant, Equipment and Vehicles	4	762,015	815,625
Total Non-Current Assets		**2,639,704**	**2,413,562**
Total Assets		**2,934,077**	**2,578,056**
Liabilities			
Current Liabilities			
Trade and Other Payables		178,279	5,569
Total Current Liabilities		**178,279**	**5,569**
Total Liabilities		**178,279**	**5,569**
Net Assets		**2,755,798**	**2,572,487**
Equity			
Accumulated Surplus			
Current Year Earnings		183,311	248,276
Prior Years Surplus/Deficit		2,572,487	2,324,211
Total Accumulated Surplus		**2,755,798**	**2,572,487**
Total Equity		**2,755,798**	**2,572,487**

MOVEMENTS IN EQUITY FOR THE YEAR ENDED 30 JUNE 2026

Equity		
Opening Balance	2,572,487	2,324,211
Increases		
Surplus for the period	183,311	248,276
Total Increases	**183,311**	**248,276**
Total Equity	**2,755,798**	**2,572,487**

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2026

	2026
Operating Activities	
Receipts from Customers	1,320,430
Payments to Suppliers and Employees	(1,028,970)
Interest Received	180
Net Cash Flows from Operating Activities: Note 7b	**291,640**
Investing Activities	
Proceeds from Sale of Property, Plant and Equipment	-
(Payments) /Proceeds from Investments	(146,755)
Payments for Property, Plant and Equipment	(3,520)
Net Cash Flows from Investing Activities	**(150,275)**
Net Cash Flows	**141,365**
Cash and Cash Equivalents	
Cash and cash equivalents at beginning of period	138,354
Net increase/(decrease) in cash for period	141,365
Cash and cash equivalents at end of period	279,719

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2026

1. STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

(a) **Basis of Preparation**

This financial report is a special purpose financial report prepared in order to satisfy the requirements of Board members to prepare a financial report. The Board members have determined that the Association is not a reporting entity. The financial report has been prepared in accordance with the requirements of Association Incorporation Act 2015 (WA), association regulations.

The financial statements have been prepared on an accruals basis and are based on historic costs and do not take into account changing money values or, except where specifically stated, current valuations of non-current assets.

The following material accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of the financial statements.

(b) **Cash and Cash Equivalents**

Cash and cash equivalents include cash on hand, deposits held at call with banks, other short term highly liquid investments with original maturities of three months or less.

(c) **Property, Plant and Equipment**

Leasehold improvements and office equipment are carried at cost less, where applicable, any accumulated depreciation.

The depreciable amount of all PPE is depreciated over the useful lives of the assets to the association commencing from the time the asset is held ready for use.

Leasehold improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

(d) **Impairment of Assets**

At the end of each reporting period, the Board reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, an impairment test is carried out on the asset by comparing the recoverable amount of the asset, being the higher of the asset's fair value less costs of disposal and value in use, to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is recognised in the income and expenditure statement.

(e) **Accounts Receivable and Other Debtors**

Accounts receivable and other debtors include amounts due from members as well as amounts receivable from donors. Receivables expected to be collected within 12 months of the end of the reporting period are classified as current assets. All other receivables are classified as non-current assets.

(f) **Revenue and Other Income**

Revenue is recognised when the amount of the revenue can be measured reliably, it is probable that economic benefits associated with the transaction will flow to the entity and specific criteria relating to the type of revenue as noted below, has been satisfied.

Revenue is measured at the fair value of the consideration received or receivable and is presented net of returns, discounts and rebates. For this purpose, deferred consideration is not discounted to present values when recognising revenue.

Interest revenue is recognised using the effective interest method, which for floating rate financial assets is the rate inherent in the instrument. Dividend revenue is recognised when the right to receive a dividend has been established.

Grant and donation income is recognised when the entity obtains control over the funds, which is generally at the time of receipt.

If conditions are attached to the grant that must be satisfied before the association is eligible to receive the contribution, recognition of the grant as revenue will be deferred until those conditions are satisfied.

Other revenue is recognised when the institute is entitled to the funds.

All revenue is stated net of the amount of goods and services tax.

(g) **Leases**

Leases of PPE, where substantially all the risks and benefits incidental to the ownership of the asset (but not the legal ownership)are transferred to the association, are classified as finance leases.

Finance leases are capitalised by recording an asset and a liability at the lower of the amounts equal to the fair value of the leased property or the present value of the minimum lease payments, including any guaranteed residual values. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for that period.

Leased assets are depreciated on a straight-line basis over the shorter of their estimated useful lives or the lease term. Lease payments for operating leases, where substantially all the risks and benefits remain with the lessor ,are charged as expenses in the periods in which they are incurred.

(h) **Goods and Services Tax (GST)**

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO).

In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense.

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the ATO is included with other receivables or payables in the statement of financial position.

(i) **Financial Assets**

Investments in financial assets are initially recognised at cost, which includes transaction costs, and are subsequently measured at fair value, which is equivalent to their market bid price at the end of the reporting period. Movements in fair value are recognised through an equity reserve.

(j) **Accounts Payable and Other Payables**

Accounts payable and other payables represent the liability outstanding at the end of the reporting period for goods and services received by the association during the reporting period that remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability.

(k) **Provisions**

Provisions are recognised when the association has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured. Provisions are measured at the best estimate of the amounts required to settle the obligation at the end of the reporting period.

(l) **Income Tax**

Lions Cancer Institute Inc. is exempt from income tax and registered as deductible gift recipient.

(j) **Reclassification of Comparative Balances**

Where appropriate, comparative balances have been reclassified to conform with the current year's presentation and disclosure format. As a result, certain account classifications may differ from those presented in the previous audited financial statements. These reclassifications are intended to enhance the relevance and comparability of financial information and do not affect the entity's previously reported financial position, financial performance, or cash flows.

	2026	2025
2. Other Current Assets		
BP Coupons	5,405	13,890
Fuel tax receivable	-	239
Franking credits refundable	3,079	3,245
Various items of clothing	-	322
Total Other Current Assets	**8,484**	**17,696**

	2026	2025
3. Financial Assets		
Portfolio Investments	1,877,689	1,597,937
Total Financial Assets	**1,877,689**	**1,597,937**

	2026	2025
4. Plant and Equipment, Motor Vehicles		
Plant and Equipment		
Plant and Equipment at Cost		
Computer Equipment @ Cost	1,589	1,589
Screening Equipment @ Cost	4,927	4,927
Total Plant and Equipment at Cost	**6,516**	**6,516**
Less Accumulated Depreciation		
Accumulated Depreciation - Screening Equipment	(2,641)	(1,117)
Accumulated Depreciation - Computer Equipment	(1,245)	(901)
Total Less Accumulated Depreciation	**(3,886)**	**(2,018)**
Total Plant and Equipment	**2,630**	**4,498**
Motor Vehicles		
Motor Vehicles at Cost	828,517	824,997
Less Accumulated Depreciation	(69,132)	(13,870)
Total Motor Vehicles	**759,385**	**811,127**
Total Plant and Equipment, Motor Vehicles	**762,015**	**815,625**

5. Cash Flow Information

For the purpose of the statement of cash flows, cash includes cash on hand and in at call deposits with banks or financials institutions, investments in money market instruments maturing withing less then two months net of bank overdrafts.

a. Reconciliation of Cash

Cash at the end of the reporting period as shown in the statement of cash flows is reconciled to the related items in statement of financials positions as follows :

b. Reconciliation of Cash Flow From Operations with Net income

	2026	2025
Net current year surplus income after income tax	**183,311**	**248,263**
Add Depreciation and Less sale of assets	57,130 -	34,282 (30,000)
Investment Movement and distribution	(132,831)	(123,778)
(Increase)/Decrease in Trade and other receivables	11,320	(19,362)
Increase/(Decrease) in Trade and other payables	172,710	3,331
Cash flow from operations	**291,640**	**112,736**

DIRECTORS DECLARATION FOR THE YEAR ENDED 30 JUNE 2025

The Board of Directors have determined that the Association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements, the attached special purpose financial statements have been prepared for the purpose of complying with the Association Incorporation Act 2015 (WA), the Australian Charites and Not-for-Profits Commission Act 2012 and association regulations.

The directors of the Association declare that:

1. The financial statements and notes attached give a true and fair view of the financial position as at 30/06/2026 and its performance for the year ended on that date in accordance with the accounting policies described in Note 1 to the financial statements.

2. In the director's opinion there are reasonable grounds to believe that the incorporated association will be able to pay its debts as and when they become due and payable.

This statement is made in accordance with a resolution of the Board of Directors and is signed for and on behalf of the directors by:

Lion John Osborne

Lion John Osborne
Chairman and Co-Treasurer
Place: Mandurah

Dated: 10/05/2026

William A Crosthwaite CPA

William A Crosthwaite CPA
Secretary and Co-Treasurer
Place: Mandurah

Dated: 10/02/2026

AUDITOR'S REPORT FOR THE YEAR ENDED 30 JUNE 2025

Independent Auditors Report to the members of the Association

Opinion

We have audited the financial report of Lions Cancer Institute (WA) Inc. (the association), which comprises the assets and liabilities statement as at 30 June 2026, the income and expenditure statement, movements in equity, statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the directors declaration on the annual statements giving a true and fair view of the financial position and performance of the association.

In our opinion, the accompanying financial report gives a true and fair view of the financial position of Lions Cancer Institute Inc. as of 30 June 2026 and of its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements, and the requirements of The Associations Incorporation Act 2015 (WA).

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the association in accordance with ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110: *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist the association to meet the requirements of The Associations Incorporation Act 2015 (WA). As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of the Board of Directors for the Financial Report

The board of directors is responsible for the preparation and fair presentation of the financial report in accordance with the financial reporting requirements of The Associations Incorporation Act 2015 (WA) and for such internal control as the board of directors determines is necessary to enable the preparation and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the board of director is responsible for assessing the association's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the board of directors either intends to liquidate the association or to cease operations, or have no realistic alternative but to do so. The board of directors is responsible for overseeing the association's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

· As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

· Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform

AUDITOR'S REPORT

· Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association's internal control.

· Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the board of directors.

· Conclude on the appropriateness of the board of directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the association to cease to continue as a going concern.

· Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

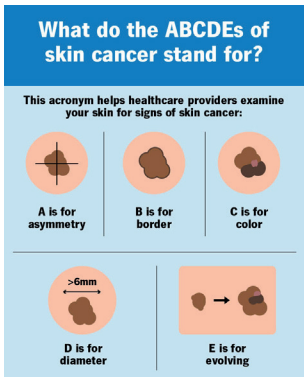
We communicate with the board of directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Dharam Ghangas
Auditax Accountants

Dated: 10/05/2026

LIFE FELLOWS OF THE LIONS CANCER INSTITUTE (WA) INC.

PDG Garry Irvine OAM	DIRECTOR, DERMOSCOPIST
Mr Robert Fitzpatrick MBBS FRCS FRACS (Retired)	DIRECTOR, PLASTIC SURGEON
Mr Barrie Lykke MBBS FRACS FRACS (Retired)	PLASTIC SURGEON
Professor Kurt Gebauer MBBS FACD	PROFESSOR OF DERMATOLOGY
Dr Lester Cowell MBBS	PRIMARY CARE SKIN CANCER PRACTIONER
Mrs Monika Cowell	DERMOSCOPIST
Lion Susan Goddard BA APP. Sc. FRCNA OAM (Retired)	REGISTERED NURSE
PDG Colin Beauchamp AM.JP	DERMOSCOPIST
PDG RON VAUGHAN (Deceased)	
Mr DON PHILLIPS (Deceased)	
Mr Alister Turner MBBS FRCS FRACS (Deceased)	PLASTIC SURGEON
Lion Philip Chinnery	CHAIRMAN



Kwik Kopy Canning Vale has been established in the heart of Canning Vale since 1998. The owner, Celine, brings 20 years of print industry experience, with an extensive graphic design and production background.

Celine prides herself on the customer experience and loves nothing more than working together to find the best solutions to all your prickly problems "I believe the road to success of any project begins with a detailed understanding of the customer's needs and expectations, it's more than customer service, we become part of a team with our clients to achieve success".

We invite you to bring Celine your impossibles today and see just what the new team at Kwik Kopy Canning Vale can do for you.

TAKING *action* AGAINST CANCER THROUGH *screening*, EDUCATION AND RESEARCH.

Lions Cancer Institute (WA) Inc.
PO Box 2195,
MANDURAH DC, WA 6210

Chairman
Mobile: 0422 622 363
Email: chairman@lionscancerinstitute.org.au

Treasurer
Email: treasurer@lionscancerinstitute.org.au

www.lionscancerinstitute.org.au

Find us on Facebook