We come to the close of another year of grantmaking directed by the purpose given to us by Ethel Donaghue — to fund the creation of new knowledge that will be used to improve health. Miss Donaghue gave her trustees an option to consider the use of unusual and non-standard grantmaking activities. As a relatively small foundation, we therefore consistently face the challenge of how to best fulfill her wishes with our limited resources.

During the past few years, we’ve worked with a number of other funders. These collaborations have afforded us the opportunity to stretch our dollars and gain access into arenas that we might not otherwise go by ourselves. As you read the descriptions of the new grants made in 2012, you’ll see that each was made with another funder. We’ve learned that to do this well we need to trust our partners, be flexible and open to new ideas.

You’ll also be reading about other alliances that we’ve help to forge through our new grant program R3 — Making Research Relevant & Ready. (Although the R3 grants were awarded in 2013, much of the work to develop and implement this new grant program was done in 2012.) Of interest is the fact that many of the researchers who received an R3 award have communicated that their partnering with a business consultant to move their research to the next level took them out of their comfort zone, and yet they are enthusiastic about the possibilities for their research to move to the next level.

In closing, we’d like to acknowledge the contribution to Donaghue of our many advisers and friends. Our work would not be possible without the guidance and assistance from so many individuals. Some of these individuals are named in our list of committee members, while many others who share their expertise and time with us are not listed. Our heartfelt thanks go to all of you.
The search for knowledge by Donaghue-funded scientists has been made possible by the beneficent vision of Ethel F. Donaghue, who died in 1989 without immediate family to inherit her fortune of about $60 million. Miss Donaghue was one of Connecticut’s first woman lawyers, having earned degrees from the law schools of both the University of Pennsylvania and New York University by 1922, but her wealth did not derive from the practice of law. She was required to close her Hartford practice early to care for her ill mother, Catherine, and manage the family finances, which were extensive as a result of the shrewd entrepreneurial spirit of her father Patrick, an Irish immigrant to Hartford in the late 1800s. Patrick had died in 1910 of heart disease, when Ethel was only fourteen, and Catherine succumbed to cancer in 1933. Although Miss Donaghue enjoyed enviable wealth and was able to travel widely for many years, she lived those years alone in her West Hartford mansion, with only household help for companionship. Spurred on by living through several family health problems and outliving her entire immediate family by over three decades, Miss Donaghue developed an abiding interest in health care and research. She often contributed to hospitals and established two trusts during her lifetime to support research. Her commitment to advancing human health culminated in a trust created under Article Fourteenth of her will and devoted the bulk of her estate to The Patrick and Catherine Weldon Donaghue Medical Research Foundation, which honors the memory of her parents.

The testamentary intent of Ethel Donaghue is the immutable mandate for the Donaghue Foundation trustees. Miss Donaghue said in her will that her trustees should seek out useful health knowledge through research, and she gave them permission to undertake unusual and non-standard activities in furtherance of her purpose. Therefore, a frequent question in trustee discussions of policy and program design is “What would Miss Donaghue do, were she here and in possession of the facts we have?”

Phrases from the purpose statement of Miss Donaghue’s will can be found on the pages throughout this report.

Vision Mission Goals

VISION STATEMENT
We envision continual improvement in people’s health as a result of research being converted to practical benefit.

MISSION STATEMENT
We will be an imaginative, collaborative and engaged participant in the process that begins with rigorous health research and ends in realized health benefits and by doing so give the vision of Ethel Donaghue its best expression.

GOALS
1. Promote knowledge uptake of health research into the realms of health care delivery, practice, and policy.

2. Advance the Foundation’s mission by collaborating with people and organizations that have the opportunity and responsibility to improve health.

3. Ensure that our grantmaking programs are structured to support rigorous research that more directly leads to a positive impact on health.

4. Identify and support researchers and organizations whose work encompasses the principles of knowledge uptake.

5. Build networks and collaborations to test innovative ideas related to grant-making and health research.

6. Contribute to efforts, both internal and external to the research enterprise, that optimize the capacity of health research to address the needs of policymakers, practitioners, and consumers.

VALUES
Steadfast in our commitment
Principled and practical
Engaged to the point of effect
Respectful and reflective
### 2012 Committees

#### Policy Advisory Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michael Rion</td>
<td>Chair, Principal, Resources for Ethics and Management, West Hartford</td>
</tr>
<tr>
<td>Nancy Angoff, MD, MPH</td>
<td>Associate Dean, Yale School of Medicine, New Haven</td>
</tr>
<tr>
<td>Cheryl Beck, DNSc</td>
<td>Professor, University of Connecticut, Tolland</td>
</tr>
<tr>
<td>Carrie Brady, JD</td>
<td>Healthcare Consultant, Wilton</td>
</tr>
<tr>
<td>John Charde, MD</td>
<td>Medical Director, Senior Whole Health, Salisbury</td>
</tr>
<tr>
<td>Lisa Davis, RN, BSN, MBA</td>
<td>Deputy Commissioner, State of Connecticut Department of Public Health, Glastonbury</td>
</tr>
<tr>
<td>Bruce Gould, MD</td>
<td>Associate Dean, University of Connecticut School of Medicine, West Simsbury</td>
</tr>
<tr>
<td>Marie Massaro</td>
<td>Massaro Consulting, Wethersfield</td>
</tr>
<tr>
<td>Dennis May</td>
<td>CEO, Connecticut Hospital Association (Retired), Guilford</td>
</tr>
</tbody>
</table>

#### R3 – Making Research Relevant & Ready

<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Affiliation</th>
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</thead>
<tbody>
<tr>
<td>Konstantine Drakonakis</td>
<td>Director, New Haven Office, Launch Capital, LLC</td>
</tr>
<tr>
<td>Marie Massaro</td>
<td>Massaro Consulting, Philanthropy &amp; Community Affairs, Member, Donaghue Policy Advisory Committee</td>
</tr>
<tr>
<td>Veronica Niewa, PhD</td>
<td>Vice President, Westat Project Director, AHRQ Innovations Exchange</td>
</tr>
<tr>
<td>Laurel Pickering, MPH</td>
<td>President &amp; CEO, Northeast Business Group on Health</td>
</tr>
<tr>
<td>C. Todd Staub, MD</td>
<td>Board Chairman, ProHealth Physicians</td>
</tr>
<tr>
<td>Eleanor L. Tandler</td>
<td>Founder &amp; CEO, NovaTract Surgical</td>
</tr>
<tr>
<td>Julio Urbina, MPH, PhD</td>
<td>Director, Health Aging Program, Vice President, Samuels Foundation</td>
</tr>
</tbody>
</table>

#### Voice of the Patient Lecture Series Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Affiliation</th>
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</thead>
<tbody>
<tr>
<td>Judith Kunisch, MBA</td>
<td>Chair, Yale School of Nursing Lecturer</td>
</tr>
<tr>
<td>Ray Andrews</td>
<td>Donaghue Foundation Trustee, retired</td>
</tr>
<tr>
<td>Nancy Angoff, MD, MPH</td>
<td>Yale School of Medicine, Associate Dean of Student Affairs</td>
</tr>
<tr>
<td>Linda Pellico, PhD, MSN</td>
<td>Yale School of Nursing, Associate Professor</td>
</tr>
<tr>
<td>Sheilah Rostow</td>
<td>Bank of America, Donaghue Foundation Trustee (Retired)</td>
</tr>
<tr>
<td>David Smith, PhD</td>
<td>Yale University, Senior Scholar in Theology &amp; Medical Ethics</td>
</tr>
</tbody>
</table>
2012 Awards

2012 NEW AWARDS
FUNDING PARTNERSHIPS
David Auerbach, PhD
Rand Corporation
The Future of Nursing: Primary Care Workforce Requirements
With The Robert Wood Johnson Foundation’s INQRI program

Elizabeth Bradley, PhD and Leslie Curry, PhD
Yale University School of Medicine
Hospital Strategies to Reduce Risk Standardized Mortality for Patients with Heart Attacks
With the Commonwealth Fund

Ellen Magenheim, PhD
Swathmore College
Fighting Viruses with Viral Marketing:
Using online social endorsements
With The Robert Wood Johnson Foundation

Judd Kessler, PhD
University of Pennsylvania
Using Behavioral Economics to Promote Medication Adherence
With The Robert Wood Johnson Foundation

PRACTICAL BENEFIT INITIATIVES
Neuroscience 2012: Individual Differences, Mental Illness, and Recovery
Yale School of Medicine

2012 CONTINUATION AWARDS
FUNDING PARTNERSHIPS
Connecticut Health Care Survey
University of Massachusetts School of Medicine
With The Aetna Foundation, the Child Health and Development Institute, Connecticut Health Foundation, The Foundation for Community Health, and the Universal Health Care of Connecticut Foundation.

PRACTICAL BENEFIT INITIATIVES
Jeannette Ickovics, PhD
Yale University School of Medicine
CARE: Community Alliance for Research and Engagement

Multiple Myeloma Research Foundation
Myelin Repair Foundation

PROGRAM FOR RESEARCH LEADERSHIP
Terri Fried, MD
Yale School of Medicine
Development and Implementation of Patient-Centered Guidelines

Robert D. Kerns, PhD
Yale University School of Medicine – VA Connecticut Healthcare System
Implementing a VA Stepped Care Model of Pain Management

Harlan M. Krumholz, MD
Yale School of Medicine
Hospitalomics: A system-based approach to hospital performance

GRANT PROGRAMS
Program for Research Leadership
The Program for Research Leadership is a team-based award that supports research that has the potential for making a direct, near-term impact on improving public health, clinical practice, or community health interventions; related knowledge uptake activities; and activities to create a learning environment among the team. Awards will be up to $200,000 a year for four years.

Practical Benefit Initiatives
The Foundation initiates research projects in an interactive process with prospective investigators, and funding is based upon promise of practical benefit to human life. This program is not currently open for new initiatives.

Funding Partnerships
In a variety of initiatives, Donaghue partners with other funders to leverage its resources.
Applying Behavioral Economics to Perplexing Health and Health Care Challenges
Our interest in behavioral economics — the blend of traditional economics and psychology that underscores the irrational nature of our decision making — was piqued at the 2010 Beyond Eureka! conference featuring Dan Ariely’s description of how many decisions we make that impact our health are done in unconscious or irrational ways. A more complete understanding of how the structure of human interactions shapes our decisions, often in ways that we don’t recognize, can play an important part in solving health care problems in clinical and community settings. Therefore, when the opportunity came up to partner with the Pioneer Team of The Robert Wood Johnson Foundation to fund two rounds of medical research that focus on behavioral economics, we signed up.

The first year of this grant program, Applying Behavioral Economics to Perplexing Health and Health Care Challenges, was focused on interventions that targeted obesity reduction and consumer engagement. The program received 330 responses, from which 25 finalists were selected and then eight awards were made.

- Anne Thorndike, Massachusetts General Hospital, Feedback, incentives and point-of-purchase interventions to engage employees in healthy eating behaviors
- Elizabeth Merrick and Dominic Hodgkin, Brandeis University, Using novel patient financial incentives to improve uptake of routine mammography
- Ellen Magenheim and David Huffman, Swarthmore College, Fighting viruses with viral marketing? Using online social endorsements to enhance incentives to sign up for flu vaccinations
- Gretchen Chapman and Elliot Coups, Rutgers University and University of Medicine and Dentistry New Jersey, Walking with prospect theory
- Judd Kessler, Eric Zwick and Dmitry Taubinsky, University of Pennsylvania and Harvard University, Using behavioral economics to promote medication adherence and habit formation
- Justin Sydnor, Heather Royer and Mark Stehr, University of Wisconsin, University of California and Drexel University, Improving the structure of financial incentives for exercise: insights from behavioral economics
- Karen Glanz and Jason Karlawish, University of Pennsylvania, Social goals and individual incentives to promote walking in older adults
- Paul Resnick and Caroline Richardson, University of Michigan, Impacts of public announcements of goals and outcomes on goal completion

Although for administrative ease, two teams of researchers were randomly selected to receive the Donaghue funds, all grantee teams are part of The Robert Wood Johnson Foundation/Donaghue Foundation Applying Behavioral Economics to Perplexing Problems in Health and Health Care initiative, receive the same benefits, and are subject to the same reporting requirements and expectations, including participating in a conference of awardees to learn about their research findings.
Future of Nursing Campaign for Action Research Agenda is a unique, multi-funder initiative that is creating opportunities for research studies to identify, generate, synthesize and disseminate evidence essential to informing the efforts to implement recommendations outlined in the Institute of Medicine report “The Future of Nursing: Leading Change, Advancing Health,” the IOM’s most frequently downloaded report. The Robert Wood Johnson Foundation developed and is coordinating this initiative to focus national attention on a common research agenda related to the IOM recommendations by funding activities across a range of nursing research.

We were attracted to participating in this new funding model because it holds potential for bringing individual scholars and funders into a marketplace of research ideas. This marketplace can reduce the administrative costs for both applicants and funders and provide a hub to explore shared interests.

Through this initiative, Donaghue partnered with INQRI — Interdisciplinary Nursing Quality Research Initiative — to fund a work force analysis by David Auerbach, PhD of RAND. Most policy analysts agree that the U.S. health care system needs more primary care providers, that this need will increase significantly in the coming years, and that nurses can play a significantly expanded role in meeting these needs. In addition, new models of providing primary care, such as medical homes and nurse-managed health centers, can alter the number of nurses that could be used in primary care settings. Dr. Auerbach's analysis will describe the future workforce requirements for nurses using different models of providing primary care.

Hospital Strategies to Reduce Mortality for Patients with Heart Attacks
The Commonwealth Fund and Donaghue are partnering to award a grant to Yale University’s School of Epidemiology and Public Health for a mixed-methods study on improving treatment of acute myocardial infarction in hospitals nationwide; this award is led by Elizabeth Bradley, PhD and Leslie Curry, PhD. The Commonwealth Fund will support the majority of this three-year project, and Donaghue is funding the last phase of the study that will take a concentrated look at the most successful hospitals to understand how they are able to change key strategies, particularly those related to internal organizational environment, so that their success stories may be more broadly replicated. Underscoring our interest in this partnership is the fact that this grant will bring more attention to the role that context plays in the broad adoption of research-based interventions aimed at improving health.

Neuroscience 2012: Stress, Recovery, and Wellness
Donaghue provided modest support for a partnership that began over twenty years ago with the Yale School of Medicine Department of Psychiatry, Connecticut Department of Mental Health and Addiction Services, and Connecticut NAMI (National Alliance for the Mentally Ill) for a conference held on a Saturday morning that brings promising research findings, in non-technical language, to mental health consumers, their families members, and community providers.
This year, Donaghue developed a new grant program called R3 — Making Research Relevant & Ready.

R3 was created to help promote the knowledge gained from Donaghue-funded research so that it will improve health. The Foundation’s intent with R3 is to assist researchers to better position the health interventions they develop so that they can grow and be sustained following the completion of the research phase. The program recognizes that expertise from disciplines outside those traditionally eligible for research funding is needed for scaling, dissemination, and sustainability of evidence-based programs and practices.

R3 grants provide researchers with financial support to access those experts. The funded projects will help the researchers to achieve new understanding, tools or plans to make progress in preparing their health interventions for adoption and use.

Six awards were made in 2013 and each grantee received $55,000 to conduct their project over an 18 month period. Donaghue will convene the grantees, their consultants, and the R3 Advisory Committee for two gatherings to learn how the projects are proceeding. We hope grantees and consultants will learn from each others’ experiences, and our advisers will assist us in thinking about how to shape the next R3 grant program. Donaghue also expects to learn about research from this program, so we know it will help us be smarter in our future research grant programs.

Nancy Berlinger, PhD
The Hastings Center
“Reaching Non-Self Identifiers: Marketing the Hastings Guidelines to health care professionals outside end-of-life networks”

BWB Solutions, project consultant

Based on 2006 Donaghue research grant of $180,000 for updating and expanding the “Guidelines on the Termination of Life-Sustaining Treatment and the Care of the Dying,” originally developed in 1989.

Using prospective user research, the project seeks to expand the use of the guidelines to practitioners who care for patients who are facing decisions about life-sustaining treatment or nearing the end of life but do not view themselves as providing end of life care. The results will be used to develop and pilot a web-based Guidelines implementation toolkit tailored for these audiences.

Michelle M. Cloutier, MD
Connecticut Children’s Medical Center
“Payer-Provider Portal to Enhance Easy Breathing Adoption”

Rising Tide Health, Project consultant

Based on 1998 grant of $1,200,000 to test effectiveness of a best-practice model for asthma diagnosis and treatment in Hartford pediatric health clinics.

The project will develop and pilot a payer-based provider portal as the vehicle to integrate a web-based Easy Breathing application with multiple EHRs.
“…to promote medical knowledge which will be of practical benefit…”

Judith Fifield, PhD
University of Connecticut Health Center
“Translating Sister Talk for Dissemination in New York City”

Wellspring Consulting and Burke PR, project consultants

Based on 2002 grant of $900,000 to test effectiveness of a faith-based healthy lifestyle-weight loss program, developed and tested collaboratively by researchers, hospital leaders and the leadership and volunteers of 12 African-American churches.

The project will adapt and rebrand SisterTalk in a collaboration with Emblem Health, one of New York’s largest health plans, to meet the expectations, motivations and needs of Emblem and its members in target neighborhoods in Manhattan.

Linda Mayes, MD and Lois Sadler, PhD
Yale School of Medicine, Child Study Center
“Minding the Baby Home Visitation Program: Transitioning from research to service”

Frameworks Institute and RPM Health, project consultants

Based on 2005 grant of $240,000 to conduct a phase II pilot study of Minding the Baby® home visiting intervention program effectiveness in improving health and life course of young first-time at-risk mothers, their children, and families.

This project will assist Minding the Baby® developers in determining the program’s readiness to transition from a research program to a service program with the potential to sustain itself and grow.

Sharon K. Inouye, MD, MPH
Institute for Aging Research, Hebrew SeniorLife
“HELP 2.0 — Relevant, ready and reachable”

Steady Vision, project consultant

Based on 1998 Donaghue Investigator Award of $595,000 that helped to develop the HELP Dissemination Program and original website (HELP, the Hospital Elder Life Program, is an innovation model of care designed to reduce delirium and functional decline of older inpatients).

The project will redesign and re-launch HELP’s decade old website to advance the spread of the Hospital Elder Life Program by providing enhanced functionality and more robust support to current and prospective user hospitals, interested seniors, family members, and caregivers.

Diane E. Meier, MD
Center To Advance Palliative Care
“IT Enhancement/Integration for the National Palliative Care Registry™ — Data drives access to quality”

DatStat, project consultant

Based on 2008 grant of $210,363 to CAPC to collect and analyze data associated with successful hospital palliative care in order to develop the National Palliative Care Registry™ a repository for benchmarking and comparing hospital-based palliative care programs.

This project will provide resources to undertake fundamental technical improvements to CAPC’s National Palliative Care Registry™ so it can produce reliable, web-based, scalable systems and immediate real-time results reporting for hundreds of users simultaneously for a growing and diverse set of users in multiple clinical and community palliative care settings.
frustration among those who fund research because so few are able to gain widespread traction outside the research community. The standard closing lines of many journal articles that say “more research is needed” may be true, but increasingly those who pay for that research are feeling that “more implementation is needed” is equally true.

Beyond Eureka! 2012

Emotions and context — these are the things that dictate how we perceive risk, according to the two speakers at the Foundation’s BeyondEureka! conference in May 2012. The Foundation’s seventh conference focused on the topic of how we evaluate risk and how our perceptions of risk shapes our health.

David Ropeik — journalist, blogger, consultant, and author of How Risk Is It Really, Why Our Fears Don’t Match the Facts — explored the way our brains are hard-wired to respond to risky situations with emotion first and reason second. He stated that the greatest risks we face as a society is the “perception gap” that prevents us from taking the actions that we should take based on the facts. However, we can make smarter choices for ourselves by acknowledging that our fear response is real and then putting that into perspective with what we know about the issue.

Using stories of four individuals facing treatment decisions about different clinical conditions, Brian Zikmund-Fisher, PhD, assistant professor of health behavior and health education at University of Michigan, spoke about how poorly risk information about healthcare treatment decisions is often communicated. These stories illustrated the kinds of issues that we have to face in managing risk and navigating the decisions we face in the health care system. Zikmund-Fisher advocated the use of icon arrays, pictures that show the proportion of individuals who are and who are not affected by a particular treatment outcome as useful in making our personal risk calculations.
Sue Sheridan, Deputy Director of Patient Engagement for PCORI (Patient Centered Outcomes Research Institute) was the speaker for the fifth and last Andrews Lecture on The Voice of the Patient. In addition to Sheridan’s discussion on the “Courage, Passion and Power of Partnerships,” Mark Mercurio, MD and Moreen Donahue, DNP, RN participated in a panel discussion with Sheridan.

Sheridan discussed her experiences as co-founder of Consumers Advocating Patient Safety, leading the Parents for Patient Safety Initiative at the World Health Organization, and her current work at PCORI to engage patients in helping to establish research priorities, review grant proposals, partner with researchers in designing and conducting research, and develop effective methods to communicate research results to healthcare providers and consumers.

The Andrews Lecture Series was inaugurated in 2008 to honor Ray Andrews as the Donaghue Foundation’s individual trustee from 1993 through 2007. Because of Ray’s interest in making sure that the voice of the patient is heard by those in clinical research and practice, the lecture series has sought to inform and educate by addressing the patient’s experience from a variety of perspectives.
The Patrick and Catherine Weldon Donaghue Medical Research Foundation

2012 GRANTS

<table>
<thead>
<tr>
<th>Institution</th>
<th>New</th>
<th>Continuation</th>
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<tr>
<td>Multiple Myeloma Research Foundation</td>
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<td>Myelin Repair Foundation</td>
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<td>University of Massachusetts School of Medicine</td>
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<td>University of Pennsylvania</td>
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<tr>
<td>Yale University School of Medicine</td>
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<tr>
<td><strong>Total</strong></td>
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Funds Awarded by Grant Program for Grant

- **Funding Partnerships**
  - New (4) $224,670
  - Continuing (1) $17,000

- **Practical Benefit Initiative**
  - New (1) $7,550
  - Continuing (3) $304,850

- **Program for Research Leadership**
  - New (0) $0
  - Continuing (3) $560,000

**Total** $1,114,070

2012 FINANCIALS

- Investment in marketable securities $63,547,624
- Cash and cash equivalent $265,602
- Other assets $49,645
- Total assets and fund balance $63,862,871
- Income $1,484,283
- Expenditures

  - Program Grants
    - Practical Benefit Initiatives $312,400
    - Program for Research Leadership $560,000
    - Funding Partnerships $241,670
    - Subtotal $1,114,070
  - Program support and Foundation-administered projects $330,062
  - Management and General $459,962
  - Investment Management $190,564
  - Total Expenditures $2,094,659

Note: In addition to these expenditures, an estimated amount of up to $1,529,850 has been earmarked for future spending in support of ongoing grants.

The figures listed above are unaudited. Fair market values are approximate.

“...for the preservation, maintenance and improvement of human life.”
Ethel Donaghue’s legacy would be even more meaningful if her Foundation’s efforts prompted others to support health research as a part of their own philanthropic planning. The Donaghue Foundation supports the work of Leave a Legacy Connecticut and encourages people to include charitable bequests for health research purposes in their wills. While the Foundation will accept additional funds itself only if they are solely and expressly for Miss Donaghue’s own testamentary purpose, we do believe strongly in the public value of committing private sector resources to the ongoing cause of health research.

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