

Annual Report 2010

Mission Statement:

Mobile Medical Disaster Relief (MMDR) provides basic goods and medical services to the world's poor. In areas afflicted by disaster, we provide medical and logistical support to those who are most vulnerable. By supplying the basic medical needs of the poor, implementing micro finance programs, providing clean water initiatives, and initiating vocational schools, we aim to liberate those who are captive to the ravages of poverty.

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History of Mobile Medical Disaster Relief:

In response to the Hurricane Katrina disaster, David Vanderpool, MD, began Mobile Medical Disaster Relief in 2005. Two days after Katrina made landfall, Dr. Vanderpool and his team ventured to Biloxi, Mississippi to provide emergency medical care to the hurricane victims. Initially they brought \$10,000 of medicine with them but quickly realized that the enormous need mandated a much greater response. They returned to Nashville, set up a 501(c)(3) organization, purchased a large truck and trailer, which they converted into a mobile operating room, and returned to Biloxi. Armed with hundreds of thousands of dollars of medicine and supplies, the MMDR team returned to the hurricane ravaged area many times providing basic medical and surgical support to the local population. As the infrastructure was rebuilt, the MMDR team assisted in the development of an indigent medical clinic in the Bay St. Louis area and continued to supply it with medical personnel, supplies and medication for two years.

In 2006, as the medical needs in southern Mississippi waned, a missionary group in northern Mozambique in need of medical support contacted MMDR. We responded by supplying two medical clinics in Pemba, Mozambique, which were government approved to serve 80,000 people in the Cabo Del Gado province. During this time, we also began a vocational nursing school developed by the Belmont School of Nursing in Nashville, Tennessee. This school has provided many women the opportunity to learn a trade and make a living in this difficult region. We also began a vocational textile school in which women are able to learn the craft of sewing as well as have an outlet to sell their manufactured goods. We promote and sell these items through college bookstores, our website and other retail outlets in the United States. We have also assisted in clean water projects and nutritional projects including a chicken farm in northern Mozambique.

In 2008, we began supporting an existing medical clinic in Tegucigalpa, Honduras. This effort expanded in 2009 to include Cedenó, which is one of Honduras' poorest regions. The local government supplied the land and MMDR built and supplied a medical clinic that reaches approximately 30,000 people who otherwise would have little or no access to healthcare.

In 2010, two days after the Haitian earthquake, MMDR traveled to Port-au-Prince and helped to establish a large hospital there. We mobilized hundreds of doctors and treated thousands of patients in the aftermath of the earthquake. We continue to be active in Haiti by supplying medicines, vaccines and clean water to the stricken Haitian people.

In the years since its inception, MMDR has supplied medical personnel and supplies to many impoverished regions of the world including Nigeria, India, China, Ukraine, Iraq, Kenya, Gaza, Haiti, Peru, and Guatemala.

Philosophy:

Mobile Medical Disaster Relief is a 501(c)(3) organization, which provides medical and logistical support in large-scale disasters. In addition, MMDR builds medical clinics, funds micro finance projects, develops vocational schools, and develops clean water initiatives in developing countries. Our Board of Directors is comprised of business and civic leaders and is active in the ongoing work of the organization.

Selected Accomplishments:

2010 Annual Report Selected Accomplishments

Port au Prince, Haiti

2010 was an exciting year of growth for Mobile Medical Disaster Relief. On Tuesday, January 12, 2010 at 4:53 pm local time a 7.0 magnitude earthquake rocked the city of Leogane, Haiti. In the aftermath of that devastating quake, 330,000 people lay dead, 1,000,000 people were injured and 30,000 children were orphaned. Haiti, the poorest country in the western Hemisphere, with a population of 9 million, was devastated. Because of a significant lack of infrastructure before the quake, the country was paralyzed much more than would be apparent by the modest earthquake. Though they had received billions of dollars in government aid in the decades prior to the earthquake, their government had not invested in the necessary water and power projects, medical infrastructure, roadways, and building code laws to prevent a large scale disaster in this earthquake and hurricane prone island nation. Now their people were suffering and only external resources could help.

We arrived two days after the earthquake via Santo Domingo, Dominican Republic by renting vehicles and entering the ravaged country at Jimani, DR. We, along with others set up a large trauma hospital and began to care for the injured and dying. We mobilized teams of doctors and nurses to assist and at our peak had 180 doctors and 500 nurses at the Jimani complex. These brave volunteers treated tens of thousands of Haitians providing life saving medical care, food and clean water to the injured and their families. We were able to drive into Port au Prince, dig people out of the rubble and transport them back to our hospital for care. Because of the severe prejudices between the Dominicans and the Haitians, we were asked to set up a tent refugee camp across the border in Haiti to ensure the proper repatriation of the Haitians.

We worked extensively with the U.S. military stationed at the Port au Prince airport. We were able to develop a good working relationship with the Commanding Officer of the U.S. Air Force and the Army's 82nd Airborne. In exchange for caring for Haitian patients that they had in their small clinic, they brought us supplies via helicopter to our hospital.

As the acute nature of the disaster waned, we were able to move into Port au Prince and set up medical clinics near the epicenter of the earthquake. These medical clinics served some ten thousand Haitians in 2010 providing them with lifesaving medical care which was otherwise unavailable to them. We have continued to bring teams of medical personnel, water specialists and construction workers into Haiti on a monthly basis. In 2010 alone, MMDR organized and brought in 400 volunteers to help in the acute needs of this devastated country. Since we have a permanent presence in Haiti, we have developed deep and lasting relationships with key people in this country. We have worked with the United Nations Health Care Division coordinating health care delivery to the neediest people in this area. The Haitian Minister of Health has been extremely helpful to us in our quest to procure our Non Governmental Organization status in Haiti as well as a level of citizenship which will allow us greater access to shipping and governmental assistance.

One of these relationships has led us to a suburb of Port au Prince named, Thomazeau. In March of 2010, we started providing medical care, food and funding to the Children of Hope orphanage in this terribly poor area. We have returned monthly to this orphanage which has grown to house 54 children of all ages and have seen an overwhelming improvement in the healthcare of the children and townspeople. We have provided clean water systems, food and shelter to the most vulnerable people of this region. We plan to solidify our presence in this area by buying land and building a hospital, orphanage, secondary school and vocational school beginning in 2011.

Kete Krachi, Ghana

In November of 2010, we began a relationship in central Ghana with the Touch of Life Foundation and PACODEP, a Ghanaian organization which works to address the terrible child slave problem in this area of the world. We travelled to Kete Krachi, Ghana to provide surgical and medical care to twelve of the children who had been injured in the brutal slave trade. We were fortunate to use the area operating theater with the blessing of the regional medical director. We then travelled onto Lake Volta where the majority of the slavery exists and provided medical care to the tribes living on the islands of the lake. We plan to foster the relationships that we began on Bakpa Island with the tribal Chief Parka as well as the chiefs of the neighboring Maniakpo and La La islands by returning to provide medical care and clean water systems to these tribes.

Map of our Sphere of Influence:



Biloxi, MS USA, Haiti, Guatemala, Honduras, Nigeria, Kenya, Mozambique, Ukraine, Israel, Iraq, India, China, Peru, Gaza, Ghana

Future Plans:

Mobile Medical Disaster Relief is committed to improving the lives of the disadvantaged around the world. To this end, we intend to continue to provide medical clinics in areas of the world that have little or no medical infrastructure. In addition to providing medical assistance, we are committed to help with clean water initiatives and micro finance projects in these areas. In areas that suffer natural disasters, we plan to provide “first responder” medical assistance to those without the ability to access the health care system. In 2011, we plan to expand our commitment to Haiti by expanding our clinic in Thomazeau and building a surgical hospital, orphanage, secondary school and vocational school. This city, located northeast of Port au Prince was devastated by the earthquake and still suffers from the ravages of that disaster. In all we do, we intend to spread the love of God to those who are ravaged by poverty, disease, and hunger.

Board of Directors:

Martha Ezell, BSN Professor of Nursing Belmont School of Nursing

Cindy Masters, RN

Jon Christensen, JD, Washington Lobbyist and former U.S. congressman from Nebraska,

Mark Parkey Controller, J. Alexanders Corporation

Bob Sircy, Financial Counselor, Raymond James Financial, Inc.

David Vanderpool, MD, FACS CEO LAVE MD

Laurie Vanderpool, COO and Treasurer MMDR

Staff:

David Vanderpool, MD, FACS CEO and Medical Director MMDR

Laurie Vanderpool COO and Treasurer, MMDR

David Stallings Vanderpool Director of Overseas Projects

Linda McLemore Director of Development MMDR

Contributors:

The Ezell Foundation

LAVE MD

Mr. and Mrs. Mark Parkey

Mr. and Mrs. Jon Christensen

Mr. and Mrs. Mark Ezell

Dr. and Mrs. Brice David Vanderpool

Mr. and Mrs. Gene Stallings

Dr. and Mrs. Tim Young

Mr. and Mrs. John Chalk

Mr. and Mrs. Keith Gunn

Dr. and Mrs. David Vanderpool

Volunteers:

MMDR has been richly blessed by the many individuals who have donated their time in an effort to support the mission of MMDR. Whether it is collecting supplies, preparing hygiene bags, procuring and organizing medicines, or traveling with us to developing countries, all of the volunteers who have participated in the mission are important. In 2010, we took 173 team members overseas to serve in various missions capacities. This represents 17,300 man hours of preaching the Gospel, delivering medical care and providing clean water to tens of thousands of impoverished people who live without these basic necessities every day. Our weekly volunteers have contributed 20,900 man hours performing such critical activities as repackaging medicine, packing medical bags for trips and selling micro finance items. This represents a total of 38,200 man hours of work donated by our hardworking dedicated volunteers to further the Kingdom of God through MMDR.



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