As most of you know, NAMI Texas has been struggling financially, and continues to do so. Every day we work tirelessly to identify new sources of funding on top of our already existing commitments, but finding funds to support our operating expenses continues to be a challenge. So where do we go from here?

Each of us personally knows why NAMI Texas must continue to exist. At one point, each of us has been hopeless and felt lost while attempting to navigate the mental health system, or lack thereof. Over the years, we have known that, through the work of NAMI, we together change lives, impact policy, change law, and change the future. We also know that we are far from done.

I tell you about our financial struggles because one person cannot solve this situation. As we have in the past, we must unite and solve this problem together. In a recent article in the Financial Times, Lauren Foster points out that, “unlike other medical charities that benefit from big-time charities… non-profit organizations dedicated to helping people with mental illness are neglected. Even though mental illness is more prevalent than cancer and diabetes, non-profit organizations that aim to serve people with mental illness and family members who support them remain hand-to-mouth organizations.” Of course, this statement comes as no surprise to NAMI.

This Annual Report tells the story of what NAMI Texas has been able to accomplish with the hard work and cooperation of our Affiliates, despite our financial constraints. I want you to look through these pages to see the impact of our efforts. We have accomplished phenomenal things during a year that was pressed for money; imagine what we could achieve when more financially stable! The transformation over the past two years is clear and 2008 is a year for all NAMI members to unite and work together to stay alive and support each other.

With our economy suffering, NAMI Texas will have to become creative. Our Board is reinstating our annual giving campaign. Our NAMI Texas staff will continue to work on grants. Our affiliates will continue to walk across our state. We will all continue to educate and speak out to the public and policy makers about mental illness and recovery. And we will all continue to be the support system that each of us needs to get through the day, bringing hope to Texans one Texan at a time.

--- Donna Fisher, Board President

The early treatment success rates for mental illnesses are 60-80 percent, well above the approximately 40 to 60 percent success rates for common surgical treatments for heart disease.
enough of that all those years that I spent in and alone or feel isolated from the world and had hadences and hopes. I did not and do not want to be opportunity to feel safe enough to express our experi-
This is an important time in NAMI history. We want people with mental illness to live outside of a hospital, right? We want our loved ones and our peers to participate in life, outside of a mental hospital or halfway house. I was in a hospital over 30 times in the 80’s and early 90’s, and each time I left, I went home to no supports. Since I have worked at NAMI and learned the history of treatment for mental illness, I see that I too was a victim of deinstitutionalization without community supports.

For 14 years, I had suffered with symptoms, never receiv-
ing treatment that worked,

NAMI Texas, bringing hope to Texans coping with mental illness one Texan at a time.

until I started the new generation medications. I had the typical symp-
toms delusions and the need for isolation. For too long I lived in a separate world: separate because of the effects of my illness, sepa-
rate because of the stigma of mental illness and separate from a world that operated in “normality”. How could I communicate with anyone while I was hearing voices that were not there, saw things and people that did not exist and uttered nonsensi-
cal sentences? How could I connect with anyone at all? Other than the medical professionals and some educated lay people that had studied the symptoms of mental illness, particularly SERIOUS mental illness, no one was able to relate to me.

This is where NAMI comes in: my recovery is based on the relationships we share with one another. In this sharing, we are given the oppor-
tunity to feel safe enough to express our experi-
ences and hopes. I did not and do not want to be alone or feel isolated from the world and had had enough of that all those years that I spent in and transition from inpatient care to life in this big and often scary world. Now is the time to reach out to those who are newly diagnosed and their family members. Now is the time to ask for support if you need it or offer support to someone else in need. Now is the time for NAMI to be the complement and the supplement to our mental health system. (Now is the time to renew your membership if it has expired!)

I worked at NAMI Texas for 8 years, and recently made the difficult decision to move forward and develop my own job. My focus will be to spread the message of “EXPECT RECOVERY!”. I have seen that if I concentrate on the end product and listen to my intuition and follow my instincts to be a successful advocate, the growth of EXPECT RECOVERY! will unfold.

With each new obstacle I confront and overcome, I am even more grateful for my success. I have relied on my NAMI family to motivate myself to accomplish any task. The important thing to remember RIGHT NOW is that we are all in this together. No one recovers alone. Every human being on this planet needs healthy relationships. This is what NAMI offers all of us—the unique and special relationships we share.

Something people don’t know about me is that I am only just now becoming brave enough to share my story with my non-NAMI friends. My hope is that I can empower myself even more to reach out to the uneducated and spread the message that recovery is indeed possible IF the person with mental illness can access services!

And here is something I often will share with oth-
ers when I speak:

My mental illness was not and is not now the es-
\mence of who I am as an individual. I am so much
more than my brain disorder. This is what I want so much for others like me. I want others to have more happy days than difficult days. I want others to have a wonderful home, a fantastic partner, 2 dogs and 3 cats, a car, lots of friends, invitations to social events, laughter, a church family and a meaningful and productive life!

Please pass the word on that recovery is indeed possible for persons with mental illness. My ex-
\pections of myself changed when I began to get
well, when my brain cleared and my mood stabi-
lized and when I finally had the support I needed to maintain wellness. I went from expecting nothing to expecting recovery. Others can do the same. However, they cannot do it alone. Take some time from your busy days to pray and send healing energy to this group of people. Don’t feel sorry for them, feel hopeful that they too can have happi-
ness, EXPECT recovery for them.

For more information on Expect Recovery visit: expectrecovery.com

$79 billion

The annual economic, indirect cost of mental illnesses.

Most of that amount – approximately $63 billion – reflects the loss of productivity as a result of illnesses.
Educating Texans

In Our Own Voice

In this program, a team of two people who are living successfully with a mental illness are trained to talk about their experiences. Interpersed with their talk is a short video. The program is interactive, and the audience is encouraged to comment and ask questions. The topics covered in this curriculum are Dark Days, Acceptance, Treatment, Coping Skills, and Finally Successes, Hopes, and Dreams. In Our Own Voice is a young program for NAMI Texas and has already grown tremendously. Currently, five affiliates offer In Our Own Voice. By the end of 2007, NAMI Texas had 38 active presenters. These 19 teams gave 26 presentations to over 515 individuals from the community, who now have a better understanding of what it is like to live with a mental illness. The presentations encompassed key groups that interact with our love ones daily. Some of these groups include Sheriff’s Departments, Colleges, Adult Protective Services, Crisis Intervention Teams, Veterans Affairs, and the Mental Health Task Force. In 2007, NAMI Texas held one IOOV training, which resulted in 16 new presenters for our state.

“IOOV is a program that brings me full circle with my disability. I believe I offer hope by being an example of one person’s view on mental health recovery. It’s shown me I have a purpose in life: to help others better understand mental illness, their own and/or some one else’s.”

-- Ana Maxwell, IOOV Presenter

Family-to-Family

This year has been an amazing year for the NAMI Texas Family-to-Family group. Family-to-Family is a free 12-week course for family caregivers of individuals with severe mental illnesses that discusses the clinical treatment of these illnesses and teaches the knowledge and skills that family members need to cope more effectively. As the year 2007 comes to a close, NAMI Texas has 215 active Family-to-Family teachers across the state. As a result, our Affiliates held 29 classes in 2007, offering hope, knowledge, and support to over 330 family members. Two of these classes were in Spanish. Over 1,000 hours were volunteered by our Family-to-Family teachers. Four Teacher Trainings were also held, bringing 47 more active teachers into our family.

We look forward to continuing this growth. Twenty-five classes and five Teacher Trainings are already scheduled for 2008 and NAMI Texas will be sending four teachers to be trained as State Trainers in April, 2008.

“Peer-to-Peer is a NAMI National consumer education program started in Texas in 2007. Taught by consumers, this program offers phenomenal support and education for consumers and covers topics including individual relapse prevention planning, debriefing/storytelling, and developing advance directives for psychiatric care. NAMI Texas held its first Peer-to-Peer teacher training in November of 2006. Our first fifteen individuals were trained as Peer-to-Peer mentors. Working in teams, these fifteen teachers went on to teach seven classes in 2007. In 2008, NAMI Texas has already held one training in Peer-to-Peer, which trained 14 mentors. NAMI Texas looks forward to expanding this program in the coming years.

“Visions for Tomorrow consists of a series of workshops for direct primary caregivers of children and adolescents with brain disorders. This program reviews childhood diagnoses, provides the basics for day-to-day care giving skills, and offers caregivers an opportunity to share mutual experiences and learn valuable lessons from one another. VFT now has over 250 teachers trained across the country and is now also represented in Mexico and Jamaica. In the state of Texas, we have 50 teachers and we had 10 family trainings in 2007, reaching over 100 parents in need. Outside of Texas, there were 22 Family classes reaching 225 parents.

The VFT Professional In-Service is a recently implemented key component of the VFT series and has already been offered in Dallas at the Dallas Juvenile Center and to the Department of Family and Protective Services in San Antonio. VFT Professional In-Service is a fee based program that allows NAMI TX and its affiliates to significantly expand its outreach to other agencies and organizations by educating professionals about mental illness and the needs of families. The fees charged for these In-service Professional trainings provide NAMI Texas and our affiliates funds to help support our other educational programs for consumers and families. In 2008, we are starting with a bang, with the program already having grossed $15,000.00 in January alone. This includes new Professional In-service trainings and family classes being offered at the Harris County Mental Health Mental Retardation Authority, the SAMHSA funded Systems of Care In Action for Families and Children, in Houston, and employee trainings for Travis County Juvenile Probation.

“A wealth of information. The personal stories made it very real. Highlights: the importance of a solid base of knowledge, together with empathy.”

-- VFT Professional In-service Systems of Care Participant

“The teaching support team leading the class were awesome – couldn’t begin to imagine better instructors.”

-- P2P class participant
Faith Based Outreach

“NAMI GFC benefited from the NAMI Texas Faith Based grant. We had wanted to do another training for churches on mental illness for over 4 years, and this grant pushed us into action.”

-- John Hostetler, Faith-based outreach participant

“I became involved because of my personal experience in learning how to face the challenges that came into my and my husband’s life with my son’s bipolar disorder. For any loved one of a consumer, it is a very difficult journey. My most impressive experience in becoming involved with this initiative is the Seminars which are provided for ministers! It is so comforting to see Pastors and Ministers desire to educate themselves about this devastating illness and become aware of their need to support families. Hope and faith have an impact on families and as we are given the opportunity to share our faith in the wondrousness of God, this has given many of us the strength and determination we need to go forward and meet the challenges!”

-- Carmen Ortiz, Faith-based outreach participant

In 2007, NAMI Texas received a $25,000 grant from NAMI National to implement a faith-based outreach program targeting minority populations. NAMI Texas used these funds to support six Affiliates who submitted proposals to NAMI Texas for funding faith based outreach activities. The six Affiliates chosen were NAMI San Antonio, NAMI Metropolitan Houston, NAMI Houston, NAMI Grayson, Fannin, Cooke, NAMI Southern Sector Dallas and NAMI Austin.

Two of these Affiliates, NAMI San Antonio and NAMI Metropolitan Houston, had begun implementing their faith based outreach in 2006, through a NAMI Texas grant made possible by the National Endowment.

In 2007, they received a total of $10,000, which allowed them to strengthen and continue their work. NAMI Metropolitan Houston targeted the African American faith community, and NAMI San Antonio targeted a cross section of faith communities, primarily Hispanic. The other four Affiliates each received $1,000 to support their efforts. A variety of approaches were used, with very successful results. As a final grant activity, a retreat for all the grantees was held on October 31, 2007 and the materials used in all the outreach and education activities were evaluated and reviewed. The results will be organized into a Faith Based Outreach toolkit, for use by NAMI Affiliates in Texas and elsewhere.

A key component of this grant included a Multi-Cultural Competency Training sponsored by NAMI Texas. Ma- Jose Carrusco, Director of NAMI

The results will be organized into a Faith Based outreach in and the materials used in all the outreach and for all the grantees was held on October 31, 2007. All those in attendance in Track One received a free copy of the 3rd Edition of Criminal Competency Proceedings and the Insanity Defense. The Hon. Polly Jackson Spenser presented on the Texas Code of Criminal Procedure Chapters which pertains to criminal competency proceedings and the insanity defense. All those in attendance in Track One received a free copy of the 3rd Edition of Criminal Competency Proceedings and the Insanity Defense, published by NAMI Texas with the support of the Texas Bar Foundation.

In 2007, for the very first time, NAMI Texas submitted to the Texas Center for the Judiciary a proposal to provide training on mental health topics at their Annual Conference for the judiciary, held last September in Galveston. Our proposals were accepted, and two different mental health tracks were provided, with four presentations.

In Track One, Prof. Brian Shannon, Kevin Keating and David Gonzalez presented on Criminal Competency Proceedings and the Insanity Defense. Prof. Shannon is Associate Dean of the Texas Tech University School of Law. Kevin Keating works at the Harris County District Attorney’s Office. David Gonzalez is a criminal defense attorney. This presentation reviewed the Texas Code of Criminal Procedure Chapters which pertains to criminal competency proceedings and the insanity defense. All those in attendance in Track One received a free copy of the 3rd Edition of Criminal Competency Proceedings and the Insanity Defense, published by NAMI Texas with the support of the Texas Bar Foundation.
Advocating for Texans, cont.

Advocacy for Choice

In late 2006, the Texas Department of State Health Services initiated a collaborative effort to address the states mental health authority and provider functional areas, which has been a topic of debate in Texas for over a decade. In accordance with Governor Rick Perry’s Executive Order RP45, which reinforced current law under HB2292’s provider-of-last-resort provision, a negotiated rule making process was initiated. A Provider of Last Resort Negotiated Rule Making Committee was appointed by DSHS and included consumers, family-members, mental health advocates, private providers, representatives of Mental Health Authorities (MHAs), rural and urban county judges and commissioners, and a representative from DSHS. Robin Peysen was appointed as one of the advocates.

The Report, completed in early 2007, included language agreed upon by all participants. The rule act as a roadmap for implementing the provider of last resort intent, which protects consumer choice as a priority, protects the local safety net from continuity of services, and recognizes local differences between available provider networks in rural and urban communities. Based on the House Policy Dispute Resolution (POLR) process, the POLR recommended to the Governor that the final rule be approved as written and submitted to the Legislative Council for review.

The process was facilitated by representatives from the University of Texas at Austin and the Texas A&M Health Science Center College of Medicine. The NAMI staff to “walk the halls” of the Capitol educating legislators about critical mental illness issues in our state. We collaborated with other advocacy organizations to strengthen our message, and NAMI, in particular, has been a leader in helping the veterans who come in contact with the Texas Criminal Justice System.

We provided testimony throughout the session, and many NAMI Affiliate members joined NAMI staff to “walk the halls” of the Capitol educating legislators about critical mental illness issues in our state. We collaborated with other advocacy organizations to strengthen our message, and NAMI, in particular, has been a leader in helping the veterans who come in contact with the Texas Criminal Justice System. After many ups and downs, NAMI Texas was successful in achieving our top priority. The 80th Legislature appropriated $82 million for Crisis Redesign for the FY 08-09 biennium. These funds will allow DSHS to provide recommended crisis services, including a 24-hour crisis hotline, mobile crisis outreach services, up to 48 hours extended observation psychiatric emergency services, crisis outpatient services, community crisis rural services, and crisis intervention teams. In addition, the HHSC received its request for $1.5 million to better serve those with mental illness by reducing program waiting lists and increasing funding to provide mental health services to adults and children who are eligible.

Texas Jail Diversion/Incarcerated Vets Committee

Begun in October, 2005, the purpose of the Texas Jail Diversion/Incarcerated Vets Committee is “to seek means and methods of collaboration between the agencies and organizations of the Veterans Health Care System and the agencies and organizations of the state of Texas in order to improve the treatment of the medically and mentally ill, those individuals with traumatic brain injuries, and/or substance abusers who come in contact with the Texas Criminal Justice System.” Special attention is being given to collaborative efforts between the Veterans Health Care System and the Texas Correctional Office on Offenders with Mental Disorders and Mental Impairments (TCOOMMI) and with the local MHMR Jail Diversion Committees. Located in Dallas, Waco, San Antonio, Houston and El Paso, these pilots are developing appropriate policies and procedures that can be refined and used as “best practices” for other locations to emulate. The VA sites also will identify contact individuals and services to be provided to the veterans who come in contact with the Texas Criminal Justice System.

Advocating for Texans, cont.
Highlighting 2007

Addressed Timely Issues
On Campus Violence

With a $4,000 grant provided by the American Academy of Child and Adolescent Psychiatry, NAMI Texas held the NAMI Campus Connection Conference in Houston, addressing college mental health issues. NAMI Texas invited representatives from every college and university from across the state. This provided a great opportunity to explore college campus mental health issues and inform participants about NAMI programs.

In attendance were college students, college and university professionals, as well as the public. Speakers presented on prevalence, privacy, protection, ethnicity, support, advocacy, and solutions. The conference also included a three person student consumer panel and a three person parent panel. Many people noted on their evaluations that hearing these personal experiences and participating in the question and answer was the most beneficial part of the day.

One highlight of the conference was Ms. Patricia Gray, attorney and past legislator, who sorted through the policies and procedures colleges currently have in place, as well as those she recommended should be implemented. She spoke about the incorrect belief that a college is less liable if they avoid issues surrounding mental health or expel those suffering from severe mental illnesses. She then detailed what liabilities lay in not developing firm policies and the benefits a college gains by putting a system in place.

Addressing how NAMI could be of aid to college campuses, Liz Smith, Director of NAMI National’s Center for Leadership Development, spoke about the need for student and faculty support on campus for those suffering from a mental illness. She talked about a program called NAMI on Campus, which is a student lead and run organization. Arthur Chiang, who sat on the student panel, was the first student to start a NAMI on Campus Club in Texas.

This conference was extremely important for our state for many reasons. Texas has over 200,000 college students, including the largest University in the nation. With an average age of onset at 18-24 years old for most of the severe mental illnesses, this leaves a large percentage of our population at great risk. According to the National Center for Health Statistics, suicide is the third leading cause of death for people between the ages of 15 and 24 and the second leading cause of death among college students. Data from the Centers for Disease Control on the suicide rates in Texas and the United States from 2000 to 2003 shows that Texas has higher than national rates for both males and females ages 15 to 19. For NAMI Texas, this Conference represents the cornerstone of an advocacy campaign to provide education to students, their families, college and university staff, policy makers and the public about these critical issues. NAMI is capable of offering tremendous support to colleges across the state and this conference served as a catalyst to forging many partnerships.

A special thanks to our speakers who donated their time and expertise: Liz Smith, Dr. Ted Statchowiak, Dr. Kenneth Arla, Dr. Andrew Harper, Dr. Pedro Ruiz, Patricia Gray, J.D., and Dr. Regina Hicks. Thank you to Arthur Chiang, Rene Truxillo, Elizabeth Smalling, Bonnie Cord, Shelly Green, and Robin Peyson for the courage to share your stories. We would also like to thank Dr. Lois Moore, Dr. Steven Pilszka, the Menninger Clinic, and Gloria Horner for their collaboration and support of this conference.

2007 Annual Conference:

Every October we hold our annual conference. In 2007 our theme was “Recovery and Renewal”. A variety of topics were covered in our 22 workshops. Our one hundred sixty eight participants enjoyed choosing workshops relative to their own experience. There was something for everyone, consumers, family and friends, affiliate leaders, and professionals.

At dinner that night our keynote speaker was Jill Bolte Taylor, renowned brain scientist. She was informative and entertaining. Although she shared her personal experience of having a stroke, the information about brain chemistry and function was fascinating and relevant to mental health.

Overall conference participants stated the conference was inspiring and informative. Attendees enjoyed each others company and networking in a safe, informative environment.

Honoring those who support the cause, the following individuals were presented with awards by NAMI Texas at the 2007 Annual Conference.

2007 H. Shannon Advocate of Justice Award
Presented to Maurice Dutton
A Champion for Persons with Mental Illness

2007 Mark Korenek Consumer Quality of Life Award
Presented to The Consumer Advisory Council (CAC) of MHMRA
For Their Courageous Example That Recovery is Possible

2007 Mental Health Professional of the Year Award
Presented to Dr. Steven Schnee
For His Support and Compassion for Persons with Serious Mental Illness

2007 Betty Fulenwider Media Award
Presented to Wendy Rigby
For Furthering the NAMI Texas Mission of Educating and Battling the Stigma of Mental Illness

2007 Volunteer of the Year Award
Presented to Ed Kuny
For His Tireless Dedication to Persons with Mental Illness

Carolyn Karkowski
In Recognition of Her Years of Passion, Commitment, and Leadership.

Norma Bangs
For Her Dedication to NAMI

Deborah Rose
For Her Creativity, Hard Work, and Loving Commitment to NAMI Texas

A sincere thanks to those who financially helped make this conference happen:

Bristol-Myers Squibb
Patricia G. Edminston
Eli Lilly & Co.
St. David’s Community Health Foundation TWG Investments
Texas Council of Community Mental Health and Mental Retardation Authorities
Telecare Corporation
Trilogy Integrated Resources
Ann & Bob Utley
Value Options, Inc.

NAMI Texas 2008 Annual Conference
October 17 and 18
San Antonio, Texas
American Academy of Child and Adolescent Psychiatry
Bristol-Myers Squibb
Eli Lilly
Menninger
NAMI National Grants
• Family to Family
• Inclusion Grant
• In Our Own Voices
• NAMI Connections
Pfizer United Way Campaign
Sixty-Four Foundation
Solvay RX
Stanley Family Foundation
Swalm Foundation: now inactive
Texas Bar Foundation
Texas Council for Developmental Disabilities

2007 General Giving

Libbye and Michael Amburn
Norma Bangs
Bill Biggs
Judy Biggs
Lawrence Brzozowski
Lee Burns
Elena Cave
Alice Clark
Community Health Charities
Milie J. Cowart
CSC Employee Campaign
William Daugherty
Richard and Dora Davis
Sharon DeBlanc
Robert Dueck
Lady Duecker
Maurice Dutton
Angela & Thomas Ellis
Leon Evans
H.S & P Felty
Enrique Fernandez
Donna Fisher
Fidelity Charitable Gift Fund
Karen Garber
David Gibson
Andrea Hogan
Sharon Halburg
Tom and Carolyn Hamilton
Ronald and Nancy Hanson
William & Jean Hamer
Kim Haynes
Patti Haynes
Paula Hendrix
Francis Hogan
Joanna Hogan
Jerry and Helen Hopson
Jennifer Inabinet
Russell Ingram
Grace Jameson
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Carolyn and Eddie Karbowski
C.J. and Lujana Kaspzyk
Michael Katz
Diana Kern
Charles and Beverly Kranitzky
Sally Krigbaum
Freda Levy
Carolyn Little
Tamara Marler
Barbara Mason
Blakely Mason
Bill and Patricia Matthews
Patricia May
David McDowell
Clifford McGlotten
Thomas Miller
Jan Moore
Roger Morin
J. Thomas Morrison
Frances and Tom Morrison
Phyllis A Morris
NAMI Dallas
NAMI Metropolitan Houston
Ramona Paetzold
Annette Parker
Jerry Parker
Margene Polk Parr
Robin Peysen
Charlie and Eileen Potts
Glen Prasser
Marianne Punchard
Mary Ellen Reid
Mary Robins
Deborah Rose
Ralph and Rosemary Puente
John Rouquette
Elia Ruelas
Safeway
Jean Sahm
Gordon and Brenda Saunders
Brenda Schraer
Jackie Shannon
Geneveve Siebert
Luviminda Skyepl
Spiritual Fitness Center
Tami’s Treasures
Kenneth Tarlton
Jeanette Taylor
Gregory Thompson
Anne & Bill Tiller
Lisa Tomaka
United Way
United Way of Greater Kansas City
Ann and Bob Utley

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Andrea Hogan
Sharon Halburg
Tom and Carolyn Hamilton
Ronald and Nancy Hanson
William & Jean Hamer
Kim Haynes
Patti Haynes
Paula Hendrix
Francis Hogan
Joanna Hogan
Jerry and Helen Hopson
Jennifer Inabinet
Russell Ingram
Grace Jameson
Steve Johanson
Carolyn and Eddie Karbowski
C.J. and Lujana Kaspzyk
Michael Katz
Diana Kern
Charles and Beverly Kranitzky
Sally Krigbaum
Freda Levy
Carolyn Little
Tamara Marler
Barbara Mason
Blakely Mason
Bill and Patricia Matthews
Patricia May
David McDowell
Clifford McGlotten
Thomas Miller
Jan Moore
Roger Morin
J. Thomas Morrison
Frances and Tom Morrison
Phyllis A Morris
NAMI Dallas
NAMI Metropolitan Houston
Ramona Paetzold
Annette Parker
Jerry Parker
Margene Polk Parr
Robin Peysen
Charlie and Eileen Potts
Glen Prasser
Marianne Punchard
Mary Ellen Reid
Mary Robins
Deborah Rose
Ralph and Rosemary Puente
John Rouquette
Elia Ruelas
Safeway
Jean Sahm
Gordon and Brenda Saunders
Brenda Schraer
Jackie Shannon
Geneveve Siebert
Luviminda Skyepl
Spiritual Fitness Center
Tami’s Treasures
Kenneth Tarlton
Jeanette Taylor
Gregory Thompson
Anne & Bill Tiller
Lisa Tomaka
United Way
United Way of Greater Kansas City
Ann and Bob Utley

Budget

Administration: $26,742.51
Annual Conference: $54,782.05
Education: $214,720.12
Events: $1,035.50
Fundraising: $15,924.60
Membership: $14,500.35
Outreach: $98,807.03
Policy/Advocacy: $56,081.19

We make a living by what we get, a life by what we give.” -- Winston Churchill

NAMI Texas would like to thank all the amazing volunteers that helped us in 2007. Although there are too many names to list here, the time they donated helped us accomplish all we did.