WE BELIEVE EVERY CHILD DESERVES A CHANCE AT A HEALTHY LIFE

Australian Lions Childhood Cancer Research Foundation

September 2023 Newsletter

ALCCRF Chairperson Update

Welcome to the September 2023 edition of the Foundations newsletter.

It is that time when we a settling to a new Lions year with most Districts looking towards there Conventions that are running from the last weekend in September through to mid-November. For those in new roles, particularly those associated with the Foundation, we look forward to working with you.

Our Christmas Pins are out early this year and available now directly from your District Chair and at your District Convention.

I remind the District Governors of the "District Governors Challenge" as promoted at the Gold Coast MD Convention (refer page 16 of your ALCCRF District Governor's Guide).

The final report for the Children's Cancer Foundation's (CCF) Paediatric Precision Medicine, Biobank Project is included in this newsletter. The report is technical, but commences with a summary in layman's terms. The project was conducted at, and by Monash Health's Hudson Institute of Medical Research. The ALCCRF provided funding of $450k for the project.

The outcomes from this project will assist future researchers to identify and advance new therapeutic targets at the preclinical level and facilitate in clinical trial design. As the number of patients and samples grow, they will be able to utilise a 'big data' approach to undertake the following objectives:

1. Utilise state-of-the-art Artificial Intelligence technology to identify paediatric cancer genetic vulnerabilities, potential targeted therapies and predictive biomarkers of response;

2. Generate and maintain a web-based analytical data portal that will provide a publicly available resource for data visualisation / exploration of omics datasets.

3. Harmonise patient model data analysis with clinical treatment plans for children enrolled in the Zero Childhood Cancer program.

My usual quarterly update of our current projects is as follows: -

1. Telethon Kids Institute (TKI) - Paediatric Cancer Immunotherapy ($1.05m) That component of the project now completed. Additional new funding of $200k approved, Outstanding commitment $100,000.

2. Cancer Australia, Priority-Driven Collaborative Cancer Research Scheme
   a) Dr Jessica Buck – Exploiting and enhancing brain-resident immune cells for the treatment of paediatric brain stem glioma, University of Western Australia /TKI ($54.8k) Outstanding commitment $1,838.
   b) Dr Pouya Faridi - Novel targets for paediatric brain tumour immunotherapy, Monash University ($73.3k) Outstanding commitment $1,655.
   c) Dr Klaartje Somers - University of New South Wales/CCI ($100k) Outstanding commitment $100,000.

3. WEHI – Enhancing CAR-T cell therapy to treat childhood leukemia ($596k) Outstanding commitment $447,000.

4. Griffith University's, Institute for Glycomics - Focus on Sarcoma – early markers, improve diagnosis targeting pathways to treatment ($800k) Outstanding commitment $350,000.

5. University of Newcastle – Development precision immunotherapeutic strategy for paediatric brain tumours ($635k) Outstanding commitment $547,500.

Full details of the current projects can be found on the Foundations website - https://alccrf.lions.org.au/our-research-projects/ along with our finalised projects and our 10-year history – https://alccrf.lions.org.au/finalised-projects/

And as I always remind the readers of our newsletter, your ongoing support ensures that we reach our vision of **100% Survival for Kids with Cancer**, remembering that:-

"Every child deserves a chance at a healthy life"

Ron Skeen OAM
ALCCRF Chairperson

Hudson Monash Paediatric Precision Medicine Program

(Project contracted to and managed by the Children's Cancer Foundation, CCF)

Lay Summary of Project

Australia's first paediatric cancer living organoid and functional genomic program utilising individual patients' tumour cells to identify new therapeutic targets and repurpose existing targets using functional genomics technologies, with a focus on brain cancer, central nervous system tumours and Wilms tumour. Building on the 2-year establishment Phase I, Phase II maintains operation of the paediatric cancer living biobank of paediatric solid cancers (all childhood cancers, excluding leukaemia and lymphoma) with tumour cell lines, 3D living organoids and patient-derived xenograft models, to provide a renewable resource for identifying new genetic targets and treatments. It enables molecular analysis for each child's tumour for 150 patients and establishes a Molecular Tumour Board to translate this knowledge into clinical application. The key outcome is integration of comprehensive molecular analysis into clinical management by guiding molecular-targeted therapeutics for cancer patients.

Project Location

Hudson Institute of Medical Research.

Funding Milestones

The agreed milestones for your project were set out in your funding agreement. The milestone deliverables that correspond with this report are provided below. Indicate whether each deliverable has been achieved, and if not, provide a short explanation as to the issues involved, and steps taken to resolve them and the date by which you will have achieved the deliverable.

Aim 1 Milestones:

Collect additional paediatric solid tumour tissue samples (new and relapsed patients) to meet the target of 150 patients (SO per year) for model generation, molecular analyses and screening: From 1 July to the end of August 2022, the HMPPM Program has collected and performed analyses on a total of 9 childhood cancer patient models from Victoria, including: 1 ganglioneuroblastoma, 2 neuroblastoma, 1 dysgerminoma, 1 rhabdomyosarcoma, 1 craniopharyngioma, 1 osteosarcoma, and 2 medulloblastoma. Additionally, the program is expecting another 59 cell lines from international collaborators to arrive by September 2022. From the initiation of Phase II (Sept 2019) to date, we have collected and annotated 297 samples, representing the largest repository of childhood cancer models in the world. Specifically, in this reporting time, samples have been collected from the following organisations nationally and globally:

Partnering Institutes	Number of samples
Monash Children's Hospital, VIC, AUS	7
Royal Children's Hospital, VIC, AUS	2
Alex's Lemonade Stand, Texas Tech University, USA*	14
Institute of Cancer Research, UK*	21
Ospedale Pediatrico Bambino Gesu, Italy*	24
*Anticipating arrival end of Aug- early Sept 2022	**68**

RNA sequencing (Target: 120 patients, based on 40 per year): During this reporting period, the HMPPM Program has performed whole transcriptome RNA sequencing on 9 patient-derived cell lines and 9 collaborator cell lines. The samples will continue to be sequenced as they are established. We have an additional 18 collaborator cell lines in progress for RNA sequencing. From the initiation of Phase II to date, we have performed whole transcriptome RNA sequencing on 209 patient samples (primary tumours and cell lines), with another 18 in progress.

Whole genome sequencing (Target: 90 patients, based on 30 per year): Between July-August 2022, the HMPPM Program has also performed Whole Genome Sequencing (WGS) on 7 patient-derived models (1 patient-derived line and 6 collaborator lines). In this reporting period we have an additional 8 collaborator lines in progress for whole genome sequencing. **From the initiation of Phase II to date, we have performed WGS on 222 patient samples (primary tumours and cell lines) with another 8 in progress.**

Methylation array (Target: 90 patients, based 30 per year): During this reporting period, of the participants enrolled onto HMPPM Program Phase II, two were co-enrolled onto the AIM Brain clinical trial for methylation array profiling. Their methylation array reports will be shared with the HMPPM Program. Additionally, the HMPPM Program has undertaken methylation profiling on an additional 16 paediatric cancer models. We performed continual informatics analysis of the methylation data as new samples were introduced using the Chip Analysis Methylation Pipeline in R studio, and observed strong lineage/sub-lineage subgrouping. **From the initiation of Phase II to date, we performed methylation array profiling on 156 cell lines, including 47 DIPG/DMG, 19 ATRT, 29 pHGG, 12 osteosarcoma, 6 medulloblastoma, 16 aHGG, 3 MRT, 12 no malignancy brain controls, and an additional 12 rare paediatric tumour types.**

ATAC-sequencing (Target: 90 patients, based on 30 per year): Since the latest reporting period, we have completed the quality control and data analysis of the first 6 ATRT samples. Additionally, we have completed the sequencing and are currently undertaking the analysis of a further 6 control samples - lung adenocarcinoma samples that have inherent or engineered mutations in key epigenetic regulator genes. We have completed the processing of a further 3 ATRT samples in duplicate (6 samples) and they have shipped to GeneWiz and are currently undergoing sequencing. **To date, we have processed 23 individual models in duplicate (46 individual samples).**

Pharmacological Screen (Target: 120 patients, based on 40 per year and 30 controls, based on 10 per year): We have exceeded this milestone from the initiation of Phase II (see below). During this reporting period, the HMPPM Program is focusing on optimising the ALPACA Drug library and protocol that will be employed for drug screens in 2022 and beyond. **From the initiation of Phase II to date, we have performed/have data from 322 drug screens from 114 cases, and completed 113 CRISPR screens.**

Finalise proteomic and phospho-proteomic analysis: During this reporting period, we have submitted the final 45 (15 patients in triplicates) samples and are awaiting data return. This cohort includes 3 HGG, 1 Medulloblastoma, 1 Rhabdomyosarcoma, 5 DMG/DIPG, 1 ETMR,ATRT, 1 Anaplastic Ependymoma, 2 Adult GBM as control. The program continues to integrate the data into our other analyses from all previously submitted proteomic and phosphoproteomic. **From the initiation of Phase II to date, we have performed proteomics analysis on 133 samples, including the 45 (15 patients in triplicates) samples still in progress.**

Conduct drug assays on patient-derived xenografts for brain cancer or subcutaneous models for other cancer types (n=30, based on 10 per year): During this reporting period, we have begun to establish additional DMG in vivo tumour models. **To date, we have transplanted a total of 32 tumour models into mice,** with 20 demonstrating successful engraftment and 12 that failed to engraft, whose experiments were terminated. Some of the models engrafted during the reporting period have been genetically engineered to express GFP/LUC reporters to enable longitudinal live mouse imaging of tumour growth, and/or CAS9-mCherry to facilitate future in vivo pathway dependency discovery and validations.

Validate therapeutic biomarkers discovered from functional genomic profiling using PDX models and additional patient samples: During the reporting period, we performed several in vivo validation studies using PDX models. An early finding from our CRISPR-cas9 screens was the specific dependency of paediatric but not adult glioma on the pro-survival molecule MCL1. We are currently testing the MCL1 targeted therapy AZD5991 in several xenograft models as proof of its druggability in vivo. In addition, an early finding from our screens was the specific sensitivity of ATRT cell lines on oxidative phosphorylation, which we have shown is targetable using the complex I inhibitor IACS-010759. We have performed initial dose finding studies on 20 mice and established a treatment regime which is well tolerated in mice, and are now progressing to testing the effect of this drug on orthotopic models of ATRT.

Additionally, we have begun optimising in vivo genetic screen methods for orthotopic DMG models. We have successfully developed, engrafted, and then collected Cas9-mCherry expressing DMG cells using complex brain dissociation and cell sorting methods. These protocols will now enable us to examine gene expression, DNA methylation and genetic

dependencies in orthotopic in vivo models, and investigate how these might differ from an in vitro cell culture model.

Please refer to the summary table below for summary data from the initiation of Phase II in 2019:

Aug2022	Achieved Since Sept 2019	Accrued Targets (Sept '19 to Aug '22)
Participants/ Cases Recruited	297	150 (50 per year)
Drug Screens	322 (114 cases)	120 patients + 30 controls
RNA Sequencing	209 [20 primary, 189 cell lines (18 In progress)]	120 patients
WGS	222 [25* primary, 24* germline, 173 (8 In progress)]	90 patients
CRISPR Screens	113	N/S
Proteomic / Phosphoproteomic analyses	133	N/S
Methylation Arrays (primary tumour and/or cell lines)	156	90 patients
PDX Modelling/xenograft/ in vivo: drug assays +validation	32 (12 attempts, 20 successful**)	30 (PDX modelling/drug assays)
ATAC-sequencing (cell lines)	46	90 patients

*Green indicates milestone exceeded and yellow indicates work in progress.

**PDX models and Xenograft Models : 32 (20 success, 12 failed).

Provide report on Aim 1 outcomes and measurable impact over 5 years from commencement of Phase 1 in September 2017:

Paediatric solid and central nervous system (CNS) tumours are the leading cause of cancer-related death amongst children. Identification of paediatric-specific targeted therapies necessitates the use of paediatric cancer models that faithfully recapitulate the patient's disease. In adult cancers, comprehensive cell line repositories and data atlases have enabled both hypothesis-driven research and scalable screens for new therapies. The generation and characterisation of paediatric cancer cell lines has significantly lagged behind that of their adult counterparts, underscoring the urgent need to develop a paediatric-focussed cell line resource. To address this, over the past five years the Hudson Monash Paediatric Precision Medicine Program has established a single-site collection of >250 cell lines, including 217 paediatric

cancer cell lines representing 14 distinct extracranial and brain childhood tumour types (Figure 1}. We subjected 164 paediatric cancer cell lines to multi-omic analyses across three dimensions (DNA-sequencing, RNA-sequencing, DNA methylation) to classify them based on clinically relevant molecular subtypes. In parallel, pharmacological and genetic CRISPR-Cas9 loss of function screens were performed to identify paediatric-specific drug sensitivities and genetic dependencies. Machine-learning approaches were employed to delineate predictive features of therapeutic vulnerabilities in different subtypes of paediatric cancers. By integrating molecular features with functional genomic and pharmacological profiles, we demonstrate how therapeutic target-biomarkers pairs may be rapidly prioritised and advanced. Lastly, we provide cell line data and resources in an open access portal to support drug development efforts, clinical trial design, and personalised medicine approaches for paediatric cancers of greatest unmet medical need (The Childhood Cancer Model Atlas - CCMA - Available at: vicpcc.org.au/dashboard). This work is submitted as a manuscript to Nature Medicine.

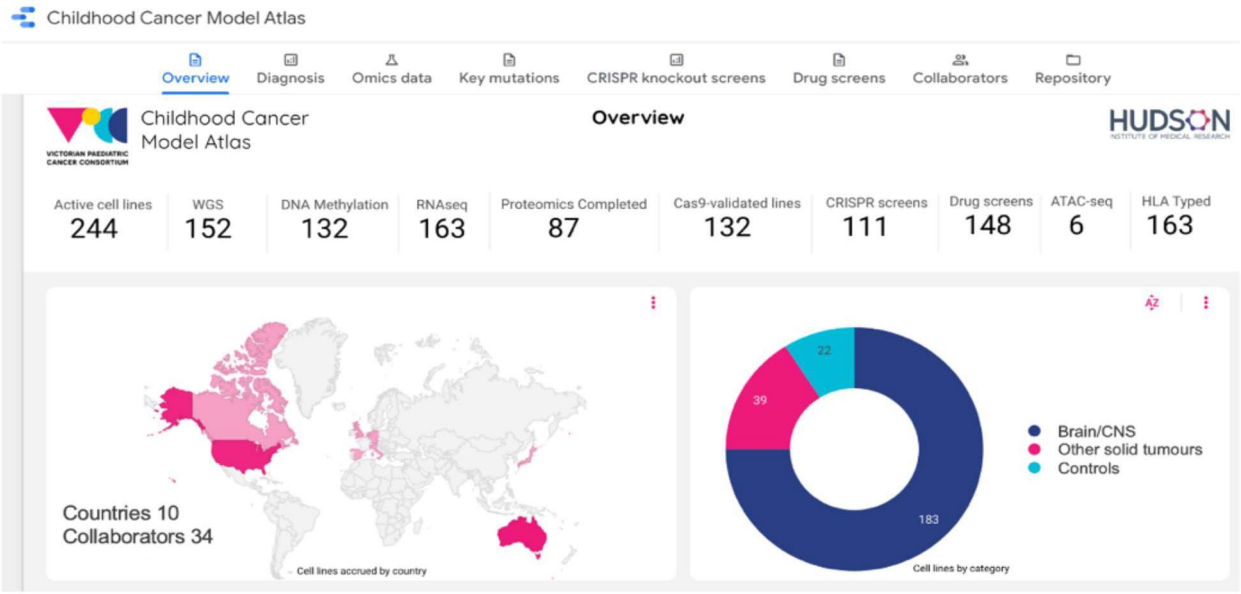

Figure 1. The web-interface of Childhood Cancer Model Atlas shows the current multi-omics datasets for the cancer cell line models derived from paediatric cancer patients with a focus on brain tumours.

The CCMA presents a tremendous opportunity to use state-of-the-art computational approaches to integrate molecular features with functional dependencies. We anticipate that this type of approach will generate new molecular precision medicine opportunities for paediatric cancer patients, help catalyse molecular-driven paediatric cancer research globally and integrate data from patient models into a clinical decision-making framework.

Given the diverse molecular subtypes of childhood cancers, and in brain cancers, it is critical to expand the collection of paediatric cancer cell lines with the goal of establishing a diverse and rich compendium of models that recapitulate the tumour profiles and mutational patterns (Figure 2).

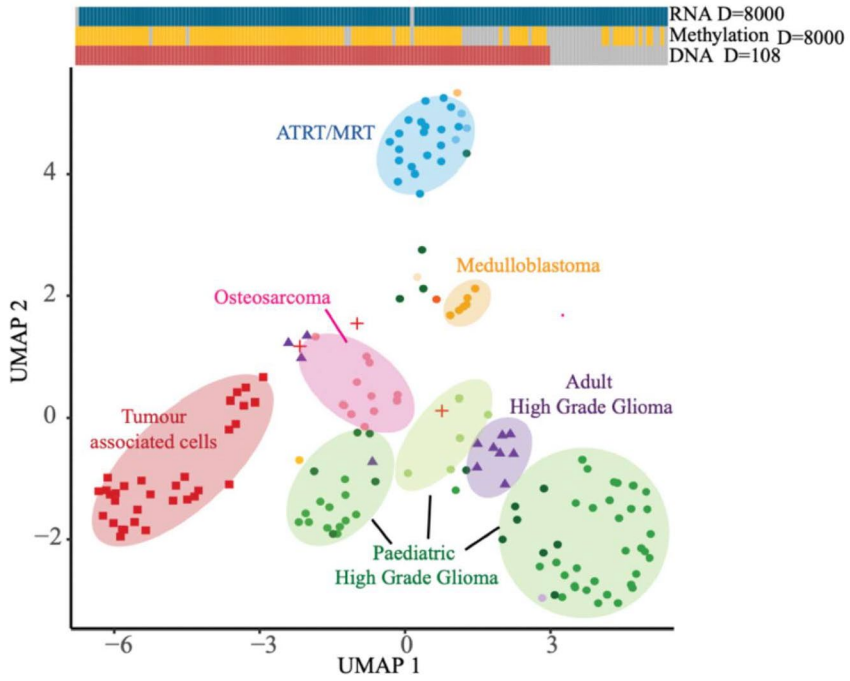

Figure 2 Two-dimensional representation of cellular states using multi-omics factor analysis (MOFA) on CCMA datasets showing the faithful clusters of different cancer types based on DNA (108 genes of pathogenic/likely-pathogenic mutations), RNA (top 8000 variable genes) and methylation (top 8000 variable CpG probes) profiles.

The establishment of the CCMA was made possible via active collaborations with 34 cancer research institutes, universities and academic medical centres nationally and internationally, including Stanford University (Palo Alto, USA), the University of California (San Francisco, USA), The Hospital for Sick Children (Toronto, Canada), Johns Hopkins University (Baltimore, USA), McGill University (Montreal, Canada), the Institute of Cancer Research (London, UK), and Hopp Children's Cancer Center Heidelberg (Germany).

The CCMA is already proving to be a tremendous resource for the childhood cancer research community. Since the publication of the CCMA in December 2021, we have had 18 requests for data and cell lines. Additionally, the CCMA data and associated resources are continuing to support the two major international collaborative working groups, DMG-ACT and PNOC-ATRT, enabling them to progress their preclinical research priorities and helping to inform on the design and future arms of their associated adaptive clinical trials.

Overall Summary

The collective Childhood Cancer Research Program represents the largest collection of researchers, clinicians and students with a sole focus on discovery and clinical research into childhood cancer in Victoria and one of the larger national programs. The program is bolstered by significant local, national and international collaborations including membership of large multi-institutional research and clinical networks (ZERO, CBTN, PNOC, DMG-ACT, PNOC-ATRT and ANZCHOG). The program has a strong track record of publication, and translation into clinical trials. **The financial support of the Australian Lions Childhood Cancer Research Foundations was also critical to the success of the project.**

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Queensland, Australia

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16 June 2023

Mr Ron Skeen OAM
Chairperson
Australian Lions Childhood Cancer Research Foundation
PO Box 56
RAYMOND TERRACE NSW 2324

Dear Mr Skeen

On behalf of our students, staff and researchers, I would like to thank the Australian Lions Childhood Cancer Research Foundation for the philanthropic investment of $150,000 towards the Institute for Glycomics' Sarcoma research project titled, *Developing a novel diagnostic and treatment options for Sarcoma*. We are grateful for your partnership.

Sarcoma is one of the most frequent childhood malignancies, accounting for about 20% of all diagnosis. I know you share our dedication to closing gaps in sarcoma diagnosis and treatment by developing breakthrough diagnostic tools and precise therapeutic alternatives. We are grateful for your ongoing collaboration with the Institute for Glycomics in enhancing patient outcomes and survival.

Thank you once again for your commitment to Griffith University, where we make a difference and *Make It Matter*. Together we can create a powerful change in transforming lives.

Enclosed are details of your gift.

Yours sincerely

Professor Carolyn Evans
Vice Chancellor and President

Encl

LIONS CLUB OF BEROWRA
LIONS CHILDHOOD CANCER RESEARCH FOUNDATION

The Lions Club of Berowra (201N5) staged their second annual Brick Fair in conjunction with Sydlug (Sydney Lego Users Group). This group of volunteers put on an amazing display of Lego models that they personally built. In addition to the fifty trestle tables of displays there were a couple of play tables laden with bricks where kids could let their creative juices roll and build whatever took their fancy. These models were displayed on the stage behind the play tables.

Bricks galore at the play tables

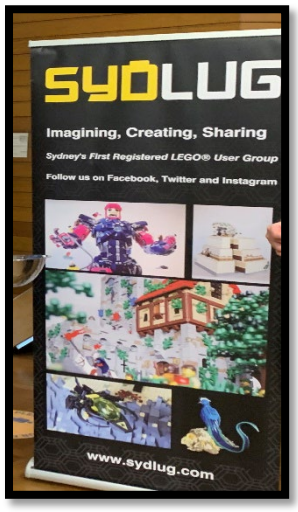
The Berowra Lions catered for the public by offering for sale the ever-popular Lions sausage sandwiches, hot and cold drinks and honey to supplement the funds raised.

Mike Hurwitz with one of the raffle prizes with the "club celebrity "

Raffle tickets were also sold a Lego set being one of the prizes.

This event generated a profit of $2,850.00 which Lions of Berowra decided to donate to the Australia Lion Childhood Cancer Research Foundation.

Kombi Van



ALCCRF Trustee Kerry Kilpatrick was invited to the Lions Club of Capalaba changeover on Saturday 17 June, and was presented with the cheque for $8,000.

Left to Right

Kerry Kilpatrick – ALCCRF Trustee

Christine Cufflin – President Lions Club of Capalaba

David Lodge – Treasurer Lions Club of Capalaba

Lions Club of Mareeba (201Q2)

Hopefully when the counting is finalised, we should be able to donate $4,000.00 - $4,500.00 to the cause.

Old Boys Sandro and Charlton beat the field with a perfect score to take first prize (which they donated back)

Coin Line Update

Coin Line has now reached almost 80 km and we have now passed the current record raising over $200 000 for childhood cancer research. Committee Chair, PDG. Keith Stewart thinks that we can reach 100 km with the help of clubs from all over Australia. We are hoping that every District will hold a coin line at their upcoming District Conventions. Please visit your ALCCRF stand with loose coins or coin jars to help make Lion Ron McLeod's dream of a 100% survival of children with cancer a reality.

Dean receives a Thank You from Lions

Corowa Whiskey and Chocolate Factory owner Mr. Dean Druce was presented with a certificate of thanks for all his support offered to the Lions Can's for Cancer project.

Left to Right
Dean Druce, Whiskey & Chocolate
PDG Lion Lynn Fredericks, Corowa LC
ALCCRF Trustee Lion Paul Shortis, Wodonga LC
Lion Herman Frencen, Corowa LC

Dean and his willing staff, have for the past 4 years made it possible for the Corowa Lions Club to operate a collection and sorting place. Dean was very willing to provide a secure area to the Corowa Lions to sort and collect their Cans and Bottles as part of the Can's for Cancer Lions project.

Victorian Trustee for the Lions Childrens Cancer Research Foundation, Lion Paul Shortis was very pleased to present Dean with a certificate and said that without the Chocolate factory support the project would not have been able to raise over $49,000 it has over the last 4 years.

Dean and his staff have always been very willing to help when needed and the local Lions clubs are most appreciative.

Be a HERO to
a child with cancer
Donate today at alccrf.lions.org.au

Australian Lions
Childhood Cancer
Research Foundation

ALCCRF District Chairperson Janey Tham together with N5 District Governor Paul McInnes and Council Chairperson Vin Pang JP was presented with a cheque for $3,000 from President of Sydney Host Club Lions Club Alan Chan

PDG Norm Jensen,
ALCCRF District Chairperson
District 201Q3
growing his chops

Our new DG is Irish and the little Gonskies were on each table at her Changeover and I managed to bring one home - his chops are a bit better than

Les Hyland selling raffle tickets for ALCCRF

REGISTER NOW TO HOST A

Biggest High Tea

IN 2023 TO RAISE FUNDS FOR CHILDHOOD CANCER RESEARCH

Contact Lion Kate for details 0409228075

Australian Lions Childhood Cancer Research Foundation

$12 Million donated

Supporting Childhood Cancer Research in Australia with worldwide benefits

16 Major research projects

Funded since the foundation began

ALCCRF

P D E K Q C E H L N S Y B A I

R O I X G Z A N Y S H J D L H

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AUSTRALIAN
CANCER
FOUNDATION
RESEARCH

AWARENESS
CHILDHOOD
LIONS

BIGGEST BBQ EVENTS

ALCCRF Trustee Peter Lamb accepting a $5,500 cheque from the Immediate Past President of the Lions Club of Australind (W2) for the Lions Biggest BBQ.

This is the biggest amount received from any "W" Districts Lions Club this calendar year. The occasion was their Change-over lunch held at the Sanctuary Golf Resort – Bunbury.

raising millions for cancer research.

Australian Lions Childhood Cancer Research Foundation

The Lions Club of Baulkham Hills was proud to support the ALCCRF Lions Biggest BBQ and dedicated a number of BBQ's for that cause.

The Lions Club of Baulkham Hills is dedicated to community service and views the ALCCRF as an important portal for Childhood Cancer Research.

By supporting the ALCCRF, we aim to contribute to their mission of finding more effective ways to prevent, diagnose, and treat childhood cancer.

The Lions Club of Baulkham Hills was pleased to announce a donation of $12,000 to the ALCCRF.

This donation also represents the collective efforts and compassion of our community members who supported the cause which we promoted at each of the fund-raising BBQ's.

Our Club also thanks Janey Tham (Lions District N5 Chair of ALCCRF 2023 - 2024), for attending our Clubs Board Installation for the year 2023-2024 and accepting the Donation on behalf of the ALCCRF.

Lions Club of Capalaba

The Lions Club of Capalaba held their Biggest BBQ on Sunday 13th August and raised over $1600 profit for Australian Lions Childhood Cancer Research Foundation. This is the second year we have held a BBQ for ALCCRF at Bunnings.

Every child deserves a chance at a healthy life

Our Vision: 100% survival for kids with cancer

Lions Biggest BBQ 2023

Event summary & return slip.

Please return this form along with your donation cheque no later than Tuesday 31st December 2023.

LIONS/LEO Club of Lions Club of Capalaba

Amount raised $ $1607.02 profit and we rounded it up to $2000.00

What activities did you undertake for Lions Biggest BBQ?

(Please include who attended, fundraising activities, photographs taken, etc)

We held the Biggest BBQ at Bunnings Capalaba on Sunday 13th August. It was a great day and we raised more funds than last year, the profit from the BBQ was $1556.47 we also had a donation box on the table too.
Donations were $50.55 making a profit of $1607.02
Photographs attached

Do you have any suggestions on how to improve the BBQ?

What media coverage did you achieve from the supplied media releases?

(Please include copies of all coverage)

Social Media Coverage and sharing posts on Facebook

RETURN SLIP

Pay by direct deposit
NAB
BSB: 085-397
Account: 942947951
Pay l

Pleas
CLUB

Email
ALCC
alccrf

Pay by post: cheques should be made out to Australian Lions Childhood Cancer Research Foundation *and sent to:*

search Foundation

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receipt!

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Lions Biggest BBQ 2023

889
25/6/23

Event summary & return slip.

Please return this form along with your donation cheque no later than Tuesday 31st December 2023.

LIONS/~~LEO~~ Club of KEMPSEY NI DISTRICT

Amount raised $ 1,500-00

What activities did you undertake for Lions Biggest BBQ?
(Please include who attended, fundraising activities, photographs taken, etc)

MARKETS B.B.Q - LIONS GEOFF BANNERMAN, ADAM AVERY, RAY WALDEN; GREG FURLONG, NEVILLE PEISLEY, ROBERT PEISLEY, WARREN GALLARD

Do you have any suggestions on how to improve the BBQ?

NATIONAL PRINT & RADIO BLITZ BY L.C.C.R.F

What media coverage did you achieve from the supplied media releases?
(Please include copies of all coverage)

NIL - LOCAL MEDIA WILL NOT ASSIST TO PROMOTE LIONS PROJECTS - REGARDS GEOFF BANNERMAN CLUB PRESIDENT

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Lions Biggest BBQ 2023

Event summary & return slip.

Please return this form along with your donation cheque no later than Tuesday 31st December 2023.

LIONS/~~LEO~~ Club of Wellington 20104

Amount raised $ 5500

What activities did you undertake for Lions Biggest BBQ?

(Please include who attended, fundraising activities, photographs taken, etc)

BBQ outside Woolworth Wellington, they provided food.

Ex display Linen Sale. Preloved Book/cd/DVD Sale.

on going for 6 months.

Do you have any suggestions on how to improve the BBQ?

more advertising in local newspapers.

What media coverage did you achieve from the supplied media releases?

(Please include copies of all coverage)

article in local newspaper. Wellington District Leader

facebook posts.

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BSB: 085-397
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The Australian Lions Cl
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Wellington NSW Lions Club
17 June ·

A great weekend, Thank you to Woolworths for supplying sausages and bread for our sausage sizzle in aid of Research Against Kids Cancer. Thank ou also to those who supported us there and at our Preloved Book Fair.

- **Our Vision**
  100% survival for kids with cancer

- **Our Mission**
  Prevent kids with cancer dying by raising funds nationally and donating these funds to the best high impact childhood cancer research conducted right across Australia.

Proudly Supporting

Australian Government Cancer Australia · Monash Children's Hospital · HUDSON INSTITUTE OF MEDICAL RESEARCH · TELETHON KIDS INSTITUTE · WEHI brighter together · Griffith UNIVERSITY Institute for Glycomics Queensland, Australia