

Witness Name: Katherine Victoria Burt

Statement No: WITN6392001

Exhibits: WITN6392002 - WITN6392267

INFECTED BLOOD INQUIRY

WITN6392026



**The
Haemophilia
Society**

ANNUAL REPORT 1982

P.O. Box 9 16 Trinity Street London SE1 1DE

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HRH The Duchess of Kent

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Dr. C. R. Rizza, MD., FRCP.
Dr. E. G. D. Tuddenham, MRCP., MRCPath.

Co-ordinator: David G. Watters, J.P.

Auditors: Taylor, Viney & Marlow, Upminster.

Solicitors: Paisners, London.

Bankers: National Westminster Bank PLC.



*The Society's Patron: H.R.H. The Duchess of Kent.
Portrait Study by Norman Parkinson, Camera Press*

ANNUAL REPORT

WHAT IS HAEMOPHILIA?

Put simply, haemophilia is a hereditary bleeding disorder. The blood in a person with haemophilia does not 'clot' in the same way as other people's. Most especially, bleeding is into muscles and joints causing pain and permanent damage. Today, modern treatment is reducing the damage which arises from prolonged bleeding but there is still a long way to go until the CURE is found.

INTRODUCTION

The Haemophilia Society was established in 1950.

The aims of the Society are:

- To provide a fellowship for haemophiliacs and those concerned with their health and welfare; and to give advice on their problems.
- To safeguard the social and economic interests of haemophiliacs and to give financial or other help in cases of difficulty or hardship.
- To promote the study of the causes and treatment of haemophilia and similar conditions.
- To bring to the notice of the authorities the special needs of haemophiliacs, and to co-operate with the medical and allied professions to further their care.
- To co-operate with other bodies concerned with the welfare of the physically handicapped.
- To gather and distribute information useful to haemophiliacs and of interest to the general public.

In practice the Society operates at two levels — first of all that of providing support, friendship, advice and information to people with haemophilia — and those involved in their care. This is achieved through various publications, including The Bulletin, and by encouraging, for example, the formation of professional groups for nurses and social workers as well as local groups of members. Secondly, the Society seeks to encourage and support research into the condition; since the Society was formed more than £350,000 has been collected for research and this has contributed greatly to the advances in treatment and care which benefit so many today.

*"A fellowship for people with haemophilia, their families
and those concerned with their health and welfare"*

This was the objective which the founders of the Society had in mind in 1950 and it continues to be our primary aim today.

In the last year, we were able to make substantial advances in providing this fellowship, not least by the immensely improved facilities for communication which have been made possible by the appointment of a full-time executive officer.

Mr. David Watters became well ensconced as the first Co-ordinator of the Society's diverse activities and, by his diligence and skill in implementing the decisions of the Council and the Executive Committee, enabled members, both individually and through their Groups, to be more closely involved in all our work.

Previous reports have referred to the way in which the demands being made upon the officers and other members of the Executive Committee were becoming so heavy as to be overwhelming for people working voluntarily in their spare time. Now that the Co-ordinator is controlling the Administration, they are free to concentrate on the important policy decisions which have to be made as we plan for the future.

COMMUNICATION

There are three important aspects of communication to be recorded.

1. *The Bulletin*

The Bulletin is the main source of information about the facilities available, and carries reports on subjects of current interest. A special issue was published to give an account of "The Group Seminar Proceedings".

The Bulletin is now regarded as one of the best to be produced by any National Society and we continue to be grateful to Mr. Clive Knight, the Editor, and his team for maintaining such a high standard.

2. *The Group Seminar*

The first residential seminar for representatives from the Groups was held in 1981 and, as it was so obviously successful, it has become a regular feature of the Society's programme of activities.

The 1982 Seminar was held in the Kennedy Hotel, London. Again it was over-subscribed, but numbers were limited so that those attending could meet each other in informal group discussions and, in sharing their experiences, learn from each other.

3. *Special Leaflets*

A series of attractively produced leaflets was prepared, giving information about ways in which members might derive benefit from various sources.

By this and other means, membership has increased by 400 (approx. 20%) over the last two years and we now have good channels of communication with those who attend the Centres

and with the doctors and nurses who are involved there. This improved communication has led to a very substantial increase in the number of enquiries handled by the staff at our office, particularly with regard to welfare matters such as Mobility Allowance and Attendance Allowance.

THE SUPPLY OF BLOOD PRODUCTS

The sub-committee concerned with the supply of blood products continued to monitor the position in the United Kingdom with a view to making further approaches to the Minister of Health.

The Committee was pleased to note that the first phase of the expansion programme undertaken at the Blood Products Laboratory at Elstree was completed, with plans being well advanced for a further phase of expansion.

The Chairman of the Committee, Mr. Ken Milne, reported considerably larger quantities of Factor VIII were being produced by the laboratory and the plans for expansion should, if implemented fully, lead to the United Kingdom being self-sufficient in the production of blood clotting factors, a goal towards which the Society has been working for many years.

We are pleased to note that Professor Arthur Bloom, Chairman of the Haemophilia Centre Directors' Meeting and the Senior Member of the Society's Medical Advisory Panel, was appointed as a member of the newly-formed "Central Blood Laboratories Authority". This Authority will manage those laboratories which manufacture blood grouping reagents and blood products for use in the National Health Service.

PROFESSIONAL ASSOCIATIONS

We continued to derive benefit from our association with two professional organisations with whom we work closely to our mutual advantage.

The Social Workers at Centres are now professionally involved in the "Special Interest Group in Haemophilia and Related Haemostatic disorders" which is sponsored jointly by the Society and the British Association of Social Workers.

The officers and the Co-ordinator were invited to their Annual Meeting and a Seminar and were grateful for the opportunity to be involved in the discussions which are of such great value to people with haemophilia.

We were also pleased to observe the steady progress made by the Haemophilia Nurses' Association with whom Mr. John Prothero acted as our Liaison Officer.

AWARDS

The R. G. Macfarlane Award

The Society has established "The R. G. Macfarlane Award" to recognise officially Professor Macfarlane's work in the study and management of haemophilia and to register our appreciation for the support he has given to the Society for many years. The Award takes the form of a medal, together with a citation, and it may be given to a doctor, scientist or other person who has been involved in research, in the management of haemophilia or in the more general care of those with haemophilia or related disorders and whose contribution has been outstanding. The Society is proud to perpetuate the name of Professor Macfarlane in this way.



Dr. Peter Jones with the R. G. Macfarlane Award citation.

The Award for 1981 was presented to Dr. Peter Jones on 19 February 1982 at a happy ceremony in Newcastle's Royal Victoria Infirmary. The Chairman spoke of Dr. Jones' outstanding abilities as a Centre Director and as a communicator. He also spoke of the long and happy association between Dr. Jones and the Society, with particular reference to the confidence enjoyed by all his patients through the Newcastle Haemophilia Centre, as was shown by the very large number of patients and colleagues present at the ceremony.

The Revd. Alan Tanner proceeded to read the citation:

"The R. G. Macfarlane Award for 1981 presented to Peter Mercer Jones by The Haemophilia Society in gratitude for his dedication to the principle of comprehensive care and the skill with which he has communicated to people throughout the world new confidence in living with haemophilia"

Dr. Jones received the Award amidst long and enthusiastic applause from all present.

The Catherine Cookson Awards for Achievement in Education

These Awards (one senior and one junior) are given for academic achievement. This need not necessarily depend on success in competitive examinations, especially in the younger age group.

In 1982 the Awards were presented to:—

SENIOR AWARD

GRO-A

JUNIOR AWARD

GRO-A

The Brendan Foster Awards for Achievement in Sport

These Awards (one senior and one junior) are given for achievement in any field of sport (indoor or outdoor). In 1982 there was no senior Award, but the Junior Award was presented as below:—

JUNIOR AWARD

GRO-A

The Society wish to express their gratitude to GRO-D and GRO-D for making these Awards possible each year.

THE CASE COMMITTEE

The Case Committee continued to meet regularly as a Sub-Committee of the Executive Committee, to consider requests to help people with haemophilia or their families. Applications were received from members themselves, their Social Workers or the officers of the Group concerned. Each request was considered with great care and we are grateful to the Chairman of the Case Committee, Mr. Jim Hunter, and its members for the time and sympathetic attention given to these applications. Sixty applications were received. Forty-seven payments were made from the Benefit Fund, totalling £2,821.

In reaching decisions about individual applications, the Case Committee sought guidance from the social workers of the Centres involved and, where appropriate, from the officers of the Group.

The Chairman of the Case Committee reported that, in this particular part of the Society's work for and with its members, we were expressing the fellowship which is one of our principal objectives.



The Rev. Alan Tanner, Chairman of The Haemophilia Society.

WORLD FEDERATION OF HEMOPHILIA

We have continued to play an active part in the work of the World Federation of Hemophilia and have supported those members of our Executive Committee who are officers of the Federation.

Mr. John Prothero served as Chairman of the European Advisory Council and as a member of the WFH Home Treatment Committee.

A main thrust of the Federation's activity in the 1980's is in seeing that the benefit of the work done by doctors and scientists is felt more quickly by people with haemophilia. At the moment, there is an unacceptable time-lag between discoveries being made, and new styles of management being developed by doctors and scientists, and these being made available to lay people. The World Federation is committed to reducing this gap as quickly as possible.

We have also made strenuous efforts to increase the number of Individual Members of the World Federation. Funds are available for particular projects, but it has been found that money is not so readily available for the central administration.

We hope to play our part in alleviating this problem by encouraging more of our members to support the World Federation in this way.

OVERSEAS SUB-COMMITTEE

One of the strong recommendations from a group at the Seminar in 1982 was for direct help to be given to people with haemophilia in "developing countries", in addition to the support provided, indirectly, through our active membership of the World Federation of Hemophilia.

It had become increasingly evident that, while the lives of people with haemophilia in the "developed countries" had been improved dramatically in the last decade or so, the majority of the world's haemophilic population had experienced very little improvement.

It was recognised that the need was so great that any contribution from our Society would be of only token value; nevertheless, it was felt that some action was required.

The matter was studied carefully and a decision was made to direct our efforts towards India, initially making £1,000 available for the Haemophilia Society of Kerala to assist its members in their plans to establish an effective Society for India as a whole.

A working group is continuing to study ways in which we might help to improve treatment facilities for people with haemophilia in India.

THE FUTURE

Quite frequently, these days, people comment on the evident changes which have occurred, both in the manner in which the Society's affairs are conducted and in the greatly improved service we are able to provide.

To a large extent, this is due to the commitment of those who serve as members of the Executive Committee, the Council and the Groups, as well as to the professional dimension introduced by the appointment of the Co-ordinator.

However, efficiency and skill in administration are but a means to an end. Primarily, we are concerned with people. More particularly, with a person. People with haemophilia who live near one of the major centres, where they now take "comprehensive care" for granted, are comparatively fortunate.

There are others who live far away, in relatively isolated places, who are still unfamiliar with the new facilities for home treatment, counselling, physiotherapy and so on.

As members of the Society we should be ever vigilant to see that such people are not neglected while we move on to new, exciting developments in the course of the next few years.

In presenting this Report, we confirm our commitment to seek out and care for such people, so that they may share fully in this fellowship in which we aim to support each other.

GIFTS, GRANTS and LEGACIES

The Society wish to express grateful thanks to the following organisations, churches, schools, trusts and individuals whose generosity has made our work possible:—

Haematology MLSO Fund, South Derbyshire; London Metal Exchange; Speywood Laboratories; Liverpool City Mission (Dovecot Church); Douglas Ewart High School; Thomas Tilling London; Roding Coach Works Ltd.; J. & P. Coates (UK) Ltd.; All Saints Church, Tooting; Delta Group PLC.; Salesian College Battersea 6th Form Council; Prudential Assurance Co. Ltd.; Armour Pharmaceutical Co. Ltd.; Travenol Laboratories Ltd.; Landrover UK Ltd.; Mercantile Credit Company; B.P. Group of Companies; B. H. G. Insurance Brokers Ltd.; Trusthouse Forte Ltd. Council; Queen Anne Public House; Immuno Ltd.; B. L. Cars Ltd. Longbridge; The Rotary Club of Chertsey; The Rotaract Club of Chertsey; Sir Joseph Williamson's Mathematical School Voluntary Fund; Whitecroft Ltd.; Manufacturers Life Insurance Co.; Legal & General Assurance Society Ltd.; Lawson International Travel Services Ltd.; Pearl Assurance; Lloyds Bank PLC.; Midland Bank PLC.; Barclays Bank PLC.; Fairclough Construction Group PLC.; George Wimpey; National Westminster Bank PLC.; English Electric Co. Ltd. (Stafford Works Appeal Fund); Gravesend School for Girls; Wembley Liberal Synagogue; Mrs. **GRO-D**

GRO-D

GRO-D

United Grand Lodge of England Grand Charity; Tesco Jubilee Charity Fund; Wesleyan General Charitable Trust; Acon Charitable Trust; Sir Walter Raleigh Lodge Benevolent Fund; Jaguar Employees General Charities Fund; The Podde Trust; BBC Children in Need of Help Appeal; Royal Wedding Souvenir Fund Trust; Courage Charitable Trust; Joseph & Mary Hiley Trust; Cutter Laboratories; The Benhams Charitable Settlement; Barclays Bank Trust Co. Ltd.; H. L. J. Brunner Trustee/Settlement; B. S. Caret / Old Concord Lodge Account; Hawkins Charitable Trust; The Gibbons Trust; Anthony Horby Charitable Trust; Good Neighbours Trust; Harold Amelan Charity Trust; Bourneville Works Charitable Co. Ltd.; Combined Charities Committee; Cornwall Morris Minor 1000 Club; Boots Charitable Trust; Patients Aid Association & Medical Charity Trust; L. G. Uridge Charitable Trust; Trustees of the Twenty Seven Foundation; Moorgate Trust Fund; W. H. Whitbread Charity Fund; P. F. Charitable Trust; The Yapp Education and Research Trust; London Law Trust; The Jessie Spencer Trust; Lloyds Charity Trust; Merseyside & District Group; Tayside Group; South Wales Group; Colchester & District Group; Lewisham Group; Ladywood Group; North Eastern Group; Northern Ireland Group; Lincoln & District Group; Northern Group; Oxford & District Group; North Wales Group; Jersey Group; Sheffield Group; North West Group; Northampton Group; South Essex Group; Great Ormond Street Group; Cambridge & District Group; East Kent Group; Scottish Group; Southern Group.

Legacies

GRO-D

and to many others who contributed less than £50, or anonymously, in the past year.

Our warm thanks to you all.

RESEARCH FUND

During 1982 the following grants were approved from the Research Fund:—

Nuffield Department of Orthopaedic Surgery (Oxford): £6,500 towards the cost of an ultrasound scanner.

St. James's University Hospital, Leeds: £1,000 towards the employment costs of a research secretary working on the immunological aspects of chronic joint disease.

Royal Liverpool Hospital: £962 for materials and equipment to investigate the role of fibronectin in the platelet.

Maelor General Hospital (Wrexham): £200 towards the purchase of a Power Pack for use in electrophoresis.

Lincoln County Hospital: £347 for a new Power Pack for use in electrophoresis.

St. Thomas' Hospital (London): £7,200 in respect of a refrigerated centrifuge for use in assay techniques relating to the carrier state of haemophilia.

Welsh National School of Medicine: A grant of £2,433 to support research work on monoclonal antibodies to factor VIII.

Dept. of Clinical Veterinary Medicine, Cambridge: A grant of £2,742 towards the purchase of a Coulter Counter to be used in connection with the colony of haemophilic dogs.

Royal Free Hospital (London): A grant of £2,515 in support of work involving a study of the size and distribution of factor VIII related antigen multimers in von Willebrand's Syndrome.

Royal Victoria Hospital (Belfast): A grant of £1,500 to assist with the costs of a physiotherapist to deal exclusively with haemophilic patients.

King's College Hospital (London): A grant of £7,000 to support their work in the pre-natal diagnosis of haemophilia.

FINANCIAL REPORT

The accounts for the year ended 31 December 1982 reflect a continuing improvement of the Society's financial affairs.

Income from all sources has increased considerably compared to the previous year. Our total income for the year including donations to both the General and Research Funds and various sources of investment income amounted to in excess of £144,000 compared to slightly over £99,000 for the previous year.

Our administrative expenses have increased moderately compared to 1981 from slightly over £47,500 to approximately £53,500. This is an increase of 12.63% but taking into account not only inflation but also rising salary costs and the considerable increase in our income these rising costs would appear to be acceptable.

On the question of costs it is perhaps worth noting that our costs as a percentage of our total income for the year amounted to 37.02% compared with an average for the past seven years of 44.90%. It would appear therefore that the decision, taken in 1980, to employ a full time administrator has been justified by an improvement in the efficiency of the office with resulting reduction of the ratio of costs to income. Additionally we have been able to raise far greater funds than ever before. On a point that has been referred to in earlier years there is still no necessity to charge the Research Fund with any proportion of administrative expenses. The General Fund is in surplus for the third consecutive year by approximately £3,700.

The Research Fund Appeal has, since its official launch, raised as at 31st December 1982 approximately £215,000. Of this sum over £85,000 was donated in the year ended 31st December 1982. The fund was debited with a total of £39,793 representing grants made to a total of thirteen hospitals during the year. This was slightly down on the year before when £43,243 was donated to a total of twelve hospitals. With the increasing availability of funds we hope that it will not be too long before we can increase the level of grants of this kind.

On the question of some of the other funds, it is suggested that the balance of £1,857 on the Home Treatment Fund be transferred to the Benefit Fund. The Home Treatment Fund has been dormant for several years and it is unlikely the funds will be called upon for the purpose for which they were donated. Because this sum was originally donated for member benefit the Benefit Fund would seem to be the natural place for these funds.

Finally we are continuing to explore further avenues of fund raising and needless to say will not be resting on our laurels. Our aim is to grow from strength to strength and to assist as many viable research projects as possible.

AUDITORS REPORT

We report that we have examined the Balance Sheet together with the annexed Income and Expenditure Account and have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purpose of the audit. In our opinion proper books have been kept as far as appears from our examination thereof, and the Society's Balance Sheet and Income and Expenditure Accounts dealt with in our report are in agreement with these books. In our opinion and the best of our information and according to the explanations given to us the said Balance Sheet gives a true and fair view of the state of the Society's affairs as at 31st December 1982 and of the Income over Expenditure for the year ended on that date.

TAYLOR, VINEY & MARLOW
Chartered Accountants,
60a Station Road,
Upminster, Essex.

24th March, 1983

BALANCE SHEET AS AT 31st DECEMBER 1982

1981		
	FIXED ASSETS	
496	Written down value brought forward	324
—	Add: Additions at cost	988
<u>115</u>	Less: Sale Proceeds of Typewriter	<u>—</u>
381		1312
<u>57</u>	Depreciation	<u>196</u>
324		1,116
	<i>Quoted Investments</i> (at acquisition value)	
—	(Market Value at 31st December 1982 £4459)	4,567
	CURRENT ASSETS	
2,303	Legacies Receivable	8,706
727	Debtors and Prepayments	2,020
2,310	Stocks in Hand	3,684
2,669	Balance at Bank — Current Account	6,398
	Balance at National Westminster Bank —	
9,066	Deposit Account	13,688
	Balance at National Westminster Bank —	
51,000	Special Deposit Account	96,000
<u>23</u>	Cash in Hand	<u>24</u>
£94,398		£130,520
	Deduct — CURRENT LIABILITIES	
4,649	Sundry Creditors	3,420
<u>20,865</u>	Research Fund Grants Payable	<u>16,594</u>
25,514		<u>20,014</u>
£68,884	Excess Current Assets	£110,506
<u>£69,208</u>	Total Net Assets	<u>£116,189</u>
	<i>Represented by: —</i>	
	GENERAL ACCUMULATED FUND	
9,106	Balance as at 1st January, 1982	11,570
<u>2,464</u>	Add: Surplus for the year ending 31st December, 1982	<u>3,643</u>
£11,570	Balance as at 31st December, 1982	£15,213
54,987	<i>Research Fund</i>	£100,577
171	<i>Social Worker Fund</i>	51
1,857	<i>Home Treatment Fund</i>	—
602	<i>Benefit Fund</i>	317
<u>21</u>	<i>Katherine Dormandy Fund</i>	<u>31</u>
£69,208		£116,189

BALANCE SHEET ANALYSIS

1981

Research Fund

51,419	Balance as at 1st January, 1982	54,987
46,811	Add: Various Donations and Sums raised by Groups	85,383
<u>£98,230</u>		<u>£140,370</u>

Deduct

Grants Paid and Payable

4,497	St. Thomas's Hospital Haemophilia Centre	7,184
2,402	Royal Free Hospital Haemophilia Centre	2,250
7,409	Oxford Haemophilia Centre	—
200	Liverpool Royal Hospital	978
—	Welsh National School of Medicine	5,169
6,934	Birmingham Childrens Hospital	—
5,500	Sheffield Haemostosis Research Fund and Royal Hallamshire Hospital	900
1,923	Lincoln General Hospital	348
3,314	Lewisham Haemophilia Centre	—
1,064	Bangor Haemophilia Centre	—
2,000	St. James University Leeds	1,000
4,500	Manchester Royal Infirmary	—
—	University Hospital of Cambridge	2,742
3,500	Isle of Thanet District Hospital	—
—	Kings College Hospital School of Medicine	7,924
—	Ninewells Hospital Dundee	2,083
—	Maelor General Hospital	200
—	Royal Victoria Hospital Belfast	2,515
—	Nuffield Orthopaedic Hospital Oxford	6,500
<u>£43,243</u>		<u>£39,793</u>
<u>£54,987</u>	Balance as at 31st December, 1982	<u>£100,577</u>

Social Worker Fund

32	Balance as at 1st January, 1982	171
248	Donations Received	—
—	Transfer from General Fund	—
<u>280</u>		<u>271</u>
109	Deduct — Cost of Seminars and Secretarial Assistance and Travelling to Conferences	220
<u>171</u>	Balance as at 31st December, 1982	<u>51</u>

Home Treatment Fund

1,857	Balance as at 1st January, 1982	1,857
—	Less: Transfer to Benefit Fund	£1,857

1981		
Benefit Fund		
551	Balance as at 1st January, 1982	602
1,000	Add: Transfer from General Fund	—
66	Donations Received	679
—	Transfer from Home Treatment Fund	1,857
<u>£ 1,617</u>		<u>£ 3,138</u>
 Deduct		
155	Loans Outstanding 1st January, 1982	155
1,015	Grants to Members	2,821
<u>1,170</u>		<u>2,976</u>
155	Loans Outstanding 31st December, 1982	155
<u>1,015</u>		<u>2,821</u>
602	Balance as at 31st December, 1982	317
 Katharine Dormandy Trust Fund		
10	Balance as at 1st January, 1982	21
Add:		
11	Donation Received	10
21	Balance as at 31st December, 1982	31

INCOME AND EXPENDITURE ACCOUNT YEAR ENDED 31st DECEMBER, 1982

1981

INCOME

1,086	Subscriptions	1,222
	Donations (Including Income Tax Repayments on	
11,782	Deed of Covenant and Taxes Income)	31,475
28,603	Value of Legacies Receivable	11,126
—	Dividends Received (Net of ACT)	392
—	Income arising from Legacies prior to Fund Distribution	2,215
2,551	Annual Draw (Net)	2,835
7,886	Interest Received	8,337
1	Sale of Christmas Cards	—
127	Sale of Booklets	476
—	Profit on Sale of Key Rings and Badges	354
<u>£52,036</u>		<u>£58,722</u>

Deduct — EXPENDITURE

2,500	Office Rent	2,500
1,018	Rates and Water	999
297	Light and Heat	490
2,021	Lease of Office Equipment	1,813
1,850	General Office Expenses	1,578
14,467	Salaries and NIC	17,930
	Net Travel Cost to Society of World Federation	
1,142	of Haemophilia Conferences	605
4,368	Travelling Expenses	5,726
3,705	Postage and Telephone	4,311
8,806	Printing and Stationery	6,698
918	Subscriptions and Donations to Affiliated Organisations	1,267
1,128	Appeals Expenses	1,771
230	Auditors Remuneration	265
263	Publications	175
2,283	Net Cost of Seminar Weekend	2,547
1,924	Meeting Expenses and Hire of Halls	3,021
125	Grants to Hostel	9
43	Loss on Sale of Key Rings	—
377	Professor Macfarlane Award	355
50	Grants and Assistance to Local Groups	1,233
57	Depreciation	196
	Provision for Purchase of Wheelchair at Lord Mayor	
1,000	Trelor College (overprovision) (Written back)	(300)
—	Non Research Fund Donation to Ladywood Childrens	
	Hospital Birmingham	1,500
<u>£48,572</u>		<u>£54,689</u>
3,464	Excess of Income over Expenditure for year	3,743
1,000	Less: Transfer to Benefit Fund	—
—	Transfer to Social Worker Fund	100
<u><u>£ 2,464</u></u>		<u><u>£ 3,643</u></u>

NOTES TO THE ACCOUNTS YEAR ENDED 31st DECEMBER, 1982

Schedule of General Expenses

1.	Sundry Office Petty Cash Expenditure	335
	Repairs, Renewals and Maintenance of Office Equipment	957
	Sundry Subscriptions	97
	Office and Employee Insurance Costs	91
	Fire Extinguisher and Maintenance	7
	Sundry Typing Costs	22
	Lottery Fee	10
	Bulletin Dispatch	50
	Conference Fee	9
		<u>£ 1,578</u>

2. Legacies Receivable

During the year ended 31st December, 1982 the Society has received £11,126 in respect of two legacies. As at the Balance Sheet date balances due from previous years legacies had not yet been distributed to the Society by the various Executors. It is estimated therefore based on information in our possession that our interests in the remaining estates concerned are as follows:-

The Estate of		1,666.66
The Estate of	GRO-A	4,599.71
The Estate of		2,440.05
		<u>£8,706.42</u>

3. Quoted Investments

The following investments have been transferred to the Society as part of our capital entitlement from the Estate of Helena Marian Calver deceased:-

	Probate Acquisition Value	Market Value at 31.12.82
£1,500 13¼% 1993 Treasury Stock	1,389.37	1,730.63
220 Ordinary shares Harrison Crossfield PLC.	1,650.00	1,072.50
400 Ordinary shares Shell Transport Trading PLC.	1,528.00	1,656.00
	<u>£4,567.37</u>	<u>£4,459.13</u>

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