JDRF Annual Report 2013

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LET'S TURN TYPE ONE INTO TYPE NONE

JDRF is the only global organization with a strategic plan to end type 1 diabetes (T1D). Our plan ensures there will be an ongoing stream of life-changing therapies, moving from development through to commercialization, that lessen the impact of T1D. We want to keep people with T1D healthy and safe today until we reach our ultimate goal of a cure and universal prevention of T1D.

JDRF is uniquely positioned to create a future without T1D. The path forward from type one to type none is a continuum of therapies that lead to a cure. As our research programs and therapies move through the pipeline, new treatments will progressively remove the daily burden, side effects and complications of T1D. To achieve our vision of a world without T1D, more funding is essential.

Together, let's turn type one into type none.

Bruce Axelson - Prairie Region

"My involvement with JDRF increased after my two grandchildren were diagnosed. Maintaining their health is a 24 hour, seven day a week commitment for their parents... It is never ending. Society could get a better understanding of the disease, JDRF and the research, the day-to-day dilemmas and have a sympathetic ear to it until a cure is found."



Letter From Leadership

JDRF was founded on the passion of deeply committed families battling type 1 diabetes (T1D). This passion continues to fuel our organization – it is why we are focused on turning type one into type none. We take a global perspective on research, prioritizing areas that will have the greatest impact today and tomorrow, and we are continually driving progress from discoveries in the lab to new therapies that will positively impact everyone living with T1D.

In Canada, we are important players in the global research arena with the JDRF Canadian Clinical Trial Network (CCTN) and many other JDRF funded projects in leading hospitals and research universities. In 2012, JDRF received a generous \$3 million gift from the WB Family Foundation to help expand CCTN. During 2013 a research competition was held, with the outcome being that three new trials will be added to CCTN in the cure area, all in western Canada. This is very exciting since it continues to build a strong, collaborative research network in Canada.

During the fall of 2013, we had a leadership transition with the departure of President and CEO, Andrew

McKee. He dedicated over five years in guiding the Foundation to where it is today and we are thankful to Andrew for his tremendous work and for the seamless transition to our new President and CEO, Dave Prowten. Dave's passion, strategic leadership and expertise in fundraising will help JDRF move to the next level.

2013 marked another successful year for JDRF with advances in research and strong fundraising performance. We are grateful for your ongoing support which was demonstrated in so many ways, and continues to inspire the staff and Board of Directors. As we look ahead to 2014, we know it will be an exciting year with advancements and meaningful scientific progress. THANK YOU for your unrelenting commitment and dedication to JDRF – you are the ones who make a difference. Doing this together, we will *turn type one into type none*.

Dave Prowten
President and CEO,
.JDRF

Aubrey Baillie

Aubrey Baillie
Chairman of the Board
of Directors,
JDRF

About JDRF

JDRF is the largest charitable funder and advocate for type 1 diabetes (T1D) research. Our mission is to find a cure for T1D and its complications through the support of research.

Driven by passionate grassroots volunteers, JDRF's goal is to progressively remove the impact of T1D from people's lives until we achieve a world without T1D. JDRF collaborates with a wide spectrum of partners and is the only organization with the scientific resources, regulatory influence, and a working plan to better treat, prevent and eventually cure T1D.

Since its founding in 1970 (1974 in Canada), JDRF has awarded more than \$1.7 billion (US) to diabetes research. At JDRF, we are focused on bringing life-changing therapies from the lab to the community by impacting every stage of the drug delivery pipeline. Through local chapters, international affiliates, volunteers, staff and corporate partnerships in over 100 locations worldwide, JDRF offers a diverse support network, outreach programs, advocacy initiatives, and innovative fundraising programs.

Together, we CAN turn type one into type none.

For more information, or to make a donation, please visit jdrf.ca.

Chris Vardy - Atlantic Region

"I originally got involved with JDRF about ten years ago. Two years ago my granddaughter was diagnosed. This drives it home a little closer emotionally. When you see these little kids, you want to make a difference. We need more public awareness as we work hard to raise money for research and a cure."

INTERNATIONAL RESEARCH REVIEW

JDRF's diabetes research portfolio is among the most innovative in the world. It is a portfolio focused on multiple paths to a cure, on better treatments to keep people with diabetes healthier, and on research for all stages of diabetes. JDRF's research focuses on bringing lifechanging therapies to people who have been living with diabetes for years, sometimes decades; people who are newly diagnosed, both children and adults; people with complications; and people who are at risk of getting diabetes.

JDRF's strategy is to approach research from a patient-centric perspective. All people with type 1 diabetes (T1D) want to find a cure—a cure to some can mean a pill or injection or procedure that restores their pancreas to a fully functional

state. Some also define a cure as a simpler and safer alternative to insulin that enables them to manage diabetes better and more easily. Many focus on any regimen that lowers their risk of the life-altering complications of diabetes. For many, a device that manages their diabeteslike an artificial pancreas—is a great solution. That's why the focus of JDRF's research strategy spans across multiple therapeutic areas that will work towards curing, treating, and preventing T1D. The notion of "cure, treat, prevent" is a way of making certain that everyone with T1D and their families understands that JDRF's research progress is focused on benefitting people at every stage of the disease.

We fund science aimed at delivering cures, at developing better treatments

to serve as a "pathway to the cure", and at stopping the disease before it takes hold in people with potential risk. Our strategic research plan has a mix of programs that will deliver a sustained stream of new life changing therapies in the near term, midterm and long term plan.

JDRF's strategic research approach continues to deliver on our mission and our goal of *turning type one into type none.*

2013 key highlights and milestones - putting our research to the test

CURE

Encapsulation

Beta cell encapsulation has the potential to virtually eliminate the relentless daily management burden for those living with T1D: no need for multiple insulin injections or pump therapy, no more constant blood testing, and no more carb counting. People with T1D would just go about their lives for extended periods of time, up to 24 months, as if they didn't even have the disease.

Encapsulation involves putting insulinproducing beta cells in a protective barrier and implanting them beneath the skin. These encapsulated beta cells will sense a person's glucose levels and produce insulin as needed, while the barrier shields the cells from the body's autoimmune attack that triggered the onset of T1D.

Encapsulation therapy overcomes two obstacles to earlier islet transplant procedures: a limited supply of donor islet cells and the need for continued immunosuppressive drugs to prevent the immune system from destroying



Laura & Shane McFadden - South Western Ontario Region

"As a mom you are supposed to take the hurt away but this is the one thing I can't fix. My motivation is love; for my child and all the children who are diagnosed." - Laura "I am motivated by my daughter's diagnosis and the youth ambassador I heard speak three days prior to her diagnosis. I think about the next child who gets the bad news. I want to prevent and cure type I diabetes." - Shane



the newly introduced islets.

In just a few years, JDRF has transformed the field of encapsulation research, investing in multiple approaches and technologies to increase the likelihood of success. In early 2013, we formed the JDRF Encapsulation Consortium for leading scientists and researchers from 27 institutions to advance encapsulation in a collaborative, multidisciplinary forum.

JDRF investment has already helped bring one encapsulation product to early human testing, with several others heading to human trials in 2014.

JDRF is partnering with biotechnology company ViaCyte to develop a first-of-its-kind encapsulation product that converts stem cells into immature pancreatic endocrine cells. The device maintained blood glucose at normal levels in diabetic mice.

JDRF supported a project conducted by Living Cell Technologies (LCT) involving the encapsulation of pig-derived islets for implantation into humans. LCT has conducted small human trials and is still compiling the results. Preliminary results show the product has had a positive effect on reducing dangerous low blood sugar events.

JDRF is co-funding investigators at the Diabetes Research Institute (DRI) at the University of Miami. The team seeks to create a device that can provide the optimal environment for islets to survive and function for a long time. DRI hopes to take part of this device to human clinical trials in 2014.

Preclinical encapsulation trials have been encouraging. JDRF continues to work on identifying the best materials for a permeable barrier and to work on the design of implanted devices to hold beta cells without being intrusive. While this research progresses, JDRF is already taking encapsulation out of the lab and into the real world.

Restoration

A full biological cure is the ultimate and permanent solution to all the complexity and problems of T1D. For a decade, JDRF has been exploring ways to restore the body's ability to create new insulin-producing beta cells in the pancreas while preventing the autoimmune attack that triggers T1D. Together, these areas of investigation will eventually yield a permanent cure for T1D, and JDRF has made significant strides in both.

The JDRF Beta Cell Survival and Restoration Program is based on a simple principle: the body can heal itself. We believe the body can heal T1D as well, though it needs help from science to do so. Our research is focused on:

 expanding the number of beta cells so normal insulin production can resume;

Marla and Robert Oringer - Quebec Region

"We are motivated by JDRF's advocacy leadership in advancing awareness and relentlessly pushing regulatory authorities to understand the importance and potential of technologies such as automated insulin delivery through closed-loop systems—known to most as the Artificial Pancreas program. JDRF's efforts are catching the attention of the general public and drawing innovative outside groups to take an interest in diabetes."



- extending the life and/or improving the health of underperforming beta cells: and
- delaying or preventing beta cell death.

A major focus in the program is to take existing drugs—approved for use for other conditions—and explore whether these drugs, alone or in combination with others, may have positive impact on either reducing beta cell stress and/or inducing beta cell survival. Another priority is to establish proof in human clinical studies that one or more of the repurposed drug candidates will indeed enhance beta cell survival and can be safely tolerated by patients. We're also funding pioneering research to create new compounds and identify other molecules that might have a positive effect on beta cell health and restoration

Identifying biomarkers, or indicators of disease progress and progression, is another key area that will facilitate early detection of subtle changes in beta cell health and function, giving us greater insight into beta cell stress and dysfunction.

Any effort to restore beta cells must also involve parallel efforts to tame the autoimmune attack. Successful restoration efforts must be combined with immune therapies that allow new and/or healthy beta cells to thrive and function normally. JDRF's aggressive immunotherapy research program is developing therapies that promote tolerance to the beta cell autoantigens that trigger the attack on beta cells. Some of JDRF's work in preventing T1D, particularly our exploration into an antigen-specific T1D vaccine, may also be applicable in the restoration field.

JDRF has set an ambitious goal to accomplish something never before

done in biomedical research: reverse an autoimmune attack and restore the body to normal function. We are partnering with investigators, industry, and regulators so that we can advance a safe and effective therapy to people with T1D as soon as it is discovered.

TREAT

Artificial Pancreas

Currently, managing T1D is relentless. It requires people to constantly balance insulin delivery against the amount of food eaten, the amount of exercise, and even the stress of the workplace or school. Few people, regardless of age, can focus on this balancing act every moment of the day. But technology can.

Artificial pancreas (AP) systems will be the most revolutionary advance in diabetes care since the discovery of insulin. Like the body's pancreas, AP systems will react to rising blood-glucose levels by combining monitoring technology with insulin pumps to provide the right amount of insulin at the right time. Not only will AP systems result in much tighter control, lowering the risk of health complications later in life, they will also reduce the constant worry about blood-sugar levels and what must be done to manage them.

In less than a decade, JDRF has transformed the AP field. The JDRF Artificial Pancreas Consortium— which brings the best researchers in the T1D field together with some of the world's leading engineers and mathematicians—has driven virtually every major advance in the AP field. Until we stepped in, companies and others were not heavily committed to developing this kind of device. The six-step roadmap JDRF laid out to create successively more sophisticated versions of the AP has since been

embraced by manufacturers to guide their own R&D programs.

A first-generation system operating low-glucose suspend technology, which will partially automate glucose control—was recently completed by Medtronic and approved by the U.S. Food and Drug Administration (FDA). JDRF is already driving progress forward on more sophisticated algorithms and improved glucose sensors so that we can achieve second- and third-generation devices. Treat-to-range devices will predict high and low blood-glucose levels and adjust insulin dosing accordingly to maintain blood glucose within a set range. Treat-to-target devices will be designed to maintain blood glucose not just within a range but at a target level. Eventually, we envision a fully automated, multi hormonal, dualchamber artificial pancreas system capable of keeping blood sugar at specific levels and of delivering, in addition to insulin, key pancreatic hormones that influence bloodalucose levels.

It is no exaggeration to say that without JDRF's leadership we would still be years away from seeing AP systems in the hands of people with T1D. In addition to the research, JDRF's advocacy arm worked closely with the FDA to develop regulatory guidance to help ensure that AP devices could move quickly to human clinical trials. Today, those trials are under way, and early results show they work.

Smart Insulin

Eliminating virtually all of the daily burdens associated with mechanically



Smart insulin is glucose-responsive insulin—insulin in a form that renders it essentially inert until it is needed. A person with T1D would take a shot. or a pill, of this insulin-enough to cover the needs of a day—and the insulin would circulate in the body until blood-glucose levels start to rise. As alucose rises, the binding element of the insulin releases the insulin so it is free to do its job. As alucose levels return to normal, the release of insulin stops until it is needed again. Smart insulin would automatically activate or deactivate in response to the glucose in the blood, thus giving tighter

the disease.



control essentially as if the beta cells were working normally.

Over the last decade, JDRF has been a leader in the smart insulin field. It was our early support of the company Smart Cells, Inc. at its riskiest stage that sustained the idea and validated the initial concept. And after this proof that smart insulin is a potential T1D therapy, industry partners have made a financial commitment to take the concept further along the development pipeline. Beyond its support of Smart Cells. JDRF has continued to provide leadership, most recently through the Grand Challenge Prize to stimulate the generation of novel ideas from a diverse array of disciplines to advance development of smart insulin.

Phase 1 of the challenge awarded prizes to three research projects in

2011 for their initial ideas on delivery and overdose prevention. Phase 2 will be the discovery phase, building on the winning ideas in Phase 1. This phase will provide experimental design and validation of potential smart insulin drugs, culminating in preclinical proof of principal studies in animal models. The final phase of the challenge will take the most promising drugs to human clinical trials.

While still years away from becoming a treatment, smart insulin will, with continued JDRF investment, become another life-changing therapy for those with TID

PREVENT

Prevention

Preventing T1D from ever developing in anyone is the ultimate answer.

Consider polio or smallpox—neither

has been cured, but effective vaccines have largely eradicated these diseases. JDRF is pursuing both primary and secondary prevention strategies. Primary prevention means preventing the autoimmune attack so people never develop T1D at all. Secondary prevention focuses on finding ways to prevent insulin dependence in individuals at risk or where the autoimmune attack on beta cells has already begun.

We know that the largest risk factor for T1D is genetics. In fact, as a result of research funded by JDRF and the National Institutes of Health (NIH), we've now identified more than 50 genes that confer risk for T1D. We understand T1D genetics better than we did only a decade ago, and we have identified auto antibodies associated with the disease so we can more successfully screen those at risk.

But genes alone do not cause the disease, and scientists are now halfway through a longitudinal study called TEDDY (The Environmental Determinants of Diabetes in the Young) to identify the environmental factors that may trigger it. The study, funded by the NIH's Special Diabetes Program, a program in existence thanks in part to JDRF's advocacy efforts, is exploring whether factors such as antibiotics, viruses, gut microbes, cow's milk, and/or deficiency of vitamin D or omega-

3s are culprits in the onset of T1D. Zeroing in on the causes of T1D is fundamental to devising approaches to prevent the onset of the disease.

With our expanding knowledge, JDRF has intensified investigation into potential vaccines to prevent T1D. JDRF is pioneering research into such vaccines, which might be used either before autoimmunity starts or after it starts but before total insulin dependence—or, ideally, a universal childhood vaccine to prevent T1D, much like vaccines we administer to children to prevent measles, chicken pox, and other conditions.

JDRF is funding considerable research in other prevention strategies as well, including:

- The use of anti-inflammatory agents and other therapies to delay and prevent insulin dependence
- An approach that shows promise in suppressing the autoimmune response triggering T1D without compromising the overall immune system's ability to fight back
- A Phase II clinical trial studying whether orally delivered insulin can prevent T1D onset in children at high risk
- A trial examining whether nasally delivered insulin can prevent T1D onset where the autoimmune attack has already begun



"After my grandson's diagnosis and watching my daughter cope with the consequences, I researched JDRF and quickly became impressed with their philosophy of supporting the best research worldwide, while avoiding the politics of competing chapters and research proposals. I believe this enlightened approach allows more money to get to the right place."

Our research is ambitious, but so is our goal—to ensure that no one ever again needs to worry about being diagnosed with T1D.

COMPLICATIONS

Despite significant advances in blood-glucose monitoring and insulin therapy, people with T1D still have to worry about the damaging effects of high blood-glucose levels, which can lead to life-threatening complications. JDRF is pursuing multiple strategies to resist and reverse conditions such as diabetic retinopathy (eye disease), diabetic nephropathy (kidney disease), and nerve damage. By supporting extensive studies and creating a platform for widespread collaboration, we are striving to better identify ways to predict, prevent, and treat these devastating complications. The Joslin 50-Year Medalist Study is working to identify factors that may confer resistance or susceptibility to diabetic complications. The JDRF-supported study, which began in 1970, is constantly revealing new information about the long-term effects of T1D in people who have lived with the disease for 50 years or longer without developing complications. Findings from the study are being used to further drugdiscovery and measurement tools to predict risk or stage the progression of complications.

Since approximately one-third of people with T1D develop diabetic nephropathy, JDRF formed the largest-ever international effort to investigate the genetics of kidney disease. The JDRF Genetics of Diabetic Nephropathy Collaborative Research Initiative is a three-year,

\$7-million initiative that brings together top scientists to expand previous research and share findings in an effort to identify possible ways to prevent and treat this lifethreatening condition. The three initial key activities of the collaborative project include looking for genes that differ between people with T1D who do and do not have diabetic nephropathy; identifying genes that predict how quickly a person with T1D may develop kidney failure; and identifying genes that predict rapid progression of decline in kidney function.

Research on new therapies for all stages of diabetic eye disease—the leading cause of blindness in workingage adults—continues through our Healthy Eye Project. The project is focused on two main areas:

understanding why some people with T1D, even those who have lived with the disease for a long time, do not develop diabetic eye disease, as well as why some people respond to drug treatment while others do not; and clinical trials to identify and test molecular targets that improve the stability of blood vessels in the eve and/or address other risk factors for diabetic retinopathy. The findings are adding greatly to our understanding of the condition and may lead to new mechanism-based therapies to prevent, treat, and reverse diabetic eve disease.

Ending and preventing diabetic complications is essential to JDRF— and our research in this field has the potential to greatly improve quality of life for millions of people living with T1D.

Robert Smuk and Judy Goldring - Toronto Region

"Watching my husband manage type 1 diabetes on a daily basis inspires me. I want to help people living with this disease lead as normal a life as possible, and to offset the terrible complications that diabetes can bring." - Judy

"I am motivated by the children who live with type I diabetes. They are knowledgeable beyond their years. The impact is so widespread, and they should have no limitations." - Robert



JDRF CANADIAN CLINICAL TRIAL NETWORK

JDRF is uniquely positioned to create a future without type 1 diabetes (T1D), and our JDRF Canadian Clinical Trial Network (JDRF CCTN) is funding groundbreaking and innovative research that holds significant promise for *turning type one into type none*.

Now in the fourth year of our partnership with the Government of Canada, JDRF CCTN continues to drive progress, from advances in the lab to therapies that positively impact everyone living with T1D. Born of a \$20 million commitment from the Federal Government, a \$13.9 million commitment from JDRF, and most recently a \$3 million contribution from the WB Family Foundation, this \$33.9 million investment is bringing life-changing therapies out of the lab and into real life

Since March 2011, JDRF CCTN has successfully launched nine clinical trials and two technology projects. Included among these are five potentially life-changing Artificial Pancreas-related trials, two more than our initial goal of three such studies. The Artificial Pancreas is a huge breakthrough in treatment technology, with the potential to automate detection of blood sugar levels and deliver insulin accordingly, eliminating multiple insulin injections and finger pricks. This amazing advancement has the power to transform the lives of those living with T1D.

This is just one example of the incredible research currently underway, thanks to the CCTN.

How the West was won: Competing for a Cure

The WB Family Foundation's recent \$3 million contribution has been a game-changer for Canadian T1D research.

Following this gift, a research competition was held in 2013 to select the most promising projects aimed at finding a cure for T1D.

The competition opened the door to an expansion of the Network into western Canada, where these funds will support new clinical trials and studies. This move westward is expediting meaningful scientific progress by funding three new trials specifically in the cure therapeutic area.

Over the course of the coming year, we will continue enrolling patients and providing information about the trials as they open to the public. Our plan ensures there will be an ongoing stream of lifechanging therapies moving from development through to commercialization that ease the impact of T1D. We want to keep people with T1D healthy and safe today until we reach our ultimate goal of a cure and universal prevention of T1D. Together, we will turn type one into type none. For more information, please visit idrf.ca/cctn.

JDRF youth ambassadors, guests, and staff toured Dr. Kieffer's lab in Vancouver, British Columbia after hearing JDRF CCTN was expanding to western Canada.

New hope for a New Year

In 2013, JDRF CCTN clinical trials were centered in Ontario, with hubs in London, Ottawa, and Toronto. Institutions continuing to participate include: Lawson Health Research Institute and Western University in London; the Children's Hospital of Eastern Ontario and The Ottawa Hospital in Ottawa; and The Hospital for Sick Children (SickKids), Mount Sinai Hospital, and the University Health Network in Toronto.

In 2014, with the Network's new presence in the west, JDRF CCTN's partnering institutions are moving research forward to expedite and sustain meaningful scientific progress that will improve lives today and lead to a cure tomorrow.



2013 CANADIAN HIGHLIGHTS AND MILESTONES

JDRF CCTN trials offer an opportunity to become involved in research

The JDRF Artificial Pancreas Program (APP) is a coordinated and collaborative global effort to concentrate and focus resources on developing so-called 'closed loop' systems that connect information from continuous glucose sensors with insulin pumps to optimize control of blood sugar. JDRF CCTN is implementing studies that provide an optimized clinical platform that provides the benefits of research to Canada, and also helps advance the global APP effort.

JDRF CCTN trials provide opportunities for Canadians with T1D to participate in ground-breaking research, and Canadians have responded: as of today, more than 10,000 Canadians have participated in activities related to CCTN trials.

Preventing hypoglycemia

IDRE

JDRF CCTN researchers are participating in trials that are testing the ability of AP programs to suspend delivery of insulin to prevent night-time hypoglycemia. These trials, in adults and in children, are ongoing in Canada and in collaboration with American researchers at Stanford. There has been enormous interest among Canadians with T1D in participating in these studies.

Helping people with T1D during the transition from adolescent to adult care

It has been observed that a significant proportion of adolescents with T1D do not adhere to their treatment regimen, especially in the first year of transition to adult medical care. Canadian data shows that in the first year of transition 41% of T1D patients drop out of adult medical care and 46% report difficulties with the transition process. JDRF CCTN is testing the effect of a structured transition clinic on overall management of diabetes, reduction of acute complications and hospitalizations, and quality of life in adolescents and young adults with T1D.

Preventing Complications

Despite significant advances in blood-glucose monitoring and insulin therapy, people with T1D still need to be cognizant of the damaging effects of high blood-glucose levels, which can lead to life-threatening complications. JDRF is pursuing multiple strategies to resist and reverse conditions such as diabetic retinopathy (eye disease), diabetic nephropathy (kidney disease), and nerve damage.JDRF CCTN trials are part of the overall effort to prevent the development of complications.

Long-term diabetes without complications

JDRF-funded investigators have now begun the identification of a similar cohort of Canadians who have had long-term T1D protected from complications. Findings from both cohorts will be used to further drug-discovery and measurement tools to predict risk or stage the progression of complications.

JDRF is partnering with biotechnology company ViaCyte to develop a first-of-its-kind encapsulation product that converts stem cells into immature pancreatic endocrine cells. The device maintained blood glucose at normal levels in diabetic mice.

Pre-clinical studies of a novel procedure and encapsulation device are being performed by JDRF Canadian Clinical Trial Network (JDRF CCTN) researchers at the University of British Columbia. Working in JDRF's Encapsulation Consortium, and with support from JDRF CCTN, they will test these cells in a novel encapsulation device.

Canadian investigators from the University of British Columbia are planning to test a drug approved for another autoimmune disease in T1D. This pilot trial, which will be conducted by the JDRF CCTN, utilizes our understanding of the mechanism of autoimmune destruction to intervene in the process. The hope is that deploying this drug helps preserve beta cells, and may someday prevent the development of T1D.

Continuous Glucose Monitoring (CGM)

JDRF-sponsored research has demonstrated the cost-effectiveness of continuous glucose monitoring (CGM) compared to standard glucose monitoring. The effectiveness of implementing CGM in children and adolescents is still not clear. JDRF CCTN is testing the hypothesis that initiating CGM at the same time as pump therapy could improve outcomes compared to delaying CGM introductions by 6 months.

Presently, there are no open standards for communication between diabetes devices (insulin pumps, blood glucose meters and continuous glucose monitors). JDRF CCTN investigators are now working on a project to bring industry together on the development and demonstration of open standards for communication among diabetes devices.

JDRF CCTN TRIALS

Researcher	Trials (1997)	Province
Dr. Joseph A Cafazzo, Ph.D. P.Eng.	Artificial Pancreas Standards and Technical Platform Project	ON
Cheril Clarson, M.D.	Structured transition from pediatric care to adult care in type 1 diabetes	ON
Denice Feig, M.D.	Continuous Glucose Monitoring in Women with Type 1 Diabetes in Pregnancy Trial	ON
Stewart Harris, M.D.	A Strategy to Improve the Care & Outcome of Diabetes in On-Reserve Pregnant First Nations Women	ON
Irene Hramiak, M.D.	Feasibility Assessment of Prototype Nocturnal Hypoglycemia Reduction System	ON
Irene Hramiak, M.D.	Reducing with MetfOrmin Vascular Adverse Lesions in type 1 diabetes	ON
Timothy Kieffer, Ph.D.	Treatment of Diabetes with Stem Cell Derived Islets (NEW)	BC
Margaret Lawson, M.D.	Timing of Initiation of Continuous Glucose Monitoring in Established Pediatric Diabetes	ON
Farid Mahmud, M.D.	Celiac disease & Diabetes - Dietary Intervention & Evaluation Trial: a RCT to evaluate the efficacy and safety of a gluten-free diet in patients with asymptomatic Celiac disease & T1D	ON
Farid Mahmud, M.D.	Expansion of the "Adolescent Type 1 Diabetes Cardio-Renal Intervention Trial" in Canada	ON
Bruce Perkins, M.D.	Pilot for semi-automated computerized overnight basal rate assessment protocol	ON
Rusung Tan, M.D., Ph.D.	Clinical Trial of Ustekinumab to Prevent Type 1 Diabetes (NEW)	ВС

CORPORATE PARTNERS

JDRF is privileged to have many passionate and generous corporate partners whose valuable support helps us keep people with type 1 diabetes (T1D) healthy and safe today until we reach our ultimate goal of a cure and universal prevention of T1D. This year, we would like to recognize the following dedicated companies for their support:



Sun Life Financial has a longstanding relationship with JDRF that grows stronger each year. Employees across the country have been inspired to get involved, with many of them sitting on committees for the TELUS Walk to Cure

Diabetes and Ride for Diabetes Research, and still more participating in both fundraising events. In addition to these core programs, in 2013 Sun Life partnered with the CFL to contribute more than \$40,000 through the Kick Diabetes Program. T1D families also got to participate in the Sun Life Financial Skate with the Leafs at the Air Canada Centre, and were able to enjoy donated Community Suites at Toronto Raptors games. JDRF is thrilled to welcome Sun Life Financial as a National sponsor of the TELUS Walk to Cure Diabetes in 2014. For more information please visit sunlife.ca.



Over the years, Eli Lilly Canada has been a tremendous supporter of JDRF. Lilly employees continually demonstrate a commitment to fundraising and great team spirit through their participation in a variety of initiatives, including the

TELUS Walk to Cure Diabetes. In 2013, Lilly supported our Diabetes Awareness Month campaign through an educational advertorial published in The Globe and Mail. Lilly also created a cause-related marketing program, with a portion of its proceeds going to JDRF. An additional \$100,000 donation was provided to establish a fellowship program, enabling JDRF to provide funding for two research fellows. To date, Lilly has generously given over \$400,000 to JDRF in support of diabetes research. For more information please visit lilly.ca.



For over a decade, Medtronic of Canada Ltd. has been a committed partner of JDRF. In 2013, Medtronic graciously provided sponsorship

for JDRF's T1D Insider newsletter, Galas, and was a National sponsor for the Diabetes Research Symposiums, and participated and had booths at the TELUS Walk to Cure Diabetes locations across Canada. Medtronic is proud to be involved in JDRF's CCTN clinical trials as a diabetes technology partner. To date. Medtronic has provided more than \$850,000 to JDRF Canada in sponsorship and in-kind contributions and has worked closely with the JDRF to improve access to diabetes technology in Canada to help improve the lives of people living with diabetes. For more information about Medtronic, please visit www.medtronicdiabetes.ca.

Stock Family - Lianne & Jay - South Central Ontario Region

"Without a doubt, our son Noah is our motivation to support JDRF. As parents, all we can do is show our support, and raise awareness and money for research - for him and everyone else living with type 1 diabetes, and children down the road."





Join the Community! Each year the TELUS Walk to Cure Diabetes

brings together Canadians from communities across the country for an outdoor celebration. This signature fundraising event raises funds and awareness to make a difference in the lives of over 300,000 Canadians living with type 1 diabetes (T1D). The fun and energetic event is a growing national movement to cure T1D, and each year continues to attract new community partners and participants.

The Walk is JDRF's largest annual fundraising program bringing together more than 45,000 participants who raise funds supporting research to cure, better treat, and prevent T1D. In 2013, the TELUS Walk to Cure Diabetes was held in more than 70 communities across the country, raising almost \$7.7 million. This success is because of the

incredible efforts of our participants, sponsors, and volunteers. JDRF cannot express how appreciative we are for the endless dedication and generosity of our supporters!

Corporate Sponsor Support

"Our TELUS team is committed to a simple philosophy - we give where we live. This is just one reason why we have been the title sponsor of the TELUS Walk to Cure Diabetes since 2008 and renewed our partnership with JDRF for another three years. Through this partnership, we provide our technology expertise and fund Canadian-based research programs that improve the lives of those affected by juvenile (Type 1) diabetes," said Paul Lepage, President of TELUS Health and National Co-Chair of the 2014 TELUS Walk to Cure Diabetes. "In 2013, more than 4,000 TELUS team members and their friends and families demonstrated our philosophy by participating in Walks to Cure Diabetes from St. John's to Victoria,

raising more than \$540,000. By 2015, we expect corporate and employee contributions to JDRF to total more than \$10 million."

As the national title sponsor, TELUS has contributed more than \$7 million to JDRF through corporate donations and employee fundraising since our partnership began in 2000.

JDRF also values the generous support of national sponsors Sun Life Financial (new in 2014) and Best Days, brought to you by ONETOUCH, who has contributed over \$1 million to JDRF since 1990 through galas, corporate matches, sponsorship and employee fundraising, as well as our national supplier SunRype Products, who has contributed almost \$800,000 in support to JDRF.

Thank you to all our sponsors, volunteers, and participants for continuing to amaze us with their incredible support and fundraising efforts! Their contributions are instrumental in the success of the TELUS Walk to Cure Diabetes. We look forward to another successful year in 2014!





Every year, the JDRF Ride for Diabetes Research continues to

increase in popularity. In 2013, more than 22,000 people participated at 22 sites across the country. Uniting corporate Canada, this high-energy stationary ride encourages a friendly competition to see who can show the most team spirit and raise the most funds for type 1 diabetes (T1D) research.

JDRF is excited to announce the 2013 Ride program raised \$6.8 million. Each year, the success of the Ride is a direct result of the hard work and enthusiasm of JDRF volunteers and staff.

"The key ingredients that make the Ride so successful are the friendly competition among the teams and corporations, the fact that it is a great team building opportunity adding to corporate spirit, and quite simply it is a lot of fun. These elements ensure that riders, and companies, return year after year to enjoy the infectious enthusiasm of the JDRF Ride. My personal favourite memory of the Ride was the pride I had looking over a sea of riders, laughing and responding to the music, and noticing the waves of corporate colors participating. It was unforgettable!"

- JP Savage, National Chair, JDRF Ride for Diabetes Research "I Ride for my son, David. David was diagnosed with type 1 diabetes when he was five. Now that he's 30 and I reflect on the past quarter of a century, I am astonished at the incredible progress that has been made. The JDRF Ride is an amazing, high energy, corporate fundraising event that contributes significantly to JDRF's unwavering commitment to helping type 1 diabetics live healthier, easier, and safer lives. Come join us.... be part of the team that finds the cure!"

-Lorn, Ride Participant

The 2013 Ride Program featured celebrity athletes who came out to join teams as honourary members and for the second year we saw Scotiabank surpass the \$1 million level in funds raised. In total, 360 companies put the JDRF Ride on their calendars and engaged employees to participate.

We would like to thank our corporate leaders, participants and volunteers across Canada whose dedicated efforts contributed to the success of the 2013 JDRF Ride campaign. As we move ahead to the 2014 season, we are focused on taking the Ride to new heights and look forward to your continued support. For more information please visit jdrf.ca/ride.



GALAS

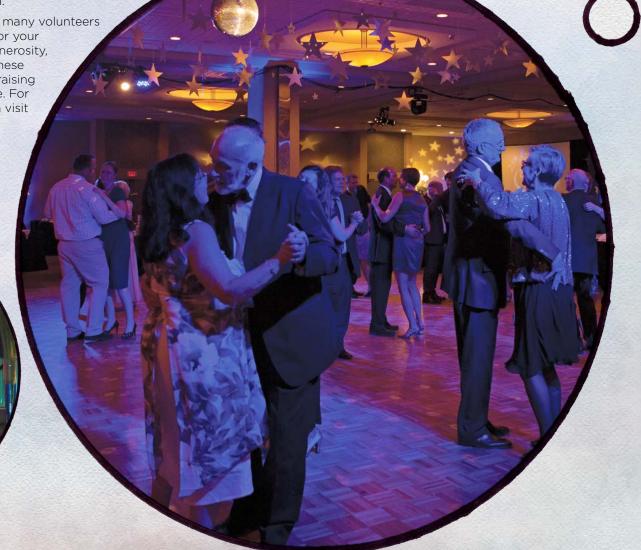
JDRF galas represent a core fundraising program for the Foundation. In 2013, more than 3,400 people attended galas in 10 cities nationwide raising over \$3.5 million.

Each gala across the country has a unique theme for their evening celebration. Chosen with the help of JDRF Chapters and their gala Committees, themes in 2013 included: Gatsby Glamour (Kelowna), The Latino Festival (Nanaimo), Moonlight Magic (Victoria), Motown Groove (Vancouver), Denim and Diamonds (Edmonton), The Sky's the Limit (Calgary), Starry Starry Night (Winnipeg), Starlight Soiree Gatsby Magic (Mississauga), Passion Ball (Toronto) and Dia-Beat-It (Montreal).

Regardless of the theme, guests enjoy an elegant evening of fine dining, entertainment, dancing, silent and live auctions and JDRF's signature Fund A Cure.

JDRF's Fund A Cure is always a highlight providing guests with the opportunity to donate the gift level of their choice and receive a Fund A Cure Bear, in addition to a tax receipt for their contribution.

Thank you to the many volunteers and supporters for your valuable time, generosity, and for making these exceptional fundraising evenings possible. For more information visit jdrf.ca/galas.



OUTREACH

JDRF's Outreach Program, established in 2006, operates nationally through all JDRF Chapters and continues to evolve as it updates and introduces new initiatives. As a Foundation, we understand the importance of providing social, emotional, and practical support and information for all ages and stages of T1D.

Adult Toolkits

After receiving many requests, JDRF began producing a toolkit that would provide useful information to adults living with T1D - both newly diagnosed or those that have been living with T1D for a number of years. Since its introduction in 2012, the reaction to this resource has been very well received. To download the Adult Type 1 Toolkit visit jdrf.ca/adultswitht1d.

Bag of Hope

The Bag of Hope, sponsored by Roche (Accu-Chek®) contains a selection of reference and educational materials. Once an individual receives a Bag of Hope they become part of JDRF's Family Network. Since 2008, when the program was introduced, JDRF has connected with over 3,200 families. Many of these families have become involved with the Foundation through the mentoring program, or as volunteers or participants in our core fundraising programs. To request a Bag of Hope visit jdrf.ca/newlydiagnosed.

Outreach Volunteer Network

The Outreach Program is strengthened by the dedication and commitment of the National Outreach Committee. The Outreach Volunteer Network, led by Janice Hicks. National Outreach Chair, is a group of volunteers who communicate quarterly and provide national updates on programs, share best practices, brainstorm new concepts. and overcome any challenges.

School Advisory Toolkit

The School Advisory Toolkit, generously supported by LifeScan Canada (OneTouch®), provides information for parents as a tool to assist them in communicating and educating their child's school about T1D. To download the School Advisory Toolkit visit jdrf.ca/schoolkit.

Stephen Emery - North Eastern Ontario Region

"When Maya was diagnosed a physician told us this is one of the diseases they can cure, they just need time and money. I am driven to raise awareness and money for research. We've had the privilege of experiencing JDRF research first hand. I am committed to do whatever I can to find a cure... Not having a cure is unacceptable."



DIABETES RESEARCH SYMPOSIUMS

JDRF is committed to developing life-changing therapies, moving from development through to commercialization, that lessen the impact of T1D. We want to keep people with T1D healthy and safe today until we reach our ultimate goal of a cure and universal prevention of T1D. Each year JDRF shares

the latest research updates from JDRFfunded researchers and partners, and motivational stories from speakers living with T1D at their Diabetes Research Symposiums. In 2013, JDRF held Diabetes Research Symposiums in 13 cities across Canada.

13 cities across Canada. If you are interested in hearing the latest updates on JDRFfunded research. contact your local JDRF Chapter to attend the next Diabetes Research Symposium near you. JDRF is grateful to our national sponsors -Bayer, GlaxoSmithKline (GSK), and Medtronic - for their generous support of these events.



Aquilini Group - Vancouver

"We proudly support JDRF, one of our core charities, through the Rockin' for Research gala and Ride for Diabetes Research. All levels of our company, from ownership to staff, work together to increase awareness of T1D and raise much-needed funds for research. We're inspired by the courage of those living with T1D and look forward to the day when there's a cure."



GOWERNMENT RELATIONS

Grassroots Advocacy Program

The Grassroots Advocacy program is a platform that brings together people who are dedicated to making a difference is the lives of all individuals touched by type 1 diabetes (T1D). Across Canada, more than 3,300 JDRF advocates are working together to make their voices heard in the federal and provincial governments by participating in online letter writing campaigns, developing long-lasting relationships with their Members of Parliament, and raising invaluable awareness for T1D. These relationships strengthen our community, provide support for those living with diabetes, and strengthen the voice of JDRF in delivering our message to the government - the need for a cure and the need to accelerate the pace of research through funding from our federal government.

Diabetes Insulin Pump Program

JDRF has been actively working with families across Canada to seek commitment from provincial governments to provide insulin pump coverage to all individuals living with T1D. In March 2013, the Government of Alberta announced insulin pump coverage to eligible residents of all ages, and, in April 2013, the Government Nova Scotia announced insulin pump coverage for residents aged 18 or younger and coverage for pump supplies for young adults aged 19 to 25 years old. Our goal is to influence all provinces across the country to ensure that one day all Canadians, regardless of their age, will have access to a Diabetes Insulin Pump Program.





JDRF 2013 International Children's Congress

T1D is a global problem requiring a united effort. In July 2013, over 150 delegates from across the U.S and around the world congregated in Washington, D.C. for the JDRF 2013 Children's Congress to urge lawmakers to continue funding T1D research. Megan Beamish, age 14, represented Canada as one of six delegates from around the world selected to participate in this unique and empowering opportunity to help Members of Congress understand what life with T1D is like and why research to find the cure for diabetes and its complications is so critical.

2014 Kids for a Cure Lobby Day

In November 2014, JDRF is planning the Kids for a Cure Lobby Day in Ottawa, an event that provides children living with T1D with the opportunity to meet with Members of Parliament to increase awareness about T1D, discuss the challenges they face living with T1D and the importance of expanding the JDRF Canadian Clinical Trial Network (JDRF CCTN) across Canada.

NATIONAL DIABETES AWARENESS MONTH AND WORLD DIABETES DAY

When it comes to diabetes management, it's all about the numbers. There can be power in numbers, especially with each person who joins the fight against type 1 diabetes (T1D). The theme for National Diabetes Awareness Month (NDAM) 2013 was "Diabetes by Numbers: We're All Counting on You!" We witnessed the power and strength of numbers first-hand during NDAM and on World Diabetes Day (WDD) on November 14.

NDAM, celebrated internationally every November, helps raise awareness of all forms of diabetes, its signs and symptoms, and gains support for critical research toward preventing, better treating and curing all forms of the disease. In 2013, JDRF invited

people to showcase Canadian Diabetes Champions in the fight against diabetes by sharing their stories through Facebook (JDRFCanada) and Twitter (@JDRF Canada). We also encouraged people to share stories with JDRF Canada on Facebook about how they are taking charge of their diabetes, highlighting their bravery while emphasizing the importance of standing together to fight the disease and find a cure. For the sixth year, JDRF also invited youth aged 10 and older to submit a video to our Annual JDRF Youth Video Contest focused on the Diabetes by Numbers theme. The deadline for submissions was March 31, 2014. The winning entry for the 6th Annual JDRF Youth Video Contest was submitted by 11 year old Cole Byers.

JDRF
Chapters
across
the country
celebrated and
engaged their communities
throughout the month by lighting
local monuments in blue, hosting blue
events, holding educational events,
securing local proclamations, forming
human blue circles, attending political
events and promoting Diabetes
Champions and the Diabetes by
Numbers Campaign on social media,
to name a few.

JDRF would like to thank our sponsor Lilly, supported by the Lilly Giving Program from Eli Lilly Canada Inc., for their valuable contribution and support with NDAM and WDD. We would also like to thank all our families, friends, staff and the individuals who shared their stories with us on Facebook and Twitter for making NDAM and WDD such a success! Together, as a team and community, we will turn type one into type none.



Claude and Bonny Chapman - Winnipeg

"Our son Chris, who is now 38, was diagnosed at age 13 with type 1 diabetes. Chris is also intellectually challenged, which is something else we manage daily. Chris is now dealing with eye complications that continue to threaten his quality of life. Our goal is to help find a cure so that children and families never have to experience any of the lows that come along with diabetes. We are continuously motivated to reach our goal because of the passion and commitment from staff, volunteers and other parents who we have connected with in our Starry Starry Night Gala activities." – Claude Chapman

"I see JDRF as a realistic route to finding the cure for diabetes because it funds diverse areas of research for type 1 diabetes, which leads to exciting research that gives hope to families like ours. JDRF is working not only to find a cure for diabetes, but to find treatments for its complications and develop devices that will improve the quality of life of people living with T1D. The Winnipeg chapter has hard-working, dedicated and passionate staff that not only inspires participation, but also works with families to provide peer support to the children and families dealing with T1D." – Bonny Chapman

OUR PARTNERS

With the dedication and support of our national partners, JDRF can continue to move forward and aggressively work towards *turning type one into type none* faster. Your contributions help accelerate progress down the path to improving lives. We are proud to partner with the following organizations and want to thank each of them for their commitment and dedication to JDRF.



























































Major and Corporate Donors

JDRF's Honour Roll

Gift Amount \$3,000,000

The WB Family Foundation

Gift Amount \$2,000,000

Christine and the late Herschel Victor

Gift Amount \$1,000,000

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TD Bank Group
TELUS and its Team Members

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Ross Mikkelsen, Barbecues Galore - Calgary

"JDRF has been near and dear to my heart ever since my daughter was diagnosed with type 1 diabetes. I support JDRF because it is an organization that has one clear goal - to cure type 1 diabetes. When you support JDRF, you know where your money is going and what it is supporting. Through its different research initiatives, supporters of JDRF can rest assured that their money is being used to find a cure for T1D."



Quebecor

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Gift Amount \$50,000 - \$99,999

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Gift Amount \$25,000 - \$49,999 The Abercrombie Foundation Alberta Culture and Community Spirit Ian & Kim Anderson Astral Media ATCO Energy Solutions Auto Control Medical Inc. The Bagg Family Fundraisers: Spring Fling; Cuisine for a Cure; Swim for a Cure Bank of America Merrill Lynch The Barrie Advance Bayshore Capital Inc. Barbecues Galore Bell Media Blue Bell Social Club Scott Bolton Guiseppe and Elina Borsellino Brian Randall Charity Golf Classic The Bridle Bash Foundation Martin Cairns Caisse de bienfaisance des employés et retaités du CN Calgary Herald Canaccord Wealth Management Canada Safeway Ltd.

Capital One

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Real Estate Weekly - Edmonton Regina JDRF Charity Golf C/O Jeff Stepan Riley Beatty 2nd Annual Skate-a-Thon Rogers Calgary Radio Group John Rowand Royal Oak Audi Carmie and Joey Saputo Shed Concept Restaurants and Hospitality Services Allan Silber Sobev's West Spin Master Ltd. Yolanda Stepien and Dan McLeod Murray Tkatch Toronto Community Foundation Torvs Touch a Truck Moncton Vinyl 95.3 Walmart Canada Corp. Norman Warner Cinder Warren The Woodbridge Company Limited 2 Anonymous

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Dale Wishewan, Booster Juice - Edmonton

"Kids should be able to be kids. That's why I support JDRF. When kids have to worry about injections, monitoring blood sugar levels and all of the other day-to-day nuisances of diabetes, they don't get to experience the carefree nature of childhood. I support JDRF in hope that one day my contribution will make a positive impact, however big or small, on the lives of people living with type 1 diabetes."

Rawlco Radio

The Beta Society Legacy

Gift Honour Roll

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The Estate of Linton Maseko The Estate of Myrtle Mawhood The Estate of Myrtle Mawhood The Estate of Donald Edward McCarthy The Estate of Edna McDonald The Estate of Catherine Douglas McEwen Robert McLeish The Estate of Peter Egerton Ryerson Miller The Estate of Marjorie Elizabeth Robertson Misener The Estate of Olive Mae Mueller The Estate of Winnifred Bernice Muir Paula Mussman The Estate of Edward Nadler The Estate of Donald Nattress Carol and Michael Nedham The Estate of Doris May Newman The Estate of Helen Alice Nichols The Estate of Hiroshi Nozuve The Estate of Richard Oatway The Estate of Graham Peter Owen The Estate of Nellie Paskou The Estate of Helen E. Peters Christina Peterson The Estate of Lawrence Plowman Lorraine Pollockt The Estate of Edna Charron Presseau The Estate of Helen Wetmore Redding The Estate of Lillian Evelyn Reine Tannis and George Richardson The Estate of Mary Margaret Riley The Estate of Ernestine Robert The Estate of Edith Rodier The Estate of Agnes Rodvik The Estate of Alan Samuels The Estate of Theresa Helen Sansom The Estate of Mathilda Saretske The Estate of Martha Serrels

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Canadian Research Funded by JDRF

Immune Therapies

Danska, Jayne, PhD

Strategic Research Agreement Mechanisms of Type 1 Diabetes Protection by Manipulation of Gut Microflora The Hospital for Sick Children, Toronto, ON

Kieffer, Timothy, PhD

Strategic Research Agreement Novel Biomarkers for Diabetes University of British Columbia, Vancouver, BC

Polychronakos, Constantin, MD

Priority Research Grant
Rare but highly penetrant alleles in the
genetics of type 1 diabetes
McGill University Health CentreMontreal Children's Hospital,
Montreal, QC

Santamaria, Pere, MD, PhD

Strategic Research Agreement
Expansion of autoregulatory
CD4+ memory with pMHC class II
nanoparticles
The University of Calgary, Calgary, AB

Santamaria, Pere, MD, PhD

Innovative Grant
Role of a cross-reactive gut microbial
peptide in diabetes
The University of Calgary, Calgary, AB

Tan, Rusung, MD, PhD

Strategic Research agreement *IL-17 in type 1 diabetes*University of British Columbia, Vancouver, BC

Verchere, C. Bruce, PhD

No abstract available Exploiting beta cell metabolism to impact islet autoimmunity University of British Columbia, Vancouver, BC

Beta Cell Therapies

Baradar Jalili, Reza, PhD

Postdoctoral Fellowship Award Development and Application of a Composite Non-Rejectable Islet Graft University of British Columbia, Vancouver, BC

Bischoff, Loraine, MD

Postdoctoral Fellowship Award Protection of islet grafts by recruitment of T regulatory cells University of British Columbia, Vancouver, BC

Bruin, Jennifer, PhD

Postdoctoral Fellowship Award Generation of Mature Beta Cells from Human Embryonic Stem Cells University of British Columbia, Vancouver, BC

Erener, Suheda, PhD

Postdoctoral Fellowship Award Targeting miRNA pathways to improve differentiation of hESCs to beta cells University of British Columbia, Vancouver, BC

Hess, David, PhD

Innovative Grant
Proteomic dicovery of stem cellsecreted islet regenerative biomarkers
The University of Western Ontario,
London, ON

Johnson, James, PhD

High-Throughput analysis of beta-cell preserving paracrine factors
University of British Columbia,
Vancouver, BC

Johnson, James, PhD

Priority Research Grant
Targeting the Rafl signaling node for
beta-cell survival and function
University of British Columbia,
Vancouver, BC

Johnson, James, PhD

Strategic Research Agreement
High-throughput comparison of betacell preservation by biologic factors
University of British Columbia,
Vancouver, BC

Kieffer, Timothy, PhD

Strategic Research Agreement
Treatment of Diabetes with Human
Pancreatic Precursor Cells
University of British Columbia,
Vancouver, BC

Korbutt, Gregory, PhD

Strategic Research Agreement Encapsulation of Neonatal Porcine Islets for Clinical Transplantation The Governors of the University of Alberta, Edmonton, AB

Lim, Gareth, BSc

Postdoctoral Fellowship Award Role of the 14-3-3 proteins in type 1 diabetes University of British Columbia, Vancouver, BC

Luciani, Dan, PhD

Career Development Award Identifying and targeting novel cell death pathways in islet graft failure University of British Columbia, Vancouver, BC

Lynn, Francis, PhD

Career Development Award
The role of Sox4 in beta cell genesis
and proliferation
University of British Columbia,
Vancouver, BC

MacDonald, Patrick, PhD

Career Development Award Metabolic and immunologic interactions in islet graft function and loss The Governors of the University of

The Governors of the University of Alberta, Edmonton, AB

McBane, Joanne, PhD

Postdoctoral Fellowship Award Using Biomatrices to Promote Angiogenesis in Islet Transplantation Ottawa Heart Institute Research Corporation, Ottawa, ON

Screaton, Robert, PhD

Priority Research Grant
Functional Genomics of Human Beta
Cell Proliferation
Children's Hospital of Eastern Ontario
Research Institute, Ottawa, ON

Shapiro, A.M. James, MD

Strategic Research Agreement Caspase Inhibition in Clinical Islet Transplantation University of Alberta- Dept. of Surgery, Edmonton, AB

Verchere, C. Bruce, PhD

Priority Research Grant CCL22-Mediated Protection of Islet Transplants University of British Columbia, Vancouver, BC

Wang, Qinghua, MD, PhD

Strategic Research Agreement GABAergic signaling a potential new target for human beta-cell regeneration St. Michael's Hospital, Toronto, ON

Wu, Jiangping, MD, PhD

Strategic Research Agreement

Drak2: a novel therapeutic target of
type 1 diabetes

CHUM Research Center, Montreal, QC

Glucose Control

Asztalos, Elizabeth

Strategic Research Agreement CONCEPTT - International Studies The Centre for Mother, Infant, and Child Research (CMICR), Toronto, ON

Haidar, Ahmad, M.Sc.A

Postdoctoral Fellowship Award Closed-loop systems for type 1 diabetes: Clinical testing McGill University, Montreal, QC

Rabasa-Lhoret, Remi, PhD, MD

Innovative Grant
Closed-loop control of glucose levels
after meal intake in type 1 diabetes
Institut de Recherches Cliniques de
Montreal, Montreal, QC

Complications Therapies

Akude, Eli, PhD

Postdoctoral Fellowship Award
Understanding the molecular
mechanisms that produce diabetic
dysautonomia
McGill University, Montreal, QC

Fernyhough, Paul, PhD

Priority Research Grant Metabolic regulation of neuronal mitochondrial function in diabetes St. Boniface General Hospital, Winnipeg, MB

Fernyhough, Paul, PhD

Strategic Research Agreement Muscarinic receptor antagonists for treatment of diabetic neuropathy St. Boniface General Hospital, Winnipeg, MB

Geraldes, Pedro, PhD

High Priority, Short Term Award Insulin actions in podocyte injury associated to diabetic nephropathy Université de Sherbrooke - Service de la recherche et de la création, Sherbrooke, QC

McBride, Heidi, PhD

Strategic Research Agreement Investigations into the rise and fall of ROS in the hyperglycaemic state Ottawa Heart Institute Research Corporation, Ottawa, ON

Pacaud, Danièle, MD

Strategic Research Agreement Corneal Confocal Miscroscopy to detect Diabetic Neuropathy in Children The University of Calgary, Calgary, AB

Paterson, Andrew, MB, ChB

Strategic Research Agreement Genetics of the decline in Glomerular Filtration Rate in Type 1 Diabetes The Hospital for Sick Children, Toronto, ON

Perkins, Bruce, MD

Strategic Research Agreement Creation of the Canadian 50-Year Medalist Cohort University Health Network, Toronto, ON

Perkins, Bruce, MD

Strategic Research Agreement Corneal Nerve Fiber Density as a Biomarker of Early Neuropathy. University Health Network, Toronto, ON

Touyz, Rhian, MD, PhD

Center Grant
TOUYZ: NOX-derived ROS: Renal
and Vascular Complications of
Type 1 Diabetes
Ottawa Hospital Research Institute,
Ottawa, ON

Partnerships

JDRF Canadian Clinical Trial Network
International Government Grant/
Transportfolio
JDRF Canadian Clinical Trial Network
Coordinating Center (CCTN)

WB Family Foundation - Toronto

"Knowing that there is world class type 1 cure research always being done is important to us. It gives us hope. When we decided to take the step to fund cure research ourselves, JDRF became a valuable partner. Their knowledge of the research community and their experience overseeing research projects has provided a lot of value to us as donors."



Financial Review 2013

Consolidated Balance Sheet as at December 31, 2013

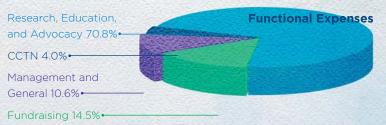
	2013 (\$)	2012 (\$)
Assets		
Current Assets		
Cash	9,777,529	6,026,524
Restricted cash	1,100,000	-
Short-term investments	284,158	144,931
Accounts receivable	742,885	1,229,853
Grant receivable		2,211,504
Prepaid expenses and other assets	298,432	96,421
	12,203,004	9,709,233
Long-term investments	1,556,919	1,529,163
Capital Assets	224,037	250,405
Intangible Assets	87,571	43,377
	14,071,531	11,532,178
Liabilities		
Current Liabilities		
Accounts payable, accrued and deferred support	1,151,437	756,831
Deferred leasehold	250,039	284,527
Deferred contributions	1,100,000	-
	2,501,476	1,041,358
Net Assets		
Unrestricted	11,484,555	10,405,320
Restricted for endowment purposes	85,500	85,500
	11,570,055	10,490,820
	14,071,531	11,532,178

Consolidated Statement of Public Support, Other Revenues, and Expenses for the year ended December 31, 2013

	2013 (\$)	2012 (\$)
Revenues		
Public Support Revenues		
Campaigns	23,064,417	23,340,092
Direct response	427,663	115,641
JDRF CCTN grant revenue	-	6,355,477
	23,492,080	29,811,210
Other Revenues		
Investment income	29,560	111,227
	23,521,640	29,922,437
Expenses		
Direct Expenses	5,045,399	4,724,954
	18,476,241	25,197,483
Other Expenses		
Program services:		
Research support	7,973,281	8,216,171
JDRF CCTN research	517,495	11,353,991
Public education and advocacy	4,350,500	4,345,216
	12,841,276	23,915,378
Supporting services:		
Management and general	1,839,696	1,663,235
JDRF CCTN general	185,845	323,294
Fundraising	2,530,189	2,398,474
	4,555,730	4,385,003
	17,397,006	28,300,381
Surplus (deficit) of the year	1,079,235	(3,102,898)

Public Support and Other Revenues





Report of Management

Management is responsible for the preparation of JDRF's financial statements and other financial information in this report. This responsibility includes maintaining the integrity and objectivity of the financial records. JDRF maintains a system of internal controls designed to provide assurance that its records include the transactions of its operations.

The financial statements have been reported on by JDRF's auditors, PricewaterhouseCoopers LLP, Chartered Accountants. The Board of Directors, through its Finance Committee, is responsible for determining that management fulfills its responsibilities in the preparation of the financial statements, and ensures the financial and operational controls of JDRF are adequate.

The Audit Committee reviews the financial statements and meets with the auditors. The auditors have full and free access to management, the Finance Committee, and the Audit Committee in carrying out their work.

The data on this page has been extracted and summarized from the audited financial statements. A complete set of financial statements is available on our website at **jdrf.ca** or upon request at 1.877.287.3533. Charitable business number: 11897 6604 RROOO1.

Senior Leadership Team

Dave Prowten, **President & CEO**Mary Ann Azzarello, **Vice President,**

Development

Cindy Innes, Vice President,

Support Services

Nancy Roper, Vice President

Donor Relations

Jennifer McEvoy, Associate Vice

President, Marketing and

Communications

Board of Directors 2013/2014

Aubrey W. Baillie, Chair of the Board

Alex S. Davidson, Treasurer

Dr. David Kozloff, Secretary

Darrin Davis

Mary Jane Devine

Sheldon Finkelstein. MD

Bryan C. Haynes

Mike Hopkins

Judy M. Hunt

Garth Lancaster

Mollie Miller

Sean Murray

Peter Oliver

Maarika Paul

Ryan Shay

Lorne Shiff

Stephen Sibold

Matt Varey

Andrew Wilkin

Bruce Williams

Andrew McKee - Ex-Officio

Chapters and Locations

National Support Office

2550 Victoria Park Avenue, Suite 800 Toronto, ON M2J 5A9 Toll Free: 1.877.CURE.533

Toronto Region

Toronto Chapter

2550 Victoria Park Ave., Suite 800 Toronto, ON M2J 5A9 Tel: 647.789.2000

South Central Ontario Region

Peel Chapter

6620 Kitimat Road, Unit 1A Mississauga, ON L5N 2B8 Tel: 905.608.8067

Barrie

109 Bayfield St. Midhurst, ON L4M 3A9 Tel: 705.792.4833

Hamilton Chapter

12-442 Millen Road Stoney Creek, ON L8E 6H2 Tel: 905.664.1432

North Eastern Ontario Region

Ottawa Chapter

1600 Merivale Road, Suite 206 Ottawa, ON K2G 5J8 Tel: 613.244.4818

South Western Ontario Region

Waterloo Chapter

684 Belmont Ave. W., Unit 103 Kitchener, ON N2M 1N6 Tel: 519.745.2426

London

309 Commissioners Rd., Unit A #2 London, ON N6J 1Y4 Tel: 519.641.7006

Windsor

261 Moceri Cres., Tecumseh, ON N8N 5A9 Tel: 519.739.9191

BC & Yukon Region

Vancouver Chapter

6450 Roberts St., Suite 150 Burnaby, BC V5G 4E1 Tel: 604.320.1937

Kamloops

347 West Seymour Street Kamloops, BC V2C 1E8 Tel: 250.374.0599

Kelowna

PO Box 22037 Capri Centre Kelowna, BC V1Y 9N9 Tel: 250.765.7711

Nanaimo

Tel: 250.370.7790

Victoria Chapter

1581-H Hillside Avenue, Suite 296 Victoria, BC V8T 2C1 Tel: 250.370.7790

Southern Alberta Region

Calgary Chapter

1608-17th Avenue S.W., Suite 204 Calgary, AB T2T 0E3 Tel: 403.255.7100

North Central Alberta & NWT Region

Edmonton Chapter

17312 - 107 Avenue NW Edmonton, AB T5S 1E9 Tel: 780.428.0343

Red Deer

P.O. Box 25040 Deer Park Red Deer, AB T4R 2H0 Tel: 855.428.0343

Prairie Region

Winnipeg Chapter

191 Lombard Avenue, Suite 1101 Winnipeg, MB R3B 0X1 Tel: 204.953.4477

Regina Chapter

P.O. Box 3924 Regina, SK S4P 3R8 Tel: 306.543.5451

Saskatoon Chapter

P.O. Box 22016 Prince Albert, SK S6V 8E3 Tel: 306.314.9533

Quebec Region

Montreal Chapter

615, boul. René-Lévesque Ouest, bureau 330 Montréal, QC H3B 1P5 Tel: 514.744.5537

Québec City

881 Route 138 Neuville, QC GOA 2RO Tel: 581.983.7789

Atlantic Region

Halifax Chapter

1658 Bedford Highway, Suite 2055 Bedford Place Mall Bedford, NS B4A 2X9 Tel: 902.453.1009

Moncton

36 Albert Street, Moncton, NB E1C 1A9 Tel: 506.857.4254

Saint John, NB

99 Hampton Road Rothesay, NB E2E 3L3 Tel: 506.763.0001

St. John's, NL

6 Islington Place Paradise, NL A1L 0H1 Tel: 709.237.6855 ■ □ □ □ □ JDRF Canada | jdrf.ca | 1.877.287.3533