

Osteopathic International Alliance (OIA)
Annual General Meeting Minutes
Evergreen Laurel Hotel, Evergreen 3 Room
Paris France
23 September 2012
14.00-16.30

Full Members Present

American Osteopathic Association (AOA-US)–Dr William Burke, Dr Boyd Buser, Mr John Crosby,
Dr Karen Nichols
Australian Osteopathic Association (AOA-AU)–Ms Nicole Grbin, Mr Michael Mulholland-Licht,
Mr Antony Nicholas
British Osteopathic Association (BOA)–Mr Michael Watson, Mr Jonathan Bailey-Teyletche,
Ms Marina Urquhart-Pullen
Federation Suisse des Osteopathes (FSO-SVO)–Mr Sebastian Byrd
General Osteopathic Council (GOsC)–Mr Tim Walker
German-American Academy of Osteopathy (DAAO)–Dr Frank Mueller
German Association for Osteopathic Medicine (DGOM)–Dr med Johannes Mayer, Dr Rainer
Kemp
German Osteopathic Association (VOD)–Ms Marina Fuhrmann, Mr Albrecht Kaiser
Medecins Osteopathes De France–Le Syndicat (ODFS)–Dr Jean-Michel Besnard, Dr Bruno Burel,
Dr Jean-Jacques Lobel
Osteopathic Society of New Zealand (OSNZ)–Mr Clive Standen

Associate and Partner Members Present

American Academy of Osteopathy (AAO)–Dr Jane Carreiro
American Association of Colleges of Osteopathic Medicine (AACOM)–Dr Stephen Shannon,
Dr Tyler Cymet
American Association of Osteopathic Examiners (AAOE)–Dr Dana Shaffer
American Osteopathic Information Association (AOIA)–Mr Mike Zarski
Belgian Society of Osteopathy (SBO-BVO)–Mr Christian Gerrard, Mr Eric Dobbelaere
British School of Osteopathy (BSO)–Mr Charles Hunt
bvo, Bundesverband Osteopathie e.V. (Federal Osteopathic Association)–Mr Mathias Hartlep
Canadian Federation of Osteopaths (CFO)–Ms Gail Abernethy
Centre Osteopathique Atman–Mr Christian DeFrances
Consiglio Superiore d'Osteopatia–Mr Simon Duncan
Japan Osteopathic Federation (JOF)–Mr Yoshiteru Hiratsuka
Institute of Osteopathic Medicine (IOM)–Dr Irina Egorova
Michigan State University College of Osteopathic Medicine (MSUCOM)–Dr William Strampel,
Professor Reza Nassiri
National Board of Osteopathic Medical Examiners (NBOME)–Dr John Gimpel, Dr Janice Knebl
Norwegian Association of Osteopathy (NOF)–Ms Ingunn Backe Wennberg
Ontario Association of Osteopathic Manual Practitioners (OAO)–Ms Elizabeth Leach,
Ms Kari Hope
Organisation of Osteopathic Physicians of Switzerland (SAGOM)–Dr Bernhard Hugentobler
Osteopathic Council of New Zealand–Professor Stiofan MacSuihbne
Osteopathic European Academic Network (OsEAN)–Mr Raimund Engel

Register for Osteopaths of Belgium (ROB)—Mr Fara Catuelle
Registre des Osteopathes du Quebec (ROQ)—Mr Benoit Yergeau
Registro Brasileiro dos Osteopatas (RBrO)—Ms Ana Paula Ferreira
Society for the Promotion of Manual Practice Osteopathy (SPMPO)—Ms Gail Abernethy
Uniform National Register of Osteopaths (UNRO)—Ms Larisa Lasovetskaya
Unitec New Zealand—Mr Clive Standen

Guests

Osteopathic Board of Australia (OBA)—Mr Robert Fendall

Board Members in Attendance

Dr med Johannes Mayer, Chair
Mr Clive Standen, Vice-chair
Dr Boyd Buser
Dr Jane Carreiro
Mr Simon Fielding
Mr Michael Mulholland-Licht
Dr Karen Nichols
Mr Tim Walker

Excused

Dr Peter Ajluni, Secretary-Treasurer

Staff

Ms Linda Mascheri, OIA Secretariat
Mr Joshua Kerr, OIA Secretariat
Ms Bonnie Koenig, Consultant

1 Board and Member Introductions

2 The chair opened the meeting with introductions of the OIA Board members and a welcome to the
3 attendees.

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5 Approval of Minutes

6 **The Full membership moved, seconded and approved** *the minutes from the 2011 Annual General*
7 *Meeting as presented.*

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9 Board Reports

10 The Board of Directors presented their annual reports to the membership for their information.

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12 **Olympic Initiative:** Mr Walker reported that the OIA Board of Directors surveyed and collected
13 information from member organisations regarding osteopathic practitioners treating Olympians,
14 past and present. The Board polled members about which practitioners treat or have Olympians; in
15 which sports; and if the athletes won medals. This information was collated and prepared for a
16 press release that was released to publications in North America, Europe and Australasia, as well as
17 being made available to our member organisations during the 2012 London Olympic Games.

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1 **5-Year Reviews:** This year saw the first 5-year review process. The information received will
2 help the OIA ensure that its members are still in the correct membership category and, for Full
3 members; it will determine membership dues for the next year. Staff will coordinate 5-year reviews
4 regularly starting with the new calendar year.

6 **OIA Secretary-Treasurer Report**

7 Mr Mulholland-Licht reported on 99% of OIA's projected dues by member organisation, less the
8 two temporarily suspended organisations:

- 9 • 68% Full Members
- 10 • 7% Associate Members
- 11 • 25% Partner Members

12 However, this does not include expenses incurred from this conference. Registration for the
13 conference totalled 111 attendees at the conference. This includes registrants, Board, speakers,
14 leadership and staff.

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16 Mr Mulholland-Licht noted the OIA was the recipient of over \$11,000 in funds transferred to the
17 OIA due to the dissolution of the World Osteopathic Health Organisation (WOHO). The
18 memorandum of understanding between the AOA-US and the OIA remains in effect, noting that
19 the OIA pays the AOA-US USD \$18,000 per year for administrative services. This agreement
20 includes staff support, IT and telecom services, and office occupancy costs for the day to day
21 functions of the OIA; this agreement is renewable on an annual basis.

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23 The **Full membership moved, seconded and approved** *the 2011 Secretary-Treasurer Report as*
24 *presented* (see Addendum I for full report).

26 **Committee Reports**

27 The committee chairs presented the work that their committees have completed in the last year.

29 **Governance Committee**

30 Dr Buser reported for the Governance committee, stating that the Committee developed the
31 proposed by laws that are up for review at this AGM.

33 **Internal Affairs Committee**

34 Mr Mulholland-Licht reported on the following committee responsibilities and projects:

- 35 • Oversight of the quarterly OIA Newsletter,
- 36 • Coordination, review and update of the OIA website.

38 **External Affairs Committee**

39 Mr Tim Walker reported on the following committee responsibilities:

- 40 • Identify potential new member organisations to assist the Membership committee with
41 prospective member drive, and
- 42 • Focusing on expanding to new and underrepresented areas of the world.

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1 **2012 Nomination Task Force: Dr Nichols said there will be a full report.**

2 Dr Nichols stated that the task force would provide a full report during the Candidates Forum.

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4 **Membership Committee**

5 Mr Fielding reported that since the last AGM the committee received seven (7) new applications.
6 As of this publication, the following applications were approved: one (1) new Full member,
7 **Medecins Osteopathes De France – Le Syndicat (ODFS)** (December 2011); three (3) Associate
8 Members, **Belgian Society of Osteopathy (SBO-BVO, UP)** (December 2011), **Register for Osteopaths**
9 **of Belgium (ROB)** (December 2011), **Uniform National Register of Osteopaths (UNRO)** (December
10 2011), and one (1) Partner member, **Alberta Association of Osteopathic Manual Therapists (AAOMT)**
11 (September 2012). Two (2) applications are pending review: one (1) Full member, Swiss Organisation
12 of Osteopathic Physicians (SAGOM) and Ontario Federation of Osteopathic Professionals
13 (OFOP).

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15 **MOTION: The Full membership moved, seconded and unanimously approved** *ratification of*
16 *the following organisations as stated: one (1) new Full member, Medecins Osteopathes De France – Le*
17 *Syndicat (ODFS) (December 2011); three (3) Associate Members, Belgian Society of Osteopathy (SBO-*
18 *BVO, UP) (December 2011), Register for Osteopaths of Belgium (ROB) (December 2011), Uniform*
19 *National Register of Osteopaths (UNRO) (December 2011), and one (1) Partner member, Alberta*
20 *Association of Osteopathic Manual Therapists (AAOMT).* See Addendum II for the full list of
21 approved members.

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23 **OIA Status Reports – Stages 1 & 2**

24 Dr Buser and Mr Standen reported that the Stage 1 report was published in April and is available on
25 the OIA’s website (<http://www.oialliance.org/osteopathy-status-report.htm>) to present the broad
26 range of the osteopathic profession, including both streams: osteopathic physicians and osteopaths
27 worldwide. The report has been developed by the OIA Board of Directors, with input from its
28 member organisations and in concert with the World Health Organisation (WHO).

29
30 The OIA is now focused on Stage 2, an epidemiology survey of the osteopathic profession that will
31 create a snapshot of the practice of the profession. The OIA worked in cooperation with the WHO
32 to create the survey, which aims to answer questions such as: what are we really doing, what are our
33 educational standards, what kind of complaints we treat, what diagnoses we find, what methods we
34 use, what roles the profession plays for income and what place osteopathy/osteopathic medicine has
35 in health care. The survey was distributed to osteopathic physicians and osteopaths all around the
36 world and offered in half dosen languages.

37
38 **Presentation of the OIA Website Redesign:** Mr Michael Zarski (AOIA Partner Member) has
39 been working with the AOA-US staff to prepare a revised OIA website. Mr Zarski presented a
40 preview of the new website, to go live shortly after the meeting.

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42 **Proposed OIA Bylaws Changes**

43 Dr Buser presented the proposed bylaws changes to the members:

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Current Bylaws Wording	Proposed Changes	Rationale
Article II: Statement of Purpose		
The OIA is organized as a tax-exempt not-	The OIA is organized as a tax-exempt not-	Update of our

<p>for-profit organization and operated exclusively for charitable and educational purposes in accord with Section 501(c)(3) of the Internal Revenue Code of 1986. The corporation is organized to advance the philosophy and practice of osteopathy throughout the world both for osteopathic medicine and osteopathy while promoting excellence in osteopathic medical education, research, and healthcare delivery.</p> <p>The goals of the OIA are to:</p> <p>Promote excellence in osteopathic medical education, research, and healthcare delivery.</p> <p>Sponsor and deliver educational forums. Collect and disseminate accurate and targeted information about the state of the osteopathic profession worldwide.</p> <p>Participate in jointly sponsored research and healthcare related activities.</p> <p>Conduct consultative partnerships with international associates and organizations to support the osteopathic profession.</p>	<p>for-profit organization and operated exclusively for charitable and educational purposes in accord with Section 501(c)(3) of the Internal Revenue Code of 1986. The corporation is organized to advance the philosophy and practice of OSTEOPATHIC MEDICINE AND osteopathy throughout the world both for osteopathic medicine and osteopathy-WORLDWIDE, while promoting excellence in osteopathic medical education, research, and health_care delivery.</p> <p>The goals of the OIA are to:</p> <p>Promote excellence in osteopathic medical education, research, and healthcare delivery.</p> <p>Sponsor and deliver educational forums. Collect and disseminate accurate and targeted information about the state of the osteopathic profession worldwide.</p> <p>Participate in jointly sponsored research and healthcare related activities.</p> <p>Conduct consultative partnerships with international associates and organizations to support the osteopathic profession.</p>	<p>mission and removal of outdated goals.</p>
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Article III: Membership

Section 1. Definitions

<p>Footnote: ¹ World Health Organization (WHO) Draft <i>Guidelines on Basic Training and Safety in Osteopathy, June 2005</i> ¹ World Health Organization (WHO) Draft <i>Guidelines on Basic Training and Safety in Osteopathy, June 2005</i></p>	<p>Footnote: ¹ AMERICAN ASSOCIATION OF COLLEGES OF OSTEOPATHIC MEDICINE, EDUCATIONAL COUNCIL ON OSTEOPATHIC PRINCIPLES GLOSSARY OF OSTEOPATHIC TERMINOLOGY, APRIL 2009 ¹ AMERICAN ASSOCIATION OF COLLEGES OF OSTEOPATHIC MEDICINE, EDUCATIONAL COUNCIL ON OSTEOPATHIC PRINCIPLES GLOSSARY OF OSTEOPATHIC TERMINOLOGY, APRIL 2009</p>	<p>The footnote has been updated to reflect where the definitions come from, since the draft version of the Guidelines was not published.</p>
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Section 2. Representation

<p>Each National Delegation is entitled to a</p>	<p>Each National Delegation can have a</p>	<p>These changes</p>
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<p>minimum of two (2) Delegates carrying the delegation's votes. If one Full Member organization represents all the osteopathic physicians and osteopaths in the country, it will have all of the country's Delegates. If two Full Member organizations split this representation, organization will have a minimum of one Delegate. Additional Delegates will be added based on the size of the organization defined by the number of osteopathic professionals it represents.</p>	<p>maximum of two (2) organizations of Full Members, and is entitled to a minimum of two (2) Delegates carrying the delegation's votes. If one Full Member organization represents all the osteopathic physicians and/OR osteopaths in the country, it will have all of the country's Delegates. If two OR MORE Full Member organizations split this representation, THE each organizationS will FORMALLY AGREE TO COLLABORATE AND WILL WORK TOGETHER TO DETERMINE HOW TO SHARE THE DELEGATION AND VOTES. Have a minimum of one Delegate. Additional Delegates will be added based on the size of the organization defined by the number of osteopathic professionals it represents. A NATIONAL DELEGATION CAN SEND TO THE OIA'S ANNUAL GENERAL MEETING (AGM) ANY NUMBER OF DELEGATES UP TO THE MAXIMUM NUMBER OF VOTES IT CARRIES.</p>	<p>reflect the fact that we allow more than 2 Full member organisations from a country.</p>
<p>Section 4. Member Classifications</p>		

<p>A. Full Members The following groups are considered to be Full Members:</p> <ol style="list-style-type: none"> 1. Governmentally authorized/recognized national organizations whose members are licensed or legally recognized Osteopathic Physicians and represent the majority of the professional grouping of Osteopathic Physicians in any one country. 2. Governmentally authorized national organizations whose members are Osteopaths and who regulate, license, and/or represent the majority of the professional grouping of Osteopaths in any country where the practice of Osteopathy is legally recognized with osteopathic practice standards. <p>B. Associate Members The following groups are considered to be Associate Members:</p> <ol style="list-style-type: none"> 1. Established or emerging Osteopathic Physician groups that represent the majority of Osteopathic Physicians in a given country who are working towards governmental recognition and the legal establishment of the practice of osteopathic medicine, and full membership in the OIA. 2. Established or emerging osteopathic groups that represent the majority of Osteopaths in a given country who are working towards governmental recognition and the legal establishment of the practice of osteopathy, and full membership in the OIA. <p>C. Other Partners</p>	<p>A. Full Members The following groups are considered to be Full Members:</p> <ol style="list-style-type: none"> 1. Governmentally authorized/recognized national organizations whose members are licensed or legally recognized Osteopathic Physicians and represent the majority of the professional grouping of Osteopathic Physicians in any one country. 2. Governmentally authorized national organizations whose members are Osteopaths and who regulate, license, and/or represent the majority of the professional grouping of Osteopaths in any country where the practice of Osteopathy is legally recognized with osteopathic practice standards. <p>LEGALLY RECOGNIZED ORGANIZATIONS FROM ANY COUNTRY WHERE OSTEOPATHIC PHYSICIANS AND/OR OSTEOPATHS ARE REGULATED BY LAW, WHO REPRESENT THE MAJORITY OF THE PROFESSIONS OF OSTEOPATHIC PHYSICIANS AND/OR OSTEOPATHS. ADDITIONALLY OIA MEMBERSHIP CAN BE SHARED BY A COALITION OF ELIGIBLE ORGANIZATIONS WHO FORMALLY AGREE TO COLLABORATE. THE POSSIBILITY OF ADDING MORE MEMBERS TO THE COALITION WILL BE REVIEWED AT THE PREVIOUSLY SCHEDULED TIME OF REVIEW OF THE ORIGINAL MEMBER(S), UNLESS THE BOARD SPECIFIES OTHERWISE.</p> <p>B. Associate Members The following groups are considered to be Associate Members:</p> <ol style="list-style-type: none"> 1. Established or emerging Osteopathic Physician groups that represent the majority of Osteopathic Physicians in a given country who are working towards governmental recognition and the legal establishment of the practice of osteopathic medicine, and full membership in the OIA. 	<p>This section updates our membership categories to better reflect the current state of the global osteopathic profession and the state of the OIA.</p> <p>-“regulatory bodies” will be further defined in the Policy & Procedures Manual</p>
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<p>Other Partners are defined as organizations/institutions with goals and objectives that are consistent with those of the OIA.</p>	<p>2. Established or emerging osteopathic groups that represent the majority of Osteopaths in a given country who are working towards governmental recognition and the legal establishment of the practice of osteopathy, and full membership in the OIA.</p> <p>ESTABLISHED OR EMERGING ORGANIZATIONS FROM ANY COUNTRY WHERE OSTEOPATHIC PHYSICIANS AND/OR OSTEOPATHS ARE WORKING TOWARDS GOVERNMENTAL RECOGNITION AND THE LEGAL ESTABLISHMENT OF THE OSTEOPATHIC PROFESSION AND FULL MEMBERSHIP IN THE OIA; AND WHICH REPRESENT THE MAJORITY OF THE PROFESSIONS OF OSTEOPATHIC PHYSICIANS AND/OR OSTEOPATHS.</p> <p>C. Other Partners MEMBERS Other Partners MEMBERS are defined as organizations/institutions with goals and objectives that are consistent with those of the OIA, BUT WHO DO NOT MEET THE CRITERIA OF FULL OR ASSOCIATE MEMBERSHIP.</p>	
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Article V, Board of Directors

Section 3. Number, Term, and Qualifications

<p>The maximum number of Directors shall be nine (9), as established by resolution of the Board. Representatives of all member organizations in good standing shall be eligible for election as directors. Six (6) positions shall be allocated for Full members, and the remaining three can be filled by Associate, Partner, or lay members. Of the six seats allocated for Full members, two (2) positions on the Board shall be reserved for Representatives of the osteopathic physician organization with the greatest number of votes, and one (1) position on the Board shall be reserved for a Representative of the osteopaths' organization with the greatest number of votes.</p> <p>One (1) to three (3) lay members may be</p>	<p>The maximum number of Directors shall be nine (9), as established by resolution of the Board. Representatives of all member organizations in good standing shall be eligible for election as directors. Six (6) positions shall be allocated for Full members, and the remaining three can be filled by Associate, OR Partner, or lay members. Of the six seats allocated for Full members, two (2) positions on the Board shall be reserved for Representatives of the osteopathic physician organization with the greatest number of votes, and one (1) position on the Board shall be reserved for a Representative of the osteopaths' organization with the greatest number of votes.</p> <p>One (1) to three (3) lay members may be elected to the Board for one a three year</p>	<p>Clarifies that at least 2/3 of the Board must have osteopathic training and are not therefore a lay member</p> <p>-Reflects wording in P&P Manual that</p>
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<p>elected to the Board for one three year term. All other Directors shall be osteopathic physicians or osteopaths and hold office for a term of three (3) years from his/her selection. Osteopathic physicians or osteopath Directors can be elected to a second three (3)-year term but cannot serve more than two (2) consecutive terms. Each Director shall continue to hold office until his or her successor has been elected. The Board will develop a process that will be included in the Policy and Procedures Manual.</p>	<p>term. NO MORE THAN THREE (3) LAY MEMBERS IN TOTAL MAY SERVE ON THE BOARD AT ONE TIME (INCLUDING REPRESENTATIVES OF FULL MEMBERS). All other Directors shall be osteopathic physicians or osteopaths and hold office for a term of three (3) years from his/her selection. Osteopathic physicians or osteopath Directors AND can be elected to a second three (3)-year term but cannot serve more than two (2) consecutive terms. Each Director shall continue to hold office until his or her successor has been elected. The Board will develop a process that will be included in the Policy and Procedures Manual.</p>	<p>states a lay member's term reflects that of other directors (up to tow consecutive three-year terms). -Further defines that only 3 members may be lay members, whether they are elected from a Full member or not. "Lay" will be defined in the P&P manual. -Editorial deletion; this has been addressed in the P&P Manual.</p>
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The proposed bylaws changes were approved with a 9-1 vote of the Full members.

Candidates Forum

Candidates Comments: Dr Nichols introduced the candidates and asked each of them to speak briefly to the membership about why they should be elected to the Board of Directors. Dr Buser and Mr Standen are not eligible to stand for re-election as they are completing their second consecutive terms. Mr Mulholland-Licht has complete his 1st term and is able to run again.

The Nominating committee received and approved the following five (5) nominations to stand for election at the AGM for three (3) positions on the Board that are up for election:

- William Burke, DO (US)- Nominated from the AOA-US (Full member – guaranteed seat);
- Fara Catuelle, BSc, DO – MROB (BE), Nominated from the ROB (Associate member);
- Charles Hunt, DO (UK), Nominated by the BOA and GOsC, representing the BSO (Partner Member);
- Michael Mulholland-Licht, DO (AU), Nominated from the AOA-AU (Full member); and
- Dixie Tooke-Rawlins, DO (US), Nominated from VCOM (Partner member).

Dr Burke and Mr Mulholland-Licht will be elected by acclamation because of bylaws guarantees.

Following the candidates' remarks, Mr Standen and Dr Buser were presented with gifts and thanks for their service to the Board and the osteopathic profession as their terms concluded.

Voting procedures

Mr Standen summarised the voting procedures, noting that each delegate would be given one ballot for each of their allotted votes.

AOA-US, as the largest osteopathic physician organisation, is guaranteed two seats by the OIA statutes. The AOA-US's designated seat being vacated by Dr Buser will be filled by their designee (Dr Burke), by acclamation, according to the bylaws.

1 Additionally, the OIA bylaws state “the maximum number of Directors shall be nine (9), as
2 established by resolution of the Board. Representatives of all member organisations in good
3 standing shall be eligible for election as directors. Six (6) positions shall be allocated for Full
4 members, and the remaining three can be filled by Associate, Partner or lay members.” Dr Carreiro
5 represents a partner member and Mr Fielding is a lay member, leaving one available seat that can be
6 filled by an associate, partner or lay member. Therefore, in order to remain in compliance with the
7 OIA bylaws, Mr Mulholland-Licht must be re-elected to maintain the requirement of six board
8 members representing OIA full member organisations. The remaining seat will then be filled by the
9 election of one of the three remaining candidates (Ms Catuelle, Mr Hunt or Dr Tooke-Rawlins).

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11 Mr Standen then reviewed the voting structure pertaining to Board elections. The structure is based
12 on membership numbers, where each country delegation has a minimum of two votes. One
13 additional vote is accumulated per every 2,000 members, with no organisation having more than 33%
14 of the total votes. Currently Australia, France, Switzerland, New Zealand delegations have two
15 votes; United Kingdom (delegation shared by the GOsC and the BOA) and Germany (delegation
16 shared by the DGOM, DAAO and VOD) delegations have three votes, and the American
17 Delegation is capped at eight votes, for a total of 21 votes.

18 **Board Election Results**

19 The Full member representatives were given their voting ballots. The elections resulted in Dr Burke
20 being elected by acclamation to his first term. Mr Mulholland-Licht was re-elected to remain in
21 compliance with the OIA bylaws, which require that six (6) Board members represent OIA Full
22 member organisations. Mr Hunt, DO was elected to his first term. All are three-year terms.

23 **General Questions and Answers**

24 **Future AGMs:** Members would like the Board to consider that Partner and Associate members be
25 allowed to vote for their nominees on the Board.

26 Ms Marina Fuhrmann requested the Board to consider adding an additional forum to the
27 programme that would focus on Associations. Dr med Mayer noted that the Board is already
28 looking at revising the conference programme format. Mr Antony Nicholas requested that the
29 Board consider conjoined groups of regulators, educators and associations for future programmes.

30 Members would like the Board to consider that Partner and Associate members be allowed to vote
31 for their nominees on the Board.

32 **Research:** The members asked if the Board has pursued any research. Mr Mulholland-Licht noted
33 that this is an area the Board is trying to address; Ms Fuhrmann urged the Board to keep this topic
34 high on their priority list.

35 The chair thanked the membership for its continued support of the Alliance, and acknowledged the
36 Syndicat National de l'Enseignement Supérieur en Ostéopathie (SNESO) and Syndicat Français Des
37 Ostéopathes (SFDO). for making this Conference a great success. And, thanked the staff for their
38 work and support of this conference.

39 Mr Standen thanked Dr med Mayer for his work as Chair on the Board,
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1 **2013 Annual General Meeting:** Next year's meeting is planned to be held in the United States.

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3 The 2012 Annual General Meeting was adjourned.

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5 *Indicates bylaw-guaranteed seat. Two seats guaranteed for largest osteopathic physician group (Currently
6 AOA-US); one seat guaranteed for largest osteopath group (Currently GOsC).

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8 °Indicates Directors in their second consecutive term on the Board.

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13 See below for Addenda I and II

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Addendum I

Statement of Activities
For the Years 2008 to 23 September 2012

	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
CHANGES IN NET ASSETS	\$86,300.04	\$85,995.51	\$90,907.27	\$127,190.29	\$125,475.72
APPROPRIATED FOR CONTINGENCIES:					
Revenues:					
Membership Dues					
Membership Dues	\$43,608.00	\$52,369	73,443	78,341.11	83,695.00
Conference Fees	14,780.00	0	14,395	0	29,125.00
AOA-US Grant Income	35,620.05 ¹	-	-	-	-
AOA-US In-kind Contribution ⁴	[131,000]	[131,000]	[131,000]	[131,000]	[131,000]
WOHO Bank Transfer					14,651.48
Non Refundable Membership	<u>\$600.00</u>	<u>\$400.00</u>	<u>\$1,175.00</u>	<u>\$1,015.00</u>	<u>\$300</u>
Application Fees					
TOTAL REVENUE	\$94,608.05	\$52,769.00	\$89,013.00	\$79,359.11	\$127,771.48
Expenses:					
Administrative					
Conference Calls	203.00	0 ⁴	430.14	484.10	311.41
Office Supplies	1,160.67	0	740.14	225.87	-
Delivery Service/Postage	0	1.26	26.11	495.34	208.67
Bank Fees	14.35	361.42	-	-	-
Printing	2,483.21	29.85	-	-	622.82
PR Fees					673.03
Legal Fees	1,183.55 ¹	1,269.29	1,791.11	590.00	1387.00
Consulting	7,417.26	9,829.85	7,741.04	7,857.85	4,724.20
Meeting Facilities	43,440.92 ²	5,580.29	6,684.37	17,517.73	8,644.66
Administration staff costs	Not quantified ⁴	Not quantified ⁴	Not quantified ⁴	Not quantified ⁴	-
AOA-US Service Contract	-	-	-	18,000.00	13,500.00
AOA-US In-kind Contribution ⁴	[131,000]	[131,000]	[131,000]	[131,000]	[131,000]
Reserve Fund ⁵	-	-	-	-	TBD
Special Projects Fund					30,000
Board Travel ³	<u>39,009.62</u>	<u>30,785.31</u>	<u>35,317.07</u>	<u>35,902.79</u>	<u>12,020.84</u>
TOTAL EXPENSES	\$94,912.58	\$47,857.24	\$52,729.98	\$81,073.68	\$72,092.63
NET ASSETS	\$85,995.51	\$90,907.27	\$127,190.29	\$125,475.72	\$181,154.57

¹ Charges for tax returns.

² Note: as host organisations, the AOA-US paid for the gala dinner and CCOM provided the conference rooms for the Educational Forum gratis. This also includes the funds paid to the GOsC for the Advancing Osteopathy 2008 Conference.

³ The AOA-US has covered a significant amount of the expenses for its representatives serving on the OIA Board of Directors.

⁴ Approximate dollar amount: The AOA-US has provided in-kind contributions to the OIA in the form of office space, IT, staff and staff travel. The OIA has signed a management contract with the AOA-US to work towards financial independence.

⁵ Reserve fund agreed to in principle to develop reserve/contingency for the Alliance, exact funding to be determined by the Board.

2012 New Members Approved by Full Membership

Full membership:

Medecins Osteopathes De France – Le Syndicat (ODFS) (December 2011)

Contact: Dr Bruno Burel

1 rue de l'Hopital

Rouen 76000

FRANCE

Ph: 33 2 35 70 58 58

Fx: 33 2 35 70 95 62

contact@osteos.net

www.osteos.net

Associate membership

Belgian Society of Osteopathy (SBO-BVO, UP) (December 2011)

Mr Christian Gerard, D.O.

Avenue Charles Madouxlaan, 59

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BELGIUM

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