Annual Report 2007





Masthead

Publisher:

German Medical Aid Organisation action medeor e.V.

Responsible:

Bernd Pastors,

Managing Director

Editors:

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Photos:

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Design:

Reiber Marketing GmbH, Krefeld

This annual report has been printed on environmentally friendly paper.

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The cover photo shows two children in Ecuador receiving "aid in a box" from medeor

Dear friends and supporters of action medeor,



Heinz Gommans Chairman of the Executive Board



Bernd Pastors Managing Director

A child dies of malaria because its parents can't afford to pay for lifesaving medication, a pregnant woman does not survive the birth of her baby because adequate medical care is lacking. These are the sad facts of life in many developing countries. According to UN figures, every year about 500.000 women do not survive pregnancy and birth and more than ten million small children die of treatable diseases.

Global efforts have been started to improve the disastrous health situation in the poorest countries of the world and the international community of nations agreed on the "millennium goals". These include a drastic reduction of maternal and child mortality by the year 2015 and the combat of malaria, tuberculosis and HIV/AIDS. Last year the G8-States also committed themselves to allocating 60 billion dollars for fighting these illnesses in the future.

action medeor is working on concrete projects to contribute to the realisation of these goals. Comprehensive HIV/ AIDS and malaria prophylaxis programmes are carried out, medicines are made available for the sick and sustainable health care systems are being developed.

In Africa, medeor is successfully supporting the local production and distribution of HIV/ AIDS and malaria medicines and assists local partners in the quality control of the drugs.

In 2007 public relations was focussed on our campaign against malaria. Malaria, as does HIV/AIDS, poses a serious health problem, particularly in Africa. There is no vaccine against malaria, but preventative measures. good diagnostics and effective drugs help to keep the disease under control. In order to facilitate access to malaria therapy, last year medeor initiated long-term cultivation of the artemisia annua plant in east Africa. To date, the artemisinin extracted from this plant is the basis for the most effective malaria drug. In 2007 medeor was entrusted with the European campaign "Stop Malaria Now!". The two year long campaign is being coordinated by the newly established medeor office in Cologne.

In medeor's work as the largest European medical relief organisation, professional administration is as important as the quality assurance of the drugs. At the same time it is vital to conduct fundraising in order to ensure continuous and sustainable project work. However, the investments must be justifiable.

For this reason, action medeor voluntarily undergoes auditing by an independent certified accountant, as well as by the German Central Institute for Social Affairs (DZI), which unreservedly recommends medeor as worthy of receiving support.

We are very pleased that an increasing number of people are becoming familiar with action medeor. The television actress Anke Engelke has contributed to this by supporting action medeor with great personal commitment. In the future we hope to convince even more donors that health is a human right. We welcome everyone who would like to see how we work in Tönisvorst first hand and to see how the boxes with medicines and equipment are dispatched. Aid is so tangible. Just one Euro can save a child suffering from malaria!

On behalf of all our colleagues, we thank you for your faith in our work.

Heinz Gommans

Bernd Pastors



medeor – a reliable partner

Many national and international aid organisations value medeor as a competent supplier of top quality medicines and medical equipment. In the 4.000 m² warehouse in Tönisvorst, medeor stores over 300.000 containers of medicines, which can be packed and dispatched very rapidly – even to very remote and inaccessible areas. Low minimum purchase quantities allow even small health facilities to equip themselves with drugs.

We focus on individual counselling

Personal contacts at medeor ensure speedy and uncomplicated dispatch of orders. medeor workers can give information about the individual products and can advise on appropriate quantities in individual cases. Transport routes and customs formalities are planned carefully to exclude unnecessary delays. Shatter-proof, space-saving and light-weight bulk containers ensure that the contents arrive safely, whether by air, sea, road or rail. medeor provides medical aid to countries outside Europe for noncommercial purposes at cost price or as a donation.

Medeor is one of ten EU Central Procurement Centres

Human Procurement Centres (HPCs) are non-profit organisations which are specialised in supplying goods to EU project partners. They work autonomously and professionally. The EU confirms adherence to the strict standards imposed on all HPCs regarding transparency, pricing, performance and quality. In 2007 there were only 10 HPCs in the world; medeor is one of them.



Low cost high quality standards

All drugs which leave the Tönisvorst storage comply with the guidelines and high quality standards of the EU. medeor pharmacists audit the manufacturers and check the goods when they arrive on our premises. The medicines cost about one tenth of usual pharmacist's prices and are of high-quality and free of patents. In view of increasingly dynamic developments in the pharmaceutical market. since the end of 2007 the drug prices at medeor are no longer fixed but are orientated to the market situation. The price lists have now been replaced by a price indicator.



Quality inspection is compulsory at medeor.

What does medeor do?

- provides first aid and emergency assistance
- continuously provisions
 10 000 healthcare centres in
 140 countries
- supports local partners in establishing and developing primary health care services
- carries out complete healthcare projects
- provides pharmaceutical and medical advice
- supports the set up of local pharmaceutical production plants
- combats malaria, tuberculosis and HIV/AIDS

One priority: inexpensive drugs combat malaria

medeor provides drugs to fight malaria at prices that poor countries can afford. As well as tablets and ampoules, a syrup is also available, which makes it easier to treat children. In addition, medeor offers support in the diagnosis and prevention of the disease.

Every minute counts in a crisis

Intelligent, well functioning logistics and reliable local partners ensure that medical aid gets to where it is most urgently needed as quickly as possible in an emergency. Special emergency packages, Emergency Health Kits, are available for dispatch within hours and can provide up to 10.000 people with medical supplies for up to three months. They contain basic drugs such as painkillers, antibiotics and infusions.

In 2007, medeor employees packed medicines and medical equipment for about 150.000 people in troubled regions of Bangladesh, Mexico, Peru and Africa. At the same time medeor does not forget the so-called "quiet" catastrophes which go almost unheeded in the media, such as the tragic conditions for the people in Zimbabwe. In order to relieve the catastrophic medical situation, last year medeor sent medical aid worth 643.000 Euro to 60 health facilities, including 310.000 Euro worth of donated goods.

Local distribution benefits local populations

After opening a distribution center for medicines in Tanzania in 2005, medeor is now planning further distribution facilities. In this way, transport costs can be reduced considerably while at the same time the development of sustainable local structures is encouraged. Trained local personnel is enabled to independently organise purchasing, stock-keeping and distribution in their own country.

An ultrasound machine for Sierra Leone – donations in kind are welcome!

Rapid technical advances mean that medical equipment in western countries often has a short life span. These products can still play a valuable part in medical care provision for people in the poorer areas of the world: for instance second hand ultrasound machines or an older generation of bandaging materials or surgical instruments often provide very useful service for medeor partners.



A patient in a hospital in Gabon gratefully accepts diabetes test strips from a donation in kind

Thus donations in kind are as welcome as monetary donations. medeor partners guarantee that the medical aid gets to where it is really needed. medeor takes responsibility for organising the transport and completing import formalities. Where a need has been ascertained, donations in kind can be very meaningful.

medeor is happy to inform you about the guidelines for donations of medicines and medical equipment.

medeor drugs can be dispatched at very short notice in an emergency.



Help for people in urgent need

"Humanitarian crises as a result of natural disasters and conflicts cause great suffering and threaten existences world-wide", said the Federal Minister for Foreign Affairs, Frank-Walter Steinmeier, on Humanitarian Aid Day in Berlin on October 12th, 2007. Climate changes often affect countries in the south, as was made evident again last year when several cyclones, exceptionally heavy rainfall and earthquakes occured. The number of people thus affected continues to increase.

The aim of medeor's humanitarian aid is to help people in need, when they are not in a position to help themselves. medeor supplies medicines and - when the situation allows - provides for the extended care of patients and the restructure of health care structures in the affected areas. In 2007 medeor supplied emergency aid to many countries. Depending on the situation and availability, medeor either provided aid on its own or, e.g., together with partners from "Aktion Deutschland hilft".







Africa

In the Sahel Zone of Africa, the dried out ground could not cope with the masses of rain which fell in September 2007. There was flooding in many African countries. Houses and roads were destroyed and polluted water caused many people to fall ill. medeor supplied medicines and equipment to local organisations, hospitals and health care centres. Aid in the value of 15.000 Euro went to Uganda, Ethiopia and Burkina Faso. In Burkina Faso alone 12,000 flood victims and people suffering from malaria were treated for three months with medicines supplied bv medeor.

South-East Asia

More than eight million people suffered from the effects of Cyclone Sidre in Bangladesh. The inhabitants of the 31 devastated districts in the south of the country appealed for international aid in November 2007. Three medical teams from the medeor partner organisation humedica treated an average of 160 patients per day during the two month acute aid phase in Barguna. medeor supplied the doctors with analgesics, antibiotics, drugs to treat diarrhoea as well as with medical

equipment. This enabled them to treat patients with broken bones and other injuries, with gastrointestinal infections and pneumonia. A million urgently needed water purification tablets were also part of the action medeor aid.

Latin America

Also in November 2007, the tropical storm Noel wrought havoc in the Caribbean and flooded areas of Mexico, the Dominican Republic and Haiti. medeor sent two Emergency Health Kits, packed according to the specifications of the World Health Organisation (WHO) with the most important medicines and medical equipment. The Mexican non-governmental organisation Fundacion León XIII was provided with a Health Kit to help the indigenous population in the rural areas. The second Health Kit went to the office of World Vision in Mexico. 15 mobile clinics were thus equipped so that they were able to secure basic medical care for 10.000 people for three months.



A doctor from the medeor partner organisation humedica examines a small patient in Bangladesh.

Reconstruction: building bridges to long-term structural aid in India

medeor is still working with local project partners more than three years after the tsunami devastated parts of south east Asia, to ensure that the medical conditions are stabilized long term. In the state of Tamil Nadu in southern India, 600 patients a month are treated in eight healthcare centres which were financed by medeor and built by local partners in under-served areas. The numbers of patients with acute illnesses increase particularly during the monsoons in June and October/November, during which the doctors from the health centres treat up to 1.200 additional patients a month in mobile treatment camps.

Together with local partner organisations medeor aims to ensure long term and independent financing of these centres. This can be achieved if they are integrated into the state health system and can charge for their services. At present, the various Indian partners are exchanging information on their experiences with lobbying, dealing with district administrations or establishing health education in schools.

Early results are encouraging: immediately after the tsunami, rain water filter tanks, financed by medeor and the Indian federal state, improved the supply of water for the population in Kerala. The rain water filter tanks, which resulted in a sharp decrease in

Humanitarian aid 2007

Afghanistan, Ethiopia, Bangladesh, Burkina Faso, Guinea, Haiti, India, Iraq, Mexico, Pakistan Peru, Zimbabwe, Sudan, Uganda **Total:** 2.442.000 Euro

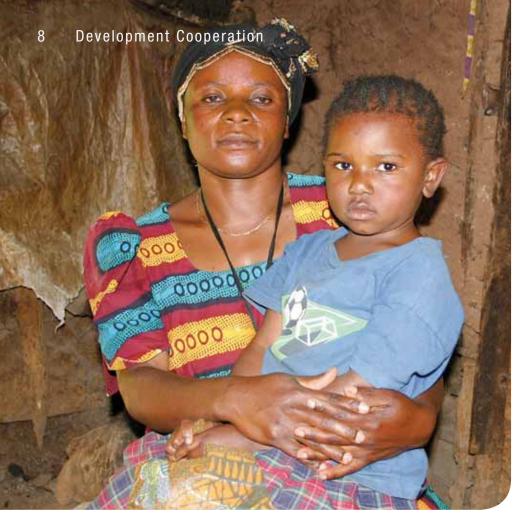
Rain water filter tanks were successfully installed in Indian reconstruction projects.

waterborne diseases in four villages, are now being built in two further villages in the state of Andrah Pradesh. The installation of such tanks is now being considered by the project partners in Tamil Nadu in order to avoid illness through improved water quality.



medeor's head of humanitarian aid Alexandra Geiser reports on the commitment of her Indian project partner:

"It is always wonderful to see how the local project partners are committed to their villagers, beyond the call of duty. When I returned to Ongole in the evening after visiting a project, I heard that a village health worker had driven a young woman who was in labour to the Mother & Child Hospital. She was in a very critical condition, but the day after giving birth she was out of danger, thanks to a blood transfusion. The project head, M. Reddy, told me that Mariyamma had been deserted by her husband and had since lived a very isolated life in her village in Kothapatnam. Only one elderly aunt still stood by her. The project staff had collected among themselves to buy the necessary blood, and took turns nursing her day and night for two weeks until she had recovered"



Strong local partners

In 2007, medeor supported fifteen health projects in Africa and eight in Latin America. Beneficiaries were disadvantaged groups such as pregnant women, mothers, children and social or ethnic minorities. The success of these projects is, in large measure, due to the experience and commitment of local partners. Together with medeor they work hard to make development cooperation a success, the goal of which is to achieve sustainable improvement of healthcare provisions and to help in the fight against HIV/AIDS, malaria and tuberculosis.

Establishing sustainable structures

In long-term projects health care structures are established, local health personnel are trained and the local population is made aware of health issues. medeor's work is supported by private donations as well as by financial support from the German Ministry for Economic Cooperation and Development, from InWent (Capacity Building International, Germany), from the NRW regional centre / NRW State, the Ministry for Work, Health and Social Affairs NRW and the European Commission.

Successfully avoiding malaria

Malaria is a perfect example of how important it is to consider many different aspects when planning a successful project. This easily treated disease costs over one million lives a year, three quarters of the victims are children under the age of five. Even in malaria high-risk areas it is possible to avoid infection if preventive measures are instigated. For this reason medeor focuses on various different aspects: In awareness cam-

paigns the population is informed about symptoms, infection paths, treatment and methods of protection. Mosquito breeding grounds are destroyed and treated mosquito nets are distributed at subsidised prices. In healthcare facilities doctors offer low-cost therapies with few side effects, including locally produced medicines. For all these measures, the inclusion of existing local structures and the active involvement of the local populace are the guarantors for lasting success. Local malaria committees are organised, which continue this valuable educational work in their communities. Support from local authorities is organised by the project staff.

In addition, medeor strives for widescale integration of such projects in the national health programmes and for a coordination with the activities of other NGOs.



Treated nets protect people against mosquito that spread malaria.

Examples of current projects

Congo: ARV therapy for HIV/AIDS patients

Most of the hospitals and healthcare centres in the Democratic Republic of the Congo are in a desolate state and there is a lack of medical equipment, medicines and qualified personnel. Many patients cannot afford treatment. In order to improve the situation, particularly for HIV patients, medeor initiated an HIV/ AIDS diagnosis and therapy project in Bukavu in 2005 in collaboration with the company

Pharmakina. In 2007, several hundred people were informed about HIV/AIDS and tested for the virus. Presently, 130 patients who tested positive are being cared for medically and psychologically. 43 patients are receiving antiretroviral therapy. Now in a much better physical and mental condition, they are again able to provide for their families.

Mexico: rediscovering traditional resources

The mainly indigenous population of Los Altos de Chiapas suffers under an inadequate medical infrastructure and poor hygienic conditions. In collaboration with the partner organisation Fundación Leon XIII, health care for many was improved by returning to treatment with traditional natural medicines: the natural medicines are made available in a healing plants pharmacy and are used with success in the villages. The installation of smoke-free cooking hearths has resulted in a decrease in respiratory illness, particularly in children. Inspired by the obvious improvement, many families recommend these hearths to friends and relatives, thus ensuring their rapid distribution. medeor's part is completed and the project will be continued independently by the local health team.

Ecuador: expansion of primary health care in indigenous communities

In the past five years, over 160 health promoters in indigenous communities were trained in the province of Chimborazo. The promoters provide basic medical care in the remote villages of the Andes, either in the 100 medical stations or during visits to the villages. The focus of their work is on preventing diseases and on the use of natural medicines and traditional healing methods. During a supervisory visit



Project manager Chacon

to Ecuador, Barbara Kühlen talked to project manager Gerardo Chacón about the significance of natural medicines and about how it complements modern medicine.

B. Kühlen: Why does the project concentrate so much on natural medicine? How is it relevant and what are its advantages?

G. Chacón: Natural medicine is an effective and cheap alternative for most people in this remote area, because they can grow the plants in their gardens and process them to natural medicine themselves. This means they are permanently independent of external aid. What is almost more important is that it is part of their tradition and culture, which is now being revived and made available for future generations. This strengthens the self confidence of the people, who experience severe discrimination even today.

BK: How well does natural medicine coexist with modern medicine?

GC: In our project natural medicine and modern medicine go hand in hand, we use the advantages of both and discuss their limitations. Even though the focus is on natural medicines, modern medicine is also part of the training of the health promoters. They learn that there are illnesses which they cannot treat with natural medicines, which have to be treated by a doctor with conventional drugs.

BK: How is the integration of natural medicines in the medeor project assessed on a national level in Ecuador?

GC: The general conditions for implementation and support of the project are extremely auspicious: Interest in natural medicine is increasing. In the ministry of health there is a department for indigenous medicine, both at national and at the provincial level. Interest in the preservation and promotion of traditional medicine is growing. The demand for healing plants and natural toiletries and soaps is also increasing. At the moment we are working on a marketing concept.



medeor project supervisor Barbara Kühlen opens a medical station in Chimborazo.

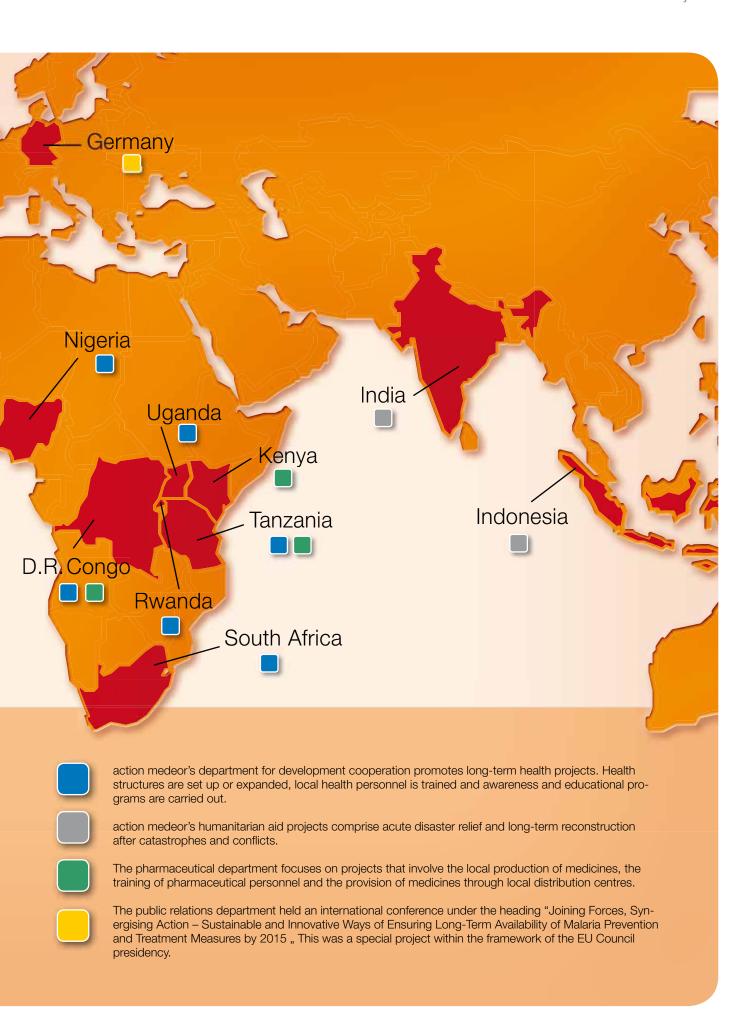




for development cooperation, humanitarian aid, pharmaceutical advisory services or public relations. The different areas of responsibility are identified by different colours. Details about the work and the financial volume of the projects can be found under the four-digit project number on page 12 of this annual report.



German Medical Aid Organization



Projects world-wide

Project location	Project no.	Project focus	Expenditure total in Euro
Development cooperation			
Benin/Gohomé	6018	HIV/AIDS education, prevention, treatment and care	25.435,98
Bolivia/El Alto	6089	Programme for prevention, control and treatment of tuberculosis	4.153,59
Ecuador/Chimborazo I	6034	Improvement of health care provision in indigenous communities	1.471,66
Ecuador/Chimborazo II	6075	Improvement of health care provision in indigenous communities	76.742,5
Ghana/Avo region	6073	Establishment of a health centre and improvement of health care provision	4.200,89
Guatemala/Quetzaltenango I	6041	Improvement of sexual and reproductive health in indigenous communities	649,7
Guatemala/Quetzaltenango II	6083	Renovation of the health centre U'kux ka' slemal	11.943,3
Columbia/Buenaventura	6087	Improvement of sexual and reproductive health in suburban areas	22.012,6
Columbia/Santander	6060	Primary health care provision and health education	60.577,4
Congo/Bukavu	6036	HIV/AIDS treatment and access to ARV therapy	48.224,1
Mexico/Chiapas	6050	Improvement of health care provision in indigenous communities	4.140,0
Rwanda/Kigali	6052	HIV/AIDS awareness through interactive theatre work	57.000,6
South Africa/Diepdale	6086	Further training of home carers for AIDS patients	3.005,0
South Africa /Mpumalanga	6074	Training of home carers for AIDS patients	5.596,5
South Africa /Masiphumelele	6024	Socio-medical care of AIDS orphans	16.103,6
South Africa /Tumahole	6081	Establishment of an HIV/AIDS consultation and therapy centre	22.426,4
Tanzania/Mbinga	6068	Upgrading the health centre in Mbinga	1.056,0
Tanzania/Moshi	6066	HIV/AIDS control and prevention	90.135,0
Tanzania/Lituhi	6082	Fighting malaria near Lake Nyassa	32.772,9
Togo/Lomé	6088	Renovation and equipping of a school health station	7.036,2
Togo/Four Regions Project	6027	Malaria and AIDS education and prevention	100.689,5
Uganda/Nakaseke	6064	HIV/AIDS education and training of home carers	2.005,0
West Africa	6076	Five Countries Corridor Project: AIDS education and testing in West Africa	633,0
Humanitarian aid projects	_		_
India/Chidambaram	6107	Establishment of sustainable health care provision	42.766,7
India/Kerala I	6165	Clean water and health care provision for 100 fishermen's families	610,2
India/Kerala II	6108	Clean water through construction of 91 rain filter tanks	29.072,6
India/Tranquebar	6101	Health rehabilitation of tsunami victims	1.288,9
India/Prakasam	6156	Communal primary health care provision	11.142,3
Indonesia/Aceh Barat I	6162	Primary health care provision for tsunami victims	5.059,5
Indonesia/Aceh Barat II	6105	Primary health care provision in villages and temporary camps	162.401,1
Indonesia/Alasa	6106	Improvement of primary health care services	152.503,3
macrosia/ nasa	0100	improvement of primary realth care solvices	102.000,0
Pharmaceutical projects			
Kenya/Arthi River	7040	Artimisia PPP	18.054,8
Colombia/Bogota	7030	Analysis and advice on provision of pharmaceuticals	5.010,0
Congo/Bukavu	7020	Supporting local production by Dr. Krisana Kraisintu	24.604,4
Tanzania/Dar es Salaam*	7000	Setting up a research lab at the University of Dar es Salaam	102.218,5
Tanzania/Dar es Salaam	7010	Sustainable provision of essential drugs	1.063,4
Tanzania/Moshi**	7050	Trips Workshop	16.052,9
Tanzania/Local ARV production	7070	Technology transfer and local production of anti-retroviral drugs	107.273,5
Public relations and awarene	ss raising		

^{*} A project of the non-profit action medeor Healthcare GmbH

Branch in Tanzania is well established

Following intensive research, action medeor founded the non-profit action medeor International Healthcare GmbH in 2005. The founding of this subsidiary was an important step towards making action medeor more international and to becoming more efficient in helping others to help themselves. Soon after its foundation, action medeor International Healthcare opened its first field office in a developing country. The east African country Tanzania was chosen because medeor has been collaborating closely with the church-run health facilities there for decades and the provision of drugs through the state frequently resulted in shortages in the hospitals and clinics.

Local warehouse and distribution

Healthcare facilities in Tanzania, which were supplied from Germany until 2005, now receive goods direct from the Tanzanian capital, Dar es Salaam. Supplies go exclusively to non-profit parties, which are mainly church-run facilities, non governmental organisations and also state-run hospitals.

More than 200 essential drugs, from antibiotics to pain killers, and a large selection of medical materials such as bandages, are stored in the warehouse. The pharmaceutical suppliers are located in east Africa, India and Europe. action medeor International Healthcare ensures the quality of the medicines by inspecting the east African factories and by regular laboratory analyses of the drugs. The medicines are either picked up by doctors or nurses in Dar es Salaam or delivered by post or bus.

The medeor field office in Tanzania is run by Dr. Hellmuth Rößler and his dedicated team.

Dr. Rößler is a German pharmacist who has been working in Africa for several decades. He is assisted by the Tanzanian pharmacist, Gerald Masuki. Harieth Mtoi and Nelu Kangame are responsible for the accounting. Spider Simengwa and Salehr Mdogwa work in the warehouse and the driver, Willy Lesirwa, is responsible for delivering the supplies.

With the establishment of this branch in Tanzania, action medeor International Health Care has created



Dr. Rößler's team in front of the medeor field office in Dar es Salaam.

sustainable structures. Local manufacturers are involved and qualified Tanzanians are part of the team. This procurement office serves as a pilot project. The aim is to ensure access to high quality, low-cost drugs also in other countries in the near future. The fact that, as a consequence, the procurement of medication will largely be relocated abroad in the long-term, is a desired effect by medeor, as the goal is to provide sustainable development aid.



Development of medeor's International Health Care in Tanzania

2006

Total: **509.675 Euro**, including donations in the value of **102.524 Euro** Number of orders (incl. donations): **828**

2007

Total: **805.904 Euro,** including donations in the value of **160.740 Euro** Number of orders (incl. donations): **1.114**



medeor enables independence

medeor shows partners in the poorest regions of the world how they can improve their medical infrastructure efficiently and sustainably. They obtain qualifications which enable them to work independently at a local level, and thus no longer be reliant on outside help. medeor promotes the training and advanced qualification of pharmaceutical personnel as well as the local development, production and distribution of drugs. medeor's pharmaceutical projects generally run over a period of several years.

medeor promotes the production of drugs to fight malaria

Derivatives (chemically related substances) of artemisinin are currently considered to be the most effective substance for treating the dangerous form of malaria. Artemisinin is an ingredient of the Artemisia annua plant, the Chinese mugwort. Because it is badly absorbed by humans it cannot be used directly as an active ingredient but has to be chemically converted. Drugs based on artemisinin work quickly and effectively and have few side-effects. For the past two years, medeor has cooperated with the firm Advanced Bio Extracts Kenya (ABE). In 2007 the collaboration was focussed on the development of a chemical process to extract active pharmaceutical ingredients from artemisinin at very low-cost. medeor is receiving significant help for this project from two Senior Experts, a chemist and a methods engineer.



Artemisia annua grows well in the east African highlands.

The specialists are concentrating on developing a simple and environmentally friendly method for producing very inexpensive and modern malaria drugs locally. This method will first be used in Kenya starting 2008.

medeor is financing a research laboratory in Tanzania

In east Africa, the production of essential drugs for local markets is often

complicated by the lack of adequate technical facilities and poorly qualified personnel, in spite of local producers' serious efforts to improve quality.

Last year, medeor installed a modern research lab at the University of Dar es Salaam in collaboration with the pharmaceutical faculty, in order to support these efforts. This facility is unique in east Africa.

In the past twelve months, the building tract was cleared and the plan for equipping the lab has been completed. Special laboratory apparatus for manufacturing tablets, powders or granulate have been acquired. Renovation will be completed in mid 2008 and will offer 50 students and up to 25 manufacturers the possibility to improve their expertise and to produce modern pharmaceuticals. In future, special emphasis will be placed on the development of HIV/AIDS drugs which are suited to treat children. This

project, which is financed by GTZ, the federally owned cooperation enterprise for sustainable development, will run for 30 months.

medeor promotes the production of AIDS medication

The medeor project with the greatest financial volume to date is located in northern Tanzania. With the support of the European Commission, medeor and its partner, Tanzania Pharmaceutical Industries Ltd. (TPI Ltd.), will install a production plant in Arusha for manufacturing high quality, low-cost HIV/AIDS medicines by 2010 at the latest. The aim is to produce 100 million tablets per year in order to treat 80.000 AIDS patients annually in private and public Tanzanian therapy programmes. Training of internal and external experts in management, patent law regulations and Good Manufacturing Practice guidelines are further elements of the project. In the past twelve months, medeor has been working with various consultants on the specifications for the facility, called for tenders for the building and started contract negotiations with the plant construction firm. The planning proved to be very challenging so that in consultation with the European Commission, the project has been extended by half a year.





Participants of the TRIPS-workshop.

TRIPS Workshop on patent protection

All member states of the World Trade Organisation (WTO) are bound by the 1994 TRIPS-Agreement (Trade Related Aspects of Intellectual Property Rights) to introduce minimum standards with regard to patent law. Subject to certain conditions, developing countries are exempt, but the different players in the developing countries have to know their rights and duties in order to be able take full advantage of this, rather than agreeing to deals or passing laws which are not in their best interests. In November 2007, medeor conducted a workshop in collaboration with UNCTAD (United Nations Conference on Trade and Development) in Moshi, Tanzania. It was financed by the EU Commission and InWent. The flexibilities of TRIPS and regional thoughts on the subject were the main points of discussion. 30 participants from five east African countries represented different institutions such as the patent and registration authorities as well as drug manufacturers and distributors. The participants rated the workshop very positively and expressed the wish for follow-up events.

Senior Experts work with medeor

Last year some senior experts became involved in various medeor projects. With years of experience in the European pharmaceutical industry and a

specialisation in specific fields such as quality assurance or drug extraction, they complemented the work of the pharmaceutical services provided by medeor in many valuable ways. The senior experts conducted GMP audits for medeor at European and east African drug production facilities; they advised decision makers with regard to laboratory and production equipment for manufacturing drugs in Tanzania and trained pharmaceutical personnel in the east African pharmaceutical industry. In addition, these volunteers optimised the extraction process involving the Artemisia annua plant, from which the anti-malaria ingredient artemisinin is obtained. medeor thanks these highly qualified and experienced senior experts for their support.

medeor drugs saved this child's life too.



Achieving more together

In order to improve the living conditions of the poorest of the poor in developing countries, aid organisations must work together throughout the world and improve their networks. medeor has increased its involvement in various alliances and is currently a member of nine networks. Together with partner organisations medeor works to bring more pressure to bear on political decision makers.

medeor initiated the European-African Malaria Campaign

The European Union has earmarked

money to support the work of aid agencies based in Europe.
They should join forces and, through combined public relations, work to break down political barriers and to call for more public money for health-related issues in developing countries. medeor successfully applied for EU funds, and was thus able to initiate the malaria campaign "Stop Malaria Now". Other aid organisations in Germany, Switzerland, Spain, Poland, Italy and



Kenya are also involved.

medeor organised the international Venro Conference on HIV and AIDS

In May 2007, the international conference "Joining Forces, Synergising Action – Sustainable and Innovative Ways of Ensuring Long-Term Availability of Malaria Prevention and Treatment Measures by 2015, was held in Bonn. medeor organised the conference together with 12 other partners of Venro (Association of German development non-governmental organisations). The conference was part of the German EU Council presidency



More than 70.000 people took part in the demonstration "Your Voice Against Poverty" with Herbert Grönemeyer, Bono, Silbermond and many others.

project. About 150 conference participants from 15 countries discussed how to achieve adequate access to AIDS medication, as well as to prevention and care by 2010. A catalogue of demands compiled during the conference was presented to EU-Council President Angela Merkel and Heidemarie Wieczorek-Zeul, German Minister for Development and Economic Cooperation, on the eve of the G8 Summit in Heiligendamm. The group of Eight (G8) comprises Italy, Canada, Japan, Germany, the United States, Russia, Great Britain and France. The European Commission has observer status in this group.

medeor at the G8 Summit

During the G8 Summit, a festival was held in Rostock, organised by

"Your Voice Against Poverty" under the aegis of Venro. More than 70.000 people took part in the peaceful "Music & Messages" demonstration. Musicians Herbert Grönemever, Bono, Die Fantastischen Vier, Silbermond and many others supported the event. Everyone witnessed how the participating organisations and groups - including action medeor - built a large pyramid of boxes on the stage. These contained lists with more than a million signatures of dedi-cated people, who demanded that the G8 representatives honour their obligation to realise the Millennium Goals formulated by the international community in 2000. The goal is to reduce by half the number of people living in absolute poverty by 2015.

medeor works in many alliances



medeor asks for your trust

Many donors have been supporting medeor for years because they trust medeor and know that their money will be spent sensibly. This trust is a great motivator for the medeor team to continue their daily work with dedication. Raising the level of awareness for medeor is essential in order to expand the circle of donors. Because the more support medeor receives, the more aid can be provided. Special thanks are due to the actress Anke Engelke, who continues to support medeor with a great deal of commitment. Many groups and voluntary helpers also worked hard to spread the word. Here are some examples of past year's activities:



Anke Engelke visits children in Lituhi.

Anke Engelke works to combat malaria

Last year Anke Engelke campaigned in support of medeor to sensitise the German public on the issues related to the illness malaria. On Africa Malaria Day on the 25th of April, she announced the three year medeor malaria campaign. She packed medeor parcels with life saving medicines



against a backdrop of 100 mosquito nets on Potsdamer Platz in Berlin.

During the RTL television charity marathon in November 2007, she presented a medeor project, the focus of which is to build a malaria ward for children in Lituhi, Tanzania. Malaria is the most common disease among children in the malaria high-risk areas on Lake Nyassa, as well as the most frequent cause of death. Many young patients do not have a chance to survive the illness because the lack of transport and too great distances mean the parents are unable to bring them to a health centre. Anke Engelke convinced herself of the urgency of the assistance by visiting the project and speaking to those affected. Her support in the RTL charity event was very effective: 695.080 Euro were collected for building and equipping a children's hospital in Lituhi and for distributing mosquito nets. Thanks to this fantastic fundraising campaign, many children will soon be receiving medical treatment, or will even be protected from the illness altogether.

In the television programme "Menschen bei Maischberger" Anke
Engelke again drew attention to the fatal dangers of malaria, particularly for children in developing countries.
Together with medeor pharmacist Christoph Bonsmann, she talked about low-cost therapies and life-

saving preventive measures: "It is so easy to help: just one Euro can save a child with malaria".



"In 2003 I met the action medeor Team, got to know the work in Tönisvorst and saw how medeor's "Aid in a box" works. I went to Benin and Tanzania with action medeor and saw for myself that the medical aid really does reach those who need it. Now I know the alarming scale of HIV/AIDS and malaria in Africa and that not much is needed to help.

I call on all readers to support medeor's work, so that as many people as possible have access to life-saving drugs".

Your Anke Engelke



Press

In 2007 there were many reports on the work of the medical aid organisation in the regional and national press and on television: the focus was on medeor's efforts in the battle against malaria and HIV/AIDS, on emergency aid in Africa, Bangladesh, India, Pakistan and the Caribbean as well as medeor's involvement in various alliances and networks.

Advertising

Last year's malaria campaign was accompanied by an extensive outdoor campaign. Thanks to the generous support of Ströer, the large-scale posters were placed extensively in the region free of charge. An overview of all current advertising, TV spots and internet banners can be found on the medeor internet page at www.medeor.de. medeor is very grateful for the generous support in placing free advertising.



Lively presentations are a part of medeor's educational work.

Information for school children and groups

When school children come to our headquarters in Tönisvorst, they find the view from the visitors' dais onto the large warehouse particularly fascinating. They see how the medicines are taken from high racks and are transformed into ready for dispatch "Aid in a Box".

Many different groups also take advantage of the opportunity to get to know medeor personally by visiting the operations in Tönisvorst. Currently, three volunteers are helping medeor staff with this educational work. Last year the team invited or visited 21 schools and informed around 2.000 children and young people about medeor's activities, with a special emphasis on malaria and HIV/AIDS.

Exhibitions and events

Visitors to medeor often spend some time in the foyer, where interesting exhibitions are presented at regular intervals. In 2007, five collections covering very different subjects were exhibited. The Shona exhibition of modern stone sculptures from Zimbabwe and an informative exhibi-

tion on our work on malaria attracted particular interest.

medeor at the Evangelical Church Conference

Over 100.000 people visited the 31st Evangelical Church Conference in Cologne. medeor staff presented successful results in the battle against malaria and informed interested visitors about the work of the medical aid organisation.



Eddious Nyagweta from Zimbabwe made this stone sculpture.

Thank You!

A heartfelt thanks to all private donors, firms, schools and clubs whose financial support and commitment enabled medeor to provide aid in 2007. We would not be able to provide regular "Aid in a Box" without your help. Here we present a selection of the many activities of the past year.

Mr. and Mrs. Wirtz from Aachen celebrated their silver wedding on the 15th of September. As with previous family celebrations, the couple asked their guests to support the work of action medeor rather than to give them presents. This wonderful idea resulted in a donation of 2.685 Euro. In 2007, medeor was delighted to receive a total of 36.000 Euro from donations marking special events.



For the past 30 years the people in the parish of Schwalmtal have been collecting money for people in need during Lent. In 2007, the two pastors, Dr. Wilhelm Kursawa and Thorsten Aymanns, presented a donation of 19.715 Euro to Barbara Kühlen and Norbert Vloet from action medeor. Herr Vloet thanked them: "This generous sum will make a considerable difference for a major health project in Ecuador".

Cabaret and sweets go together very well. At least that's what Stefan Verhasselt thinks. At his performances as a cabaret artist, the WDR4 presenter sold home-made sweets. One Euro from each box sold went to action medeor. Verhasselt handed a 500 Euro donation to medeor managing director Bernd Pastors.



Eighth grade pupils from the Kempener Thomaeum cycled about 18 kilometres from their school to action medeor in April. For every kilometre they asked for a donation from friends and family. The sum of 715 Euro went to the Hokisa orphanage in a Township near Capetown in South Africa. In this medeor project young AIDS patients receive medical treatment.



The Catholic Primary School in Düsseldorf-Niederkassel has been supporting action medeor's work for ten years. During Advent of 2007, the children collected for the St. Walburgs Hospital in Tanzania and amassed 1.270 Euro. The children are proud that their annual activity helps supply medeor medicines to children in Tanzania who are suffering from malaria, anaemia, under-nourishment and intestinal worms.



For the past four years the most successful lawyers in Germany have been presented with the "Juve-Award", the "Oscar" for top lawyers. There were two further winners in addition to the prizes presented in 17 categories on the 31st of October in the Frankfurter Palais im Zoo: the two aid organisations action medeor and the Treatment Centre for Victims of Torture (bzfo). medeor received a cheque for 86.875 Euro. Bernd Pastors, managing director of action medeor, thanked the 850 guests for the donation: "this sum will go a long way in helping us to set up local pharmaceutical production in Tanzania. This is enormously helpful for our work!"

On the third Sunday in Advent it was that time of the year again: medeor welcomed friends and supporters to the 9th Christmas Charity Gala in the Krefeld Seidenweberhaus. Over 1.000 guests thoroughly enjoyed the programme, which included the Duisburg Youth Orchestra, the Da-CapoGonBrio girls' choir and the Latin American Group Inti Punchai. As in past years, the cabaret artist Jochen Butz directed the proceedings with charm and wit. The audience's donations totalled 13.000 Euro, which will go towards fighting malaria. In addition, Dr. van Hagen, Chief Financial Officer of St. Gobain Glas, presented a donation of 5.000 Euro. Many thanks also to the main sponsor, Autohaus Hülsemann, and to the other supporters: Volksbank Krefeld, Sparkasse Krefeld, Stünings Medien and Bauen & Leben, Bürgerwehr Uerdingen, Bäckerei Daamen, Gärtnerei Andreas von Danwitz, Nessies Blumenparadies and the Niederrheinische Formenfabrik Janssen and Sohn.



Beyond one's own time

It is important to plan and make provision for the future. It can be comforting to know that one's affairs are in order and that the people one cares for will be provided for when one is no longer there. More and more people would like the values and convictions which are close to their hearts to be sustained after their death, and decide to use part of their estate to help people in need.

A Testament for humanity

action medeor is a trustworthy and reliable partner in case you would like to ensure a healthy life for people in the poorest regions of the world with part of your estate. Your bequest would be used in strict accordance with your wishes. You decide what it should be used for and whether your money should remain permanently in the action medeor foundation or whether it should be spent directly in helping the needy. action medeor is recognised as a nonprofit organisation and is exempt from death duties, as is the medeor foundation. This means that your bequest will benefit the people in the poorest regions of the world with absolutely no deductions.

Legacies and Foundation 2007

In 2007, we were able to use a total of 112.000 Euro from legacies for medical aid and health-care provision world-wide.

On 31.12.2007 the assets of the foundation were one million Euro. In 2007, 64.000 Euro were distributed from foundation revenues. Depending on the wishes of the donors, projects were supported which concentrated on malaria, HIV/AIDS and general health-care care in Togo, Rwanda, Uganda, Congo, Namibia, Tanzania, Ecuador and Afghanistan. We are extremely grateful that the commitment of donors and benefactors has made this help possible.

medical aid organisation in Europe and to form your own opinion about our work. If you decide that you would like to give the gift of good health beyond you own lifetime, we will be happy to give you information about the different possibilities and about our projects. We can send you the new medeor Legacies and Foundations brochure. Please order it with the post card on the last page of this annual report, or call Kerstin Schlick.

We look forward to talking to you.

Your contact: Kerstin Schlick

Tel.: 0049 / (0) 21 56 / 97 88-70 Email: kerstin.schlick@medeor.de

Legacies are a question of trust

It takes time and trust to decide for an organisation or a project. We would like to help you get to know action medeor, either by providing information and answering questions on the phone or during a visit to Tönisvorst. We warmly invite you to come and see the largest





Maria Dora is a health worker and cares for people in Ecuador.

Transparency at action medeor

The confidence of our donors is vital. For action medeor, transparency and quality standards are of top priority: Every year, medeor voluntarily undergoes an external audit. For many years now the organisation has regularly received the seal of approval from the German Central Institute for Social Affairs (DZI). And the European Union Office for Humanitarian Aid (ECHO) has certified medeor as a Procurement Centre for Humanitarian Aid. medeor is the only German non governmental organisation with this status.

In November 2007, the German Central Institute for Social Affairs awarded medeor the DZI seal of approval for 2006. This guarantees transparency and cost-effective use of donations. The DZI comment on action medeor's work: "The organisation works in accordance with its statutes. Advertising and information are honest, clear and factual. Cash flow and assets are comprehensibly documented. The organisation and its organs are supervised by an independent supervisory body."

The figures in the earnings statement for 2007 show that the following data can be expected for the year 2007: Administration costs (personnel and general office expenses) amounted to 985.000 Euro. This equates to an administration costs quota of 9,92%. Expenditure on communication with donors and for public relations work were 1.159.000 Euro, which is 11,67%.

Make a gift of health!
With a 140 Euro parcel you can pay for valuable seeds to cultivate one hectar of Artemisia annua, from which modern malaria drugs are manufactured.



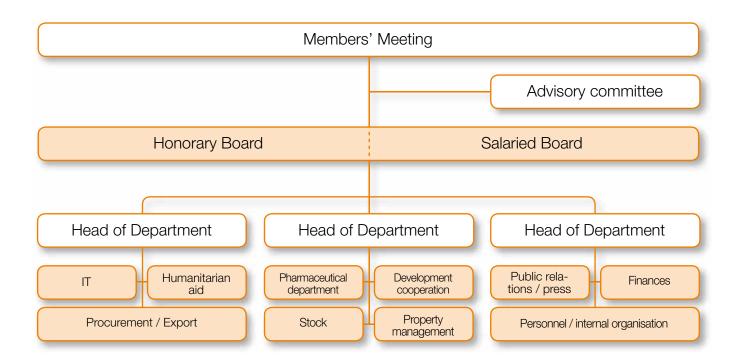
Our status as central procurement agency for humanitarian aid means that medeor is obliged to put all orders concerning the procurement of medicines and medical equipment out to public tender. action medeor's procurement guidelines conform to those laid down in the EU ECHO Framework Partnership Agreement Annex V.

medeor invites tenders with an internationally published tender notice for a procurement volume of over 150.000 Euro; orders between 30.000 and 149.999 Euro are allocated with the help of an internationally published "contract notice", the limited invitation to tender. Single tender action without competition is permitted with orders up to 29.999 Euro, however medeor usually also puts these orders out to tender. Observance of these European Union regulations is regularly checked by independent auditors.

We can only work to improve the health of people in the poorest countries of the world with your help and your faith in our work. If you have any questions at all about the use of donations or concerning our work, do please give us a call or look at our internet pages.



The organisation



The German medical aid organisation action medeor e.V. was founded as an independent organisation in 1964. The organs of the organisation are the members' meeting, the advisory committee and the board. With the exception of the full-time board, all the members of these bodies are acting on an honorary basis.

Members

The meeting of the members is usually held once a year. It elects the board and the advisory committee for a period of three years. It approves the board's decisions, the annual accounts and business report, decides on the membership fee and amendments to the statutes and can dissolve the organisation. On December 31, 2007 the organisation had 47 members.

The advisory committee

The advisory committee comprises at least five and at most seven members, and meets at least twice a year. The advisory committee advises the

board in the execution of its duties, in particular on questions regarding the provision of drugs to those in need (outside the European Union), collaboration with other aid organisations and the economic development of the organisation. The chairman of the advisory board regularly attends the meetings of the board, and after approving the annual accounts advises the members with regard to approving the actions of the management and the board.

Advisory committee 2007

Chairman:

Pastor Theo Floracks, *Heinsberg* **Deputy Chairman:**

Walter Schöler, Tönisvorst

Sister Clara Alicia Rozo, Sisters of the Poor Child Jesus, Simpelveld/ NL
Dr. Gisela Schneider, German Institute for Medical Mission e.V. (DIFÄM), Tübingen
Otto Fricke, MP, Krefeld
Uwe Schummer, MP, Willich

The Board

The board comprises at least three and at most five honorary members and a salaried managing director.

The Honorary Board

The honorary board is answerable to the members and meets six times a year. It discusses and makes decisions on all statutory responsibilities and strategic questions regarding the organisation. In addition it decides on the appointment and dismissal of the salaried board.

The legal representatives of the organisation, in accordance with § 26 BGB, are the chairman, the deputy chairman, the treasurer and the managing director. Legally binding statements on behalf of the organisation are made by the chairman or the deputy chairman and a member of the honorary board. The members inform themselves regularly about the organisation's current activities.

The Board 2007

Regular Board (Management)

The regular board is responsible for all the business and draws up the yearly budget and staff appointments plan. It informs the honorary board about all important matters and implements the decisions of the honorary board, with the aim of carrying out the organisation's duties and responsibilities at the least possible expense. The board is the supervisor of the organisation's staff, of which there were 49 in 2007.



Honorary Chairman: Heinz Gommans, Krefeld



Honorary
Deputy Chairman:
Heinrich Lauf,
Viersen



Honorary Treasurer: Siegfried Thomaßen, *Tönisvorst*



Honorary Assessor: Prof. Dr. Marlis Hochbruck, Schwalmtal



Honorary Assessor:Dr. Thomas Menn,
Frankfurt (Oder)



Managing Director and member of the board: Bernd Pastors, Mönchengladbach



Heinz-Josef Vogt hands over the Chairmanship to Heinz Gommans.

"Health for all" should become reality for people in the developing countries as well.

action medeor is grateful to Heinz-Josef Vogt for his long commitment as chairman of action medeor and wishes him all the best for the future.

A new chairman

In June 2007 the members elected Heinz Gommans as new chairman, as Heinz-Josef Vogt retired at the end of his 70th year. Heinz Gommans had already acted as treasurer for the organisation for six years. He decided to join medeor in 2001 because development policy and voluntary work had always been important to him and he also had a personal interest in Africa and Latin America. During the course of many private journeys he went to South Africa, Tanzania, Peru, Guatemala and Mexico, during which he also visited medeor projects.

The former banker was on the board of the Volksbank Krefeld for

more than 30 years and retired from his job in 2005. Nevertheless he is not leading a quiet life now. Apart from his continued involvement with medeor, Heinz Gommans is active in his local parish council and works in a voluntary capacity on the board of the Lebenshilfe Krefeld. His wife, four children and grandchildren are the central focus of his life. In his spare time Heinz Gommans reads, does sports and plays 'skat'.

Our new chairman hopes that more and more people will be convinced of the important work done by medeor. It would be wonderful if the generous support medeor receives in the region were extended throughout Germany.

Auditors Report

"We have audited the accounts of the German medical aid organisation ,action medeor' e.V. – comprising capital account, earnings statement and cash flow statement - for the financial year from 1st January to 31st December 2007 The book keeping and accounting are the responsibility of the legal representatives of the organisation. Our task is to assess the accounting and book keeping on the basis of the audit carried out by us.

We have performed our audit of the accounts and book keeping in accordance with §317 HGB, with attention to the proper accounting principles laid down by the German Institute of Chartered Accountants on the orderly audit of annual accounts.

The audit must be planned and performed in such a way that inaccuracies and offences which fundamentally affect the presentation of the state of the company's affairs can be adequately identified. When assessing the audit, knowledge of the business activities and the economic and legal environment of the organisation and the expectation of possible errors is allowed for. During the audit the efficacy of the accounts-related internal control systems and verification of the entries in the accounts were mainly assessed by random sampling. The audit encompasses the assessment of the applied accounting policies and the fundamental assessments of the legal representatives as well as an appraisal of the over-all view of the book keeping. We believe that our audit provides an adequately secure basis for our judgement.

Our audit gave rise to no objections.

In our judgement, based on knowledge gained during the auditing process, the annual accounts are in accordance with the legal specifications and the supplementary regulations of the society's constitution and give a true picture of the assets, financial and profits situation of the organisation.

Krefeld, April 21st, 2008



Overview of key data 2003 - 2007

In Mio. Euro

	2003	2004	2005	2006	2007
Sales revenue	6,52	5,79	5,83	5,32	4,97
Proceeds from donations	2,90	3,91	5,48	5,04	4,30
Proceeds from grants for projects from third parties	0,04	0,13	0,10	0,13	0,44
Subtotal	9,46	9,83	11,41	10,49	9,71
Expenditure for raw and auxiliary materials and consumables, including changes in inventory	-5,30	-5,45	-6,45	-4,83	-4,34
Gross result	4,16	4,38	4,96	5,66	5,37
Net result	-0,02	0,04	0,31	0,60	0,16
Donations	3,44	5,02	6,43	4,80	5,51
Net capital	9,661	9,732	10,04 ³	10,644	10,735

The Executive Committee

Tönisvorst, April 10, 2008

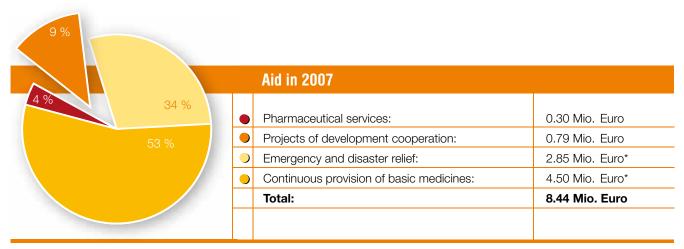
Assets		Capit	al account as o	Capital account as of December 31, 2007		Liabilities
A. Fixed assets	EUR	EUR	Prev. Year TEUR	A. Net equity	EUR	Prev. Year TEUR
I. Intangible assets	82,669.23		143.7	10,		10,041.9
II. Tangible assets	3,669,555.55		3,885.0	Movement of reserves -58,805,65	20 444 444	595.4
III. Financial assets	115,490.00	3,867,714.78	115.4	Status Dec 31, 2007	10,732,741.73	0.759,01
B. Floating assets				B. Accruals		
l. Stocks				Other accruals	238,589.61	161.6
Raw material, consumables and supplies		2,798,112.28	2,725.8			
II. Accounts receivable and other property items				C. Project funds/donations not yet appropriated	441,733.36	33.3
1. Receivables from supplies and services	351,081.24		467.2			
2. Receivables from investee companies	112,211.49		119.2	Consider from many and	A 054 272 34	0 000 8
3. Other receivables	266,658.90	729,951.63	371.6	U. runds from major projects not yet appropriated	4,8012,108,4	0.188,4
Residual term in excess of one year: term 1: EUR 0.00 (Prev. year: TEUR 0.0) ttem 2: EUR 103,063.86 (Prev. year: TEUR 110.4)	(0.4)			E. Liabilities		
Item 3: EUR 125,930.74 (Prev. year: TEUR 148.2)	18.2)					9036
III. Receivables from major projects		2,767,204.00	4,991.0	Liabilities from supplies and services	10100 111	0,000
IV. Investments				z. Other liabilities		200
Other investments		5,208.00	4.5	 of this, tax liabilities: EUR 20.332.60 (Prev. year. TEUR 20.7) of this, social security-related liabilities: ETID 4.724.727.070-w. month TEI ID 4.80 	20.7)	
V. Cash in hand und cash in banks				EON 1, 231.27 (FIBV. Year. 1EON 1.0)		
1. Cash in hand	6,637.54		1.4	Residual term of up to one year them 1: EUR 155,044.15 (Prev. year, TEUR 359.6)		
2. Cash in banks	6,623,600.00	6,630,237.54	3,777.7	IREM Z. EUK 200, 100.49 (Prev. year, 100% 425.0)		
C. Prepayments and deferred charges		7,133.47	3.0			
		16,805,561.70	16,605.5		16,805,561.70	16,605.5
Liability status subject to certification in the sense of § 251 of the Commercial Code; EUR 0.00	51 of the Commercial Coc	de: EUR 0.00				

<u>German Pharmaceuticals Relief Organisation</u> <u>"action medeor" e. V., Tönisvorst</u>

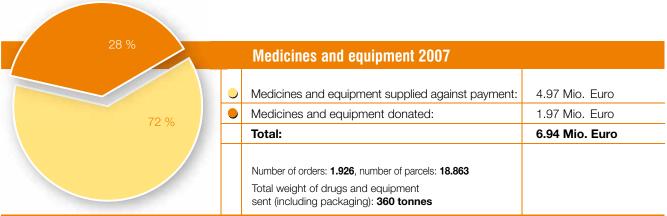
Annex 2

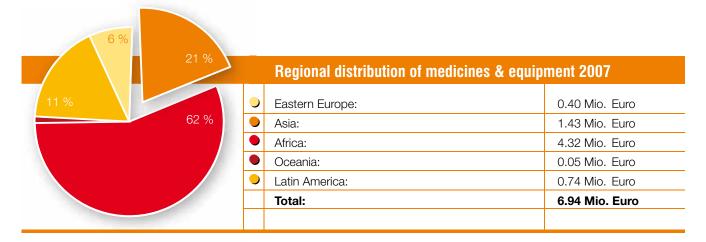
Profit and Loss Account for the business year from January 1 to December 31, 2007

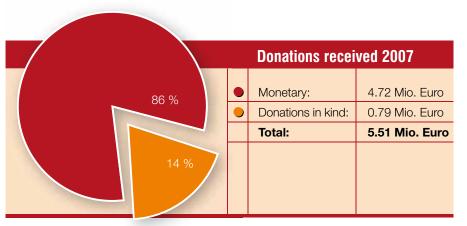
		2007 EUR	2007 EUR	<u>2006</u> TEUR
1.	Sales proceeds		4,968,649.23	5,317.6
2.	Proceeds from the usage of donations		4,297,220.06	5,043.8
3.	Proceeds from grants on the part of any third parties		437,876.71	126.5
4.	Other operative proceeds		88,343.60	73.2
5.	Material expenditures on commodities and services obtained		-4,341,524.77	<u>-4,830.3</u>
6.	Gross profit		5,450,564.83	5,730.8
7.	Personnel expenditure a) Salaries and wages b) Social security charges and expenditures on pension and support c) Voluntary social security charges - of this, amount spent on pension: EUR 5,393.13 (Prev. year: EUR 30.60)	-1,525,893.70 -284,727.48 42,923.85	-1,853,545.03	-1,467.7 -282.0 -45.1
8.	Depreciations on intangible assets of fixed assets and tangible assets		-341,113.63	-317.3
9.	Other operative expenditures		-3,227,652.95	<u>-3,110.3</u>
10.	Operating profit		28,253.22	508.4
11.	Other interests and similar proceeds	138,001.45		100.3
12.	Interests and similar expenditures	<u>-11,675.95</u>	126,325.50	<u>-13.3</u>
13.	Net profit		154,578.72	595.4

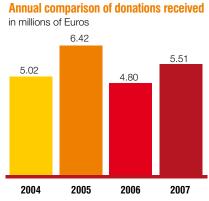


* These figures refer to the gratuitous and non-gratuitous supply of medicines and equipmen	t
which totalled 6.94 Mio. Euro	











German Medical Aid Organisation action medeor e.V.

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An der Steig 12 D-97334 Sommerach

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Pechauer Str. 31 D-39114 Magdeburg

Tel.: 0049 / (0) 391 / 85 10 41 Fax: 0049 / (0) 391 / 85 10 43

action medeor International Healthcare Tanzania

P.O.Box 72305 Dar es Salaam

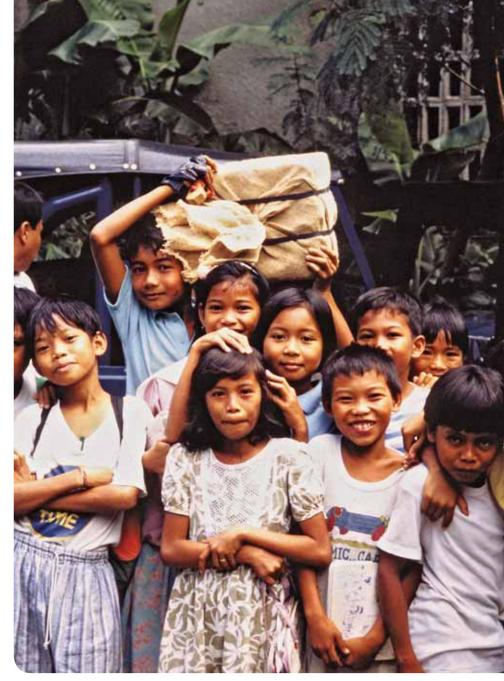
Tel.: 00255 / (0) 22 286 31 36 Fax: 00255 / (0) 22 286 30 07

medeortz@bol.co.tz

Bank account for donations:

Volksbank Krefeld IBAN DE 12 3206 0362 0555 5555 55 BIC GENODED1HTK

Website: www.medeor.de



medeor – your help really gets to where it is needed!

