

2025

ANNUAL REPORT

COLLEGE OF MEDICAL LABORATORY
TECHNOLOGISTS OF MANITOBA



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2025 CMLTM Council



Jackie Tower
Chair



Llora Alejandro-Yarema, MLT
Vice-Chair



Steven Wu
Secretary
Public Representative



Kevin Simonetto, MLT
Treasurer



Amina Khizar, MLT
Member at Large
Chair, Inquiry Committee



Karanveer Dhillon, MLT
Member at Large



Rajinder Pal Bhullar
Public Representative



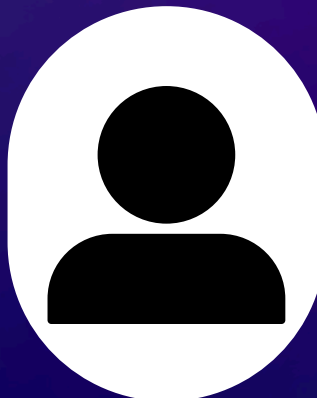
Richard Panciera
Public Representative



Fatima Daniel-Parent, MLT
Chair, Board of Assessors



Natalie Chaput, MLT
Chair, Continuing
Competency Committee



Graziella Te, MLT
Chair, Complaints
Committee



Nicole Evans, MLT
Chair, Truth and Reconciliation
Committee

Vision

Excellence and leadership in the regulation of medical laboratory technologists.

Mission

CMLTM ensures public safety by upholding an ethical and competent medical laboratory technologist practice.

Values

- **Leadership:** The College will provide expertise and continually seek improvement in professional regulation and practice.
- **Integrity:** The College will conduct itself in a professional, fair, honest, and transparent manner to our members and the public.
- **Accountability:** The College will be accountable to the public, government, and our members by following policy and conducting investigations in a fair, equitable, and confidential manner.

Code of Ethics for MLTs



Adopted from the Canadian Alliance of Medical Laboratory Professionals Regulators

INTRODUCTION

The Code of Ethics describes the expected ethical obligations and principles that patients, the profession and the public believe will guide the professional and personal conduct of all medical laboratory technologists (MLTs). These principles can be thought of more as exhibited behaviours than the knowledge and skills listed in a Standards of Practice document.

The Code of Ethics, along with the Standards of Practice, defines professionalism in the practice of medical laboratory technology. MLTs adhere not only to the Code of Ethics and guidelines, but also to the underlying spirit and precepts.

A medical laboratory technologist's fundamental responsibility is to manage the relevant medical laboratory services in the best interests of patients. MLTs have professional obligations to work collaboratively with colleagues and other healthcare providers to deliver professional services.

Patient safety and protection is paramount at all times.

The Code of Ethics will:

- Promote an MLT's recognition of the professional and personal conduct expectations for medical laboratory technology practice.
- Represent the minimum standards of professional behaviour and ethical conduct expected of all MLTs.
- Apply to MLTs at all times in all dimensions of professional and personal conduct, including technical and nontechnical fields such as education, administration, quality assurance, and research.

The ethical obligations and principles are not listed in order of importance. They should be balanced against each other and considered in relation to all of the obligations and principles described by the Code of Ethics. Over time, the Code of Ethics will evolve in response to regulatory, legal, and ethical expectations and will be adopted only after stakeholder consultation. Legislation, regulations, bylaws, Code of Ethics, Standards of Practice and practice guidelines collectively establish a framework for the practice of ethical and safe medical laboratory technology.

ETHICAL OBLIGATIONS

Medical laboratory technologists demonstrate an application of their ethical obligations through their professional and personal conduct.

Obligations to Patients:

Medical laboratory technologists put their patient(s)' interest(s) above their personal interest(s). MLTs carry out their professional duties competently and with integrity. They respect their patients' individual needs and overall welfare at all times, including the patients' right to freedom of choice in health care provider, free and informed consent, and an expectation of confidentiality of all patient information, in accordance with existing legislation.

Obligations to the Public:

Medical laboratory technologists are dedicated to serving the public's health care needs through respectful, accessible, and cooperative interactions with the public and patients, other healthcare providers, and students. MLTs facilitate awareness and understanding of the medical laboratory technology profession.

Code of Ethics for MLTs

continued

Obligations to the Profession:

Medical laboratory technologists contribute to the profession's development through collaboration, mentorship, self-development, and support of its institutions. MLTs strive for excellence in their professional practice, and professional and personal conduct through lifelong learning. Medical laboratory technologists recognize, disclose, and resolve conflicts of interest to safeguard patient care.

Obligations to the Regulatory Body:

Medical laboratory technologists understand, respect and comply with provincial statutes and regulations, and the Code of Ethics, Standards of Practice, bylaws and practice guidelines approved by their regulatory body. Medical laboratory technologists cooperate and maintain harmonious relations with, and promptly reply to all correspondence from the regulatory body at all times.

Obligations to Oneself:

Medical laboratory technologists are accountable and responsible for their professional and personal conduct. MLTs practice within their scope of professional competence and recognize their professional and personal limitations. Medical laboratory technologists maintain and improve their knowledge, skills, judgement and behaviours to ensure the best possible patient care.

ETHICAL PRINCIPLES

Medical laboratory technologists demonstrate the following ethical principles through the medical laboratory technology services delivered, either alone or in collaboration with a multidisciplinary team, and any services rendered under the MLTs' direction and supervision.

Confidentiality / Privacy / Conflict of Interest

Medical Laboratory Technologists shall:

- Respect and protect patient confidentiality and privacy by understanding and complying with applicable privacy legislation and policies regarding the collection, use, and disclosure of confidential information.
- Recognize, disclose, and act appropriately to resolve conflicts of interest that arise in the course of professional activities. They will maintain the integrity of personal health information, maintain transparency, and deliver unbiased patient-centered care. MLTs only use confidential information in the best interests of the patient

Diversity / Respect / Dignity / Consent

Medical Laboratory Technologists shall:

- Value, respect, and protect the rights, welfare, and dignity of all patients by at all times providing patient care and service with respect for human rights, regardless of, but not limited to race, ethnicity, religion, language, sexual orientation, gender identity, age, socio-economic status, and mental or physical abilities.
- Obtain free and informed consent from patients before undertaking any action, in accordance with relevant legislation and policies, recognizing that consent can be withdrawn at any time.
- Maintain appropriate professional boundaries with patients, colleagues, and other healthcare providers while delivering patient-centered care.

Code of Ethics for MLTs

continued

Safety

Medical Laboratory Technologists shall:

- Practice according to established protocols, safety guidelines, relevant current provincial and federal legislation, institutional policies and procedures, and environmental considerations. They do so to protect patients, colleagues, healthcare providers, society, the environment, and themselves from any potential harm while acting in the best interest of the patient.
- Promote a culture of safety with colleagues, and other healthcare team members.

Accountability / Responsibility

Medical Laboratory Technologists shall:

- Exercise independent judgment, accept responsibility for their actions and the foreseeable consequences of their actions, and recognize their accountability for the services they provide.
- Practice within the scope of their professional competence, recognize the competence of others and seek their assistance as required.
- Take appropriate action in responding to situations which may jeopardize patient care or harm the profession, including reporting impaired, incompetent, and/or unethical colleagues.

Professionalism / Behaviours / Attitudes / Professional Development

Medical Laboratory Technologists shall:

- Strive for excellence in their professional practice, and in their professional and personal conduct in order to uphold the integrity of the profession and the public trust.
- Communicate effectively with patients, the public, colleagues and other healthcare providers, contributing to a healthy and positive work environment.
- Maintain and enhance professional practice and augment their knowledge, skills, judgement, and behaviour through self-reflection and self-directed professional development and by demonstrating continued competence.
- Demonstrate collegiality, mentorship, and sharing of new and emerging professional knowledge

Collaboration

Medical Laboratory Technologists shall:

- Display integrity and respect in all interactions and collaboration with healthcare providers and others involved in patient care.
- Contribute to ongoing quality improvement in the provision of healthcare services.
- Promote learning by facilitating the sharing of knowledge, skills and judgment processes with colleagues, students, other healthcare professionals, and the public.

SUMMARY

While the ethical obligations and principles are presented as discrete sections, medical laboratory technologists recognize that in practice all ethical principles are implemented as part of daily processes and do not stand alone. MLTs use a combination of their knowledge, skills, judgment and ethical behaviour to adjust to changing circumstances and evolving environments.

For references and definitions, please see the [Code of Ethics page of the CMLTM website](#).

Registrar's Report

Janie McBey, MLT

2025 was a year of change for CMLTM. Adam Chrobak resigned as Registrar/CEO in April 2025, and Tricia VanDenakker graciously took on the expansive position of Interim Registrar. Tricia carried on much of the work with the Legislative Unit regarding the transition to the RHPA and helped guide Council in all their endeavors including onboarding the next Registrar/CEO, Janie McBey, in November 2025.

When I started with the CMLTM in November, I dove into the work and continued with Adam and Tricia's momentum. I have selected many goals for the CMLTM office to accomplish in 2026 that align with the current [Strategic Plan](#).

1. CMLTM will strengthen registrant engagement

Relationships provide the backbone to our work. Our third pillar of the 2022-2026 Strategic Plan is strengthening relationships with members. CMLTM is here to ensure patient safety through leadership, integrity, and accountability of our membership. Establishing and maintaining relationships with CMLTM members will help identify what really matters to MLTs in Manitoba.

Upon taking up my new position as Registrar/CEO, I have increased our use of Social Media platforms to be more engaging with our membership. We are active on [X \(formerly Twitter\)](#), [Facebook](#), and [LinkedIn](#) where we provide organization updates, and information about the CMLTM Council and Committees, and our programs.

2. CMLTM will ensure governance policies and practices support effectiveness

CMLTM supports the regulation of Medical Laboratory Assistants (MLAs), and in addition to submitting a formal request to the Legislative Unit in 2022, continued to engage them with the subject in 2025. CMLTM is encouraged by the previously expressed support of the Minister of Health to support the regulation of Combined Laboratory and X-ray Technologists (CLXTs) under the CMLTM when we transition into the RHPA.

2025 marked the last year where new MLT graduates could write either the CSMLS or CAMLPR entry-to-practice exams. Council has chosen the CAMLPR entry-to-practice exams as a requirement for new graduates registering in Manitoba as of March 2026.

3. CMLTM will ensure operational policies and practices support effectiveness

In 2025, CMLTM staff began the process of creating standard operating procedures for office specific tasks. These procedures will ensure that there is consistency in the work and provide a solid foundation for succession planning.

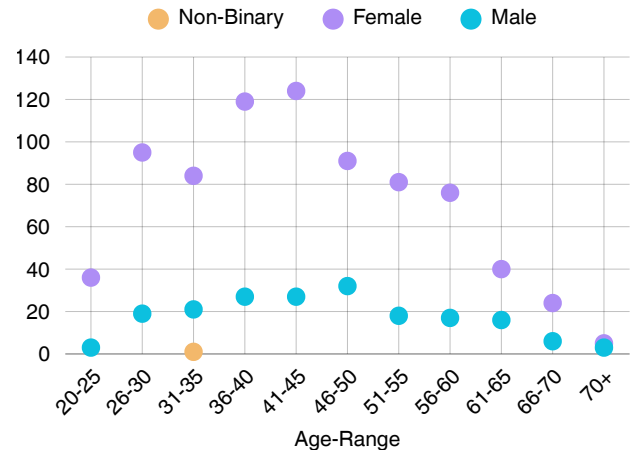
I have been reviewing current expenses and asking questions of the staff, Council, and our contracted vendors to ensure that CMLTM pays for only value-added services. What works for one team may not remain the best option for the next team, which is why I believe in asking questions to understand the 'why'.

In conclusion, I would like to thank the 2025 CMLTM Council for giving me an opportunity to work with them at the College. Tricia and Janelle welcomed me into the office with smiles and many procedural notes. Thank you all for easing the transition during a busy renewal period fraught with technical difficulties.



CMLTM Registry Totals as of December 31, 2025

Active: Practicing	890
Conditional	1
Inactive: Non-Practicing	11
Inactive: Retired	15
Student	42
Honorary	2
Temporary	0
Rejected	0



Chair's Report

Jackie Tower

2025 was a challenging year on Council and yet, when I look back, we accomplished so much.

Adam Chrobak, the Registrar/CEO from 2010 until 2025 notified Council of his resignation with CMLTM in March 2025. Council's major task after this announcement was establishing requirements for a replacement Registrar/CEO. This was a learning process for Council and especially the Executive Committee. We relied on the expertise of MNP's Lilian Wong to guide us. We are confident that the new Registrar/CEO, Janie McBey, will excel in the position and continue the work that Adam dedicated so many years to.



I would like to extend my gratitude to the CMLTM Deputy Registrar, Tricia VanDenakker, for taking on the additional responsibilities as Interim Registrar/CEO during the transition period, and to the Executive Committee and Council members for their additional efforts during that time.

Also, this year, Council worked with the Manitoba Alliance of Health Regulatory Colleges (MAHRC) to release our latest Jurisprudence Module: Introduction to Indigenous Inclusion and Cultural Safety. Like the other Jurisprudence Modules with CMLTM, Council passed a motion to make this course a requirement of registration to be repeated every 5 years.

Council is pleased to support the newest MLT program in the province, scheduled to begin in September 2027, at Assiniboine College in Brandon, Manitoba. This program will help contribute to the much-needed requirement for practicing MLTs for the province.

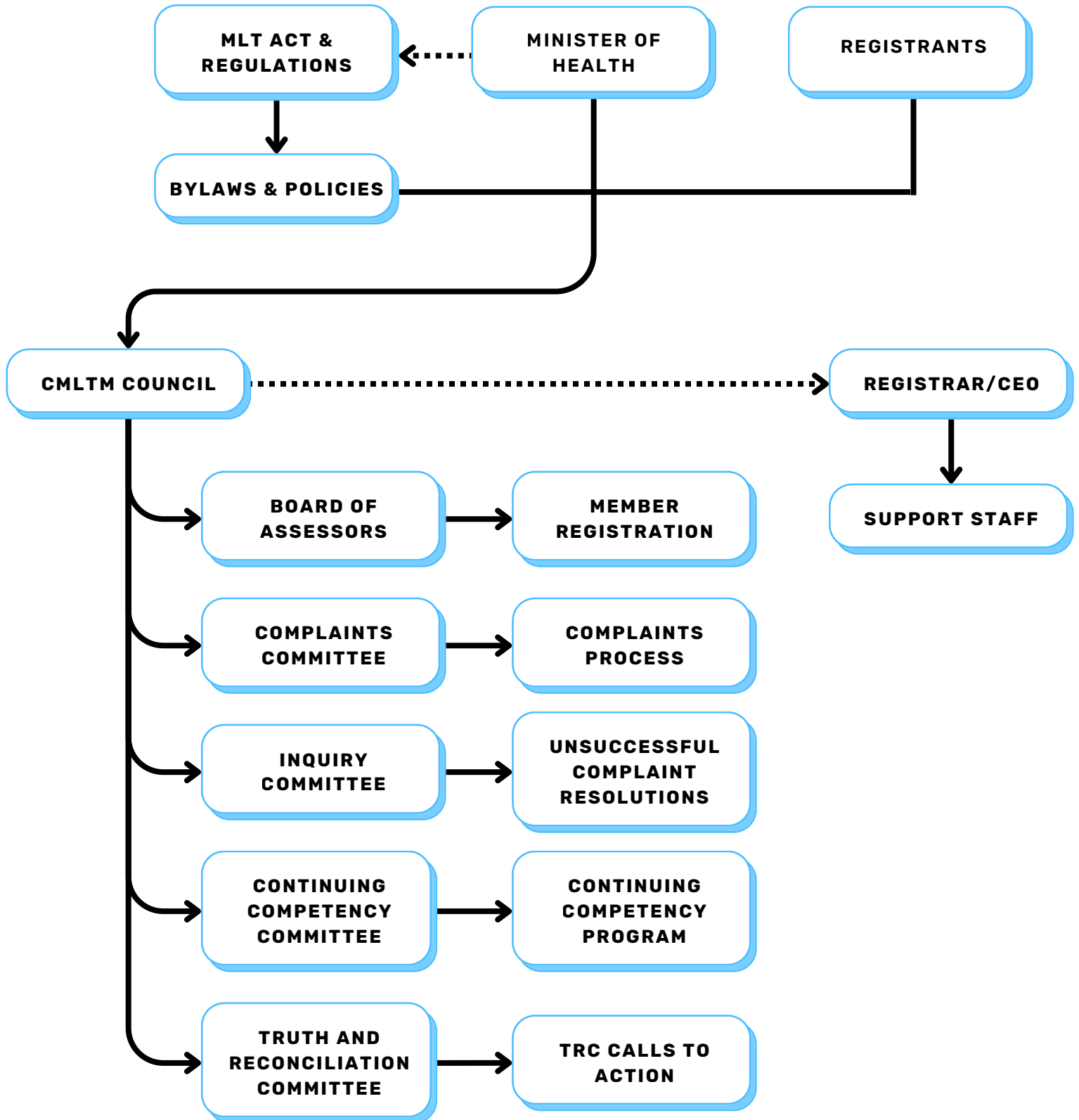
I have always been proud of the career choice I made so many years ago. When regulation of our profession was mandated in our province, I did not understand what that meant until many years later. It is a privilege to be a self-regulated profession, and it is important that every MLT understands the significance of volunteering on the CMLTM Council and Committees. Without you, we would not have this privilege.

Our participation matters, and it is my hope that more MLTs will consider serving on Council or Committees in the future.

I am proud to have volunteered on Council during my career as an MLT, and to volunteer again now that I am retired. It has been an honour of mine to take on the role of Chair of the CMLTM Council and I do not take this responsibility lightly. The mandate of the CMLTM is important to public safety and confidence in our healthcare system.

Thank you.

CMLTM Organization Chart



Board of Assessors

Fatima Daniel-Parent, MLT

In accordance with the Medical Laboratory Technologist's Act, Regulations and By-Laws, the Board of Assessors (BOA) is a Standing Committee whose mandate is to protect the public interest by ensuring an Applicant to the College of Medical Laboratory Technologists of Manitoba (CMLTM) is appropriately qualified to practice as a Medical Laboratory Technologist (MLT) in Manitoba.

The 2025 Board of Assessors Members:

- Fatima Daniel-Parent, MLT (Chair)
- Prudence Beaulieu, MLT
- Sheldon Kuzmik, MLT
- Gloria Mactavish
- Jocelyn Almeda-Benedicto, MLT

During the period January 1, 2025 to December 31, 2025, the Board of Assessors reviewed fifty-eight (58) new applications with the following decisions:

CLASSIFICATION

APPROVED

Active: Practicing	46
Conditional (converted to Active: Practicing)	22*
Conditional	3
Reinstated to Active: Practicing	9

**Not included in the total count as they are part of the Active: Practicing total*

Six (6) Active: Practicing applications for registration were approved under the Canadian Free Trade Agreement (CFTA), labour mobility applicants from New Brunswick (1), Alberta (1), and Ontario (4).

Five (5) Active: Practicing applications for registration were approved for internationally educated applicants.

Three (3) applicants under the CMLTM Substantive Equivalence policy, BOA-20, have completed all requirements and were converted to the Active: Practicing roster.

The following data related to reinstatements to Active: Practicing:

- Six (6) from maternity leave
- One (1) from retirement
- Two (2) returning to practice

Two (2) of the members granted Conditional Certificates to Practice were not successful in writing their second attempt at the CSMLS exam and their registrations were closed.

I would like to express my appreciation to Gloria Mactavish, Sheldon Kuzmik, Jocelyn Almeda-Benedicto, and Prudence Beaulieu for their time and support with the Board of Assessors. It has been a delight to work with them.

Inquiry Committee Report

Amina Khizar, MLT



2025 Inquiry Committee Members:

- Amina Khizar (Chair)
- Joyce MacDonald
- Richard Panciera, Public Representative*

*A public representative was not appointed to the Inquiry Committee until the December 10, 2025 Council meeting.

There have been no issues referred to the Inquiry Committee in 2025.

Complaints Committee Report

Harvey Suski, MLT



According to the Medical Laboratory Technologist Act, the Council shall appoint a Complaints Committee to review and investigate any complaints filed against current and former CMLTM registrants.

2025 Complaints Committee Members:

- Graziella Te, MLT (Chair Jan - Dec)
- Harvey Suski, MLT (Chair, Dec)
- Sharon Lytwyn, MLT
- Tyger Adam, Public Representative
- Craig Johnson, Public Representative

Graziella Te stepped down from the Chair position in December 2025, and Harvey Suski graciously agreed to fill in as Chair starting in December 2025, and continue for the 2026 year.

The Complaints Committee met twice during 2025.

A total of five (5) complaints brought to the table for review in 2025.

Four (4) complaints were not discussed until early 2026 due to scheduling and meeting quorum.

CMLTM received two (2) additional incomplete complaints that required more detail before the Committee could discuss. As of March 3, 2026, insufficient details have been provided to warrant discussion within the Committee.

COMPLAINTS IN PROGRESS		
Complaint #	Status	Result
2025-002	Member Agreement signed	Investigation and Agreed Resolution
2025-004	Addressed in 2026	TBD
2025-005	Addressed in 2026	TBD
2025-006	Addressed in 2026	TBD
2025-007	Addressed in 2026	TBD

Public Representative's Report

The governing Council of the CMLTM includes Public Representatives.

The Public Representatives to the CMLTM Council are:

- Nominated by the Minister of Health
- Appointed by Council
- Responsible for monitoring the public interest from a governance viewpoint within CMLTM
- Expected to bring expertise and advisory capabilities to the Council.

During the 2025 fiscal year, the following observations are noted for the Public Representative Annual Report:

1. All mandatory Council meetings, along with the Annual General Meeting, were held in compliance with CMLTM by-laws and policies. These meetings took place using a hybrid model, allowing for both in-person and virtual attendance.
2. CMLTM continues to meet its responsibilities as the regulatory authority for the MLT profession. With guidance from Council, the College's duties are successfully administered through the Office of the Registrar, the Board of Assessors, the Continuing Competency Committee, the Complaints Committee, and the Inquiry Committee.
3. In 2025, Council participated in several educational sessions, including training related to board governance and financial management.
4. We are pleased with the effectiveness and quality of the Staff, Council members, and the dedication demonstrated by volunteer Committee members who contribute to the College's leadership and governance.
5. Engagement from members on Council remains an ongoing challenge. We continue to encourage members, particularly those from rural regions, to consider volunteering, as the College works to ensure balanced and equitable representation on Council.

As Public Representatives, we can attest that College members have been well served by the Council, CMLTM staff, and volunteers throughout the 2025 calendar year.

All stakeholders of the College, including registered MLTs, the patient public, other healthcare professionals, and the leadership of Manitoba Health, can be confident that they are well served by the College of Medical Laboratory Technologists of Manitoba.



Steven Wu



Rajinder Pal Bhullar



Richard Panciera

Truth and Reconciliation Committee Report

Nicole Evans, MLT



CMLTM has made a commitment to reconciliation with Indigenous peoples with a focus on the Truth and Reconciliation Commissions (TRC) Calls to Action that apply to regulated health professionals. The TRC Committee created a plan with specific actions to advance this important work. The committee meets two or more times a year to work on the planned actions and monitor progress.

Here is a list of the activities completed in 2025:

- Four (4) communications were sent out to the membership recognizing important Indigenous dates:
 - May 5 - Red Dress Day / National Day of Awareness for Missing and Murdered Indigenous Women, Girls, and Two-Spirit People (MMIWG2+)
 - June 21 - National Indigenous Day
 - Sept 30 - National Day for Truth and Reconciliation / Orange Shirt Day
 - Nov 8 - National Indigenous Veterans Day
- Completion of the learning titled *Introduction to Indigenous Inclusion and Cultural Safety* was launched and is required for all new registrants and was required by all existing members as part of the 2026 registration renewal period.
- On-going monitoring members' inclusion of ReconciliACTION page activities in Professional Portfolios.
- On-going monitoring of Medical Laboratory Science students self-declaring as Indigenous.
- On-going monitoring of practicing members self-declaring as Indigenous.
- Financial support for five (5) CMLTM Council or Committee volunteers through the Manitoba Indigenous Cultural Safety Training (MICST) offered through the University of Manitoba.
- A Personal reflection on a completed activity listed on the TRC page was included in the 2025 CMLTM Spring newsletter to members.

Members can visit the ReconciliACTION page to view indigenous activities approved for CE hours and see the committee's progress.

2025 Truth and Reconciliation Committee members:

- Nicole Evans, MLT (Chair)
- Gloria Mactavish
- Felicia Fermin, MLT
- Rajinder Pal Bhullar, Public Representative
- Daria Richardson, MLT



Continuing Competency Committee Report

Natalie Chaput, MLT



The mandate of the Continuing Competency Committee is to oversee the College's Continuing Competency Program development, maintenance, and members compliance. The Committee reports and makes recommendations to the CMLTM Council. The Council maintains final decision-making power.

2025 Continuing Competency Committee Members:

- Natalie Chaput, MLT (Chair)
- Wendy Leduc, MLT
- Anna Avalos, MLT

Committee Activity

The Committee only met once during 2025 to complete the Continuing Competency Audit. The Deputy Registrar, Tricia VanDenakker, performed an audit on all the portfolios submitted and the committee reviewed a select few to ensure there were no errors or omissions. Only a few discrepancies were noted in the calculation of credit hours between the review and the initial audit. None of the errors resulted in a change in the outcome of the initial audit.

No credit assessments were submitted to the Committee for review.

Natalie Chaput will be stepping down from the Continuing Competency Chair position and will be replaced by Jackie Naphin (MLT). Wendy Leduc, Anna Avalos and Natalie Chaput have agreed to stay on the Committee as members for an additional year. Additionally, we have recruited a new member, Wenyan Xiao (MLT), to join us for the year 2026. Thank you to the Committee members for volunteering their time to the Continuing Competency Committee and we welcome the new chair and member for the year 2026!

Continuing Competency Audit

It is the professional responsibility of all members to meet the requirements of the Continuing Competency Program as part of our ongoing commitment to public protection. The CMLTM has set a goal to verify that commitment by auditing a minimum of 20% of practicing members annually.

In 2025, 186 active members submitted portfolios upon request. The table on the following page outlines the completed audit findings for the year.

Historical audit data has also been provided by Janelle Baril, the CMLTM Administrative Assistant.

Continuing Competency Committee Report continued

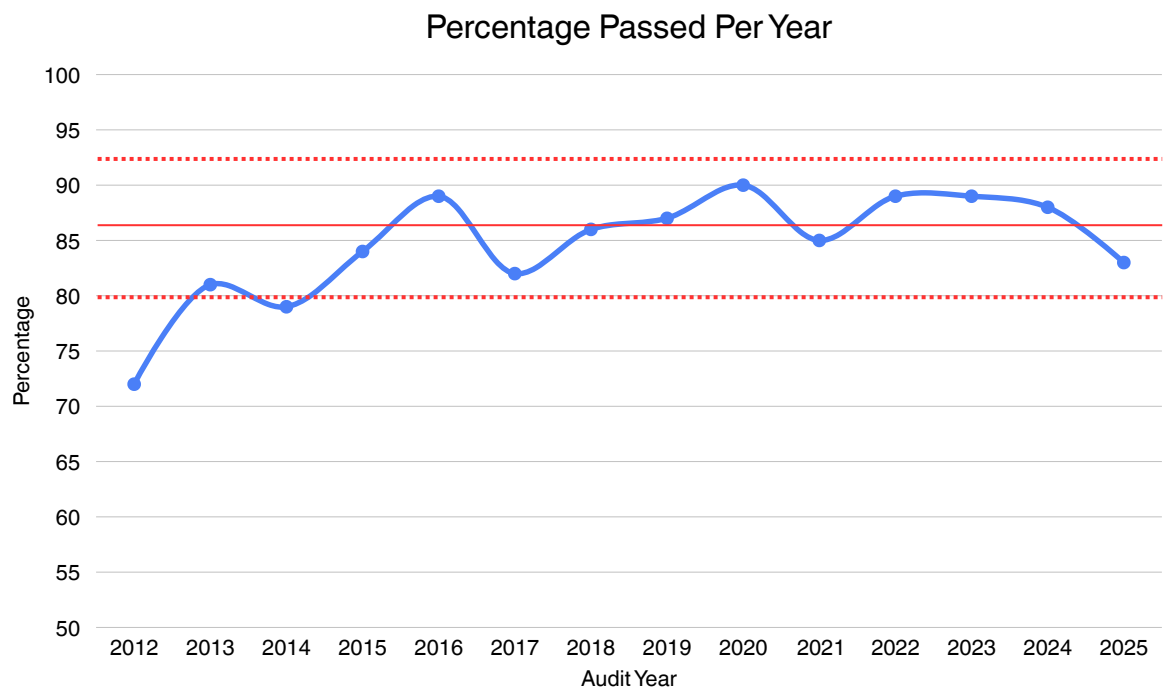
Audit Results for 2025	Total
Pass	111
Pass Less than 5 Years	19
Marginal Pass	24
Fail Documentation	1
Fail Activities	19
Incomplete Submission	1
Non-Compliant	0
Deferred/Closed	11
Total	186

Less Than 5 years refers to members with less than five (5) years of practice in Canada. The minimum requirements of 5-years of practice hours and continuing education hours would not apply to these audits. A fail would be due to missing documentation.

Marginal Pass refers to portfolios that only passed because continuing education hours completed in the current year were reassigned to the audit period to meet the minimum required hours.

Incomplete Submission refers to portfolios submitted without, or improperly completed, log sheets that prevents auditing of the portfolio. Members are given one (1) month to resubmit properly completed log sheets.

Audit Year	% Passed
2012	72
2013	81
2014	79
2015	84
2016	89
2017	82
2018	86
2019	87
2020	90
2021	85
2022	89
2023	89
2024	88
2025	83



MNP Independent Auditor's Report

To the Members of College of Medical Laboratory Technologists of Manitoba:

Opinion

We have audited the financial statements of College of Medical Laboratory Technologists of Manitoba (the "Organization"), which comprise the statement of financial position as at December 31, 2025, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at December 31, 2025, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Matter

The financial statements for the year ended December 31, 2024 were audited by another auditor who expressed an unmodified opinion on those statements on June 18, 2025.

Other Information

Management is responsible for the other information. The other information obtained at the date of this auditor's report comprises materials from the Annual Report, other than the financial statements and our Auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated.

When we read the annual report, if we conclude that there is a material misstatement therein, we are required to communicate the matter to those charged with governance.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

MNP Independent Auditor's Report

CONTINUED

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

MNP Independent Auditor's Report

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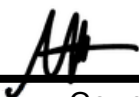
Statement of Financial Position (as at December 31, 2025)

	2025	2024
Assets		
Current		
Cash	531,484	513,703
Accounts receivable	284	830
Portfolio investments (Note 3)	716,952	643,134
Prepaid expenses	16,379	24,141
	1,265,099	1,181,808
	2025	2024
Capital Assets (Note 4)	548,131	568,803
	1,813,230	1,750,611

	2025	2024
Liabilities		
Current		
Accounts payable and accrued liabilities (Note 5)	54,522	51,587
Unearned membership fees	479,954	454,584
Term loan due on demand (Note 7)	192,245	228,930
	726,721	735,101

	2025	2024
Net Assets		
Unrestricted	230,613	175,637
Invested in capital assets	355,886	339,873
Internally restricted (Note 9)	500,000	500,000
	1,086,509	1,015,510
	1,813,230	1,750,611

Approved on behalf of Council



Maria Bobiles

Council Treasurer



Janie McBey

Registrar

MNP Independent Auditor's Report

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Statement of Operations (for the year ended December 31, 2025)

	2025	2024
Revenue		
Membership Fees	476,327	468,794
Expenses		
Advertising	72	6,013
Amortization	22,475	26,122
Bank charges	14,830	16,435
Committee and program expense	63,175	22,630
Database and website costs	55,403	42,008
Interest on term loan due on demand	12,571	18,695
Legal fees	14,589	6,828
Memberships	8,825	7,257
Office	10,306	9,468
Professional development	3,401	874
Professional fees	25,443	23,067
Property taxes	17,873	16,037
Rental of equipment	28	28
Repairs and maintenance	157	17
Salaries and wages	221,068	229,793
Telecommunication	6,313	7,486
Utilities	9,600	8,800
	486,123	441,558
Excess (deficiency) of revenue over expenses before other items	(9,802)	27,236
Other items		
Gain on sale of portfolio investments	21,700	32,921
Investment fees	(12,151)	(10,582)
Investment income	12,739	23,437
Other income	-	2,599
Rental income	575	800
Unrealized gain on portfolio investments	57,938	53,519
	80,801	102,694
Excess of revenue over expenses	70,999	129,930

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Statement of Changes in Net Assets (for the year ended December 31, 2025)

	<i>Unrestricted</i>	<i>Invested in Capital Assets</i>	<i>Internally Restricted</i>	2025	2024
Net assets, beginning of year	175,637	339,873	500,000	1,015,510	885,580
Excess of revenue over expenses	106,045	(35,046)	-	70,999	129,930
Purchase of capital assets	(1,803)	1,803	-	-	-
Payments of principal and interest – term loan due on demand	(49,256)	49,256	-	-	-
Net assets, end of year	230,623	355,886	500,000	1,086,509	1,015,510

Statement of Cash Flows (for the year ended December 31, 2025)

	2025	2024
Cash provided by (used for) the following activities		
Operating		
Membership Fees	70,999	129,930
Amortization	22,475	26,122
Unrealized gain on portfolio investments	(57,938)	(53,519)
Gain on sale of portfolio investments	(21,700)	(32,921)
	13,836	69,612
Changes in working capital accounts		
Accounts receivable	546	(577)
Prepaid expenses	7,762	(7,921)
Accounts payable and accrued liabilities	2,935	1,274
Unearned membership fees	25,370	7,452
	50,449	69,840
Financing		
Repayment of term loan due on demand	(36,685)	(21,814)
Investing		
Proceeds on disposal of portfolio investments	163,199	147,252
Net additions to portfolio investments	(157,379)	(155,207)
Purchase of capital assets	(1,803)	-
	4,017	(7,955)
Increase in cash resources	17,781	40,071
Cash resources, beginning of year	513,703	473,632
Cash resources, end of year	531,484	513,703

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Notes to the Financial Statements (for the year ended December 31, 2025)

1. Nature of the organization

The College of Medical Laboratory Technologist of Manitoba (the "Organization") was created by act of Legislature through Bill 13 of the 37th Legislature and is a not-for-profit organization and thus is exempt from income taxes under the Income Tax Act.

The Organization's purpose is to serve as the registering and certifying body for medical laboratory technologists in Manitoba in order to serve and protect the public interest.

2. Significant accounting policies

The financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations set out in Part III of the CPA Canada Handbook - Accounting, as issued by the Accounting Standards Board in Canada which are part of Canadian generally accepted accounting principles, and include the following significant accounting policies:

Cash

Cash includes balances with banks and short-term investments with maturities of three months or less. Cash subject to restrictions that prevent its use for current purposes is included in restricted cash.

Portfolio investments

Portfolio investments with prices quoted in an active market are measured at fair value while those that are not quoted in an active market are measured at cost less impairment.

Capital assets

Purchased capital assets are recorded at cost. Contributed capital assets are recorded at fair value at the date of contribution plus all costs directly attributable to the acquisition.

Amortization is provided using the straight-line method at rates intended to amortize the cost of assets over their estimated useful lives at the following rates:

	Rate
Buildings	40 years
Computer equipment	2-5 years
Office equipment	5 years
Database	10 years

Long-lived assets

Long-lived assets consist of capital assets. Long-lived assets held for use are measured and amortized as described in the applicable accounting policies.

When the Organization determines that a long-lived asset no longer has any long-term service potential to the Organization, the excess of its net carrying amount over any residual value is recognized as an expense in the statement of operations. Write downs are not reversed.

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2. Significant accounting policies (continued from previous page)

Revenue recognition

The Organization follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. Endowment contributions are recognized as direct increases in net assets.

Restricted investment income is recognized as revenue in the year in which the related expenses are incurred. Unrestricted investment income is recognized as revenue when earned.

Member fees are recognized as revenue in the fiscal period to which they relate.

Measurement uncertainty (use of estimates)

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period.

Accounts receivable are stated after the evaluation as to their collectibility and an appropriate allowance for doubtful accounts is provided where considered necessary. Amortization is based on the estimated useful lives of capital assets.

These estimates and assumptions are reviewed periodically and, as adjustments become necessary they are reported in excess of revenues and expenses in the period in which they become known.

Contributed materials

Contributions of materials are recognized both as contributions and expenses in the statement of operations when a fair value can be reasonably estimated and when the materials are used in the normal course of the Organization's operations and would otherwise have been purchased.

Financial instruments

The Organization recognizes financial instruments when the Organization becomes party to the contractual provisions of the financial instrument.

Arm's length financial instruments

Financial instruments originated/acquired or issued/assumed in an arm's length transaction ("arm's length financial instruments") are initially recorded at their fair value.

At initial recognition, the Organization may irrevocably elect to subsequently measure any arm's length financial instrument at fair value. The Organization has not made such an election during the year.

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2. Significant accounting policies (continued from previous page)

Financial instruments (continued from previous page)

The Organization assesses impairment of all its financial assets measured at cost or amortized cost. The Organization groups assets for impairment testing when available information is not sufficient to permit identification of each individually impaired financial asset in the group; there are numerous assets affected by the same factors; no asset is individually significant, etc. Management considers whether the issuer is having significant financial difficulty; whether there has been a breach in contract, such as a default or delinquency in interest or principal payments; etc. in determining whether objective evidence of impairment exists. When there is an indication of impairment, the Organization determines whether it has resulted in a significant adverse change in the expected timing or amount of future cash flows during the year.

With the exception of related party debt instruments and related party equity instruments initially measured at cost, the Organization reduces the carrying amount of any impaired financial assets to the highest of: the present value of cash flows expected to be generated by holding the assets; the amount that could be realized by selling the assets at the statement of financial position date; and the amount expected to be realized by exercising any rights to collateral held against those assets.

For related party debt instruments initially measured at cost, the Organization reduces the carrying amount of the asset (or group of assets), to the highest of: the undiscounted cash flows expected to be generated by holding the asset, or group of similar assets, excluding the interest and dividend payments of the instrument; the present value of cash flows expected to be generated by holding the assets; the amount that could be realized by selling the assets at the statement of financial position date; and the amount expected to be realized by exercising any rights to collateral held against those assets.

For related party equity instruments initially measured at cost, the Organization reduces the carrying amount of the asset (or group of assets), to the amount that could be realized by selling the asset(s) at the statement of financial position date.

Any impairment, which is not considered temporary, is included in current year excess of revenues over expenses.

The Organization reverses impairment losses on financial assets when there is a decrease in impairment and the decrease can be objectively related to an event occurring after the impairment loss was recognized. The amount of the reversal is recognized in excess of revenues over expenses in the year the reversal occurs.

3. Portfolio investments

	2025	2024
Measured at amortized cost:		
Redeemable GIC, earning interest at 4.55% (2024 – 4.55%), maturing May 2026	10,000	10,000
Measured at fair value:		
Fixed income and equity investments	706,952	633,134
	716,952	643,134

The change in fair value of portfolio investments during the year was a gain of \$57,938 (2024 - \$53,519)

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4. Capital assets

	Cost	Accumulated amortization	2025 Net book value
Land	100,000	-	100,000
Buildings	593,486	156,657	436,829
Computer equipment	10,366	9,014	1,352
Office equipment	195,774	185,824	9,950
Database	21,473	21,473	-
	921,099	372,968	548,131

	Cost	Accumulated amortization	2024 Net book value
Land	100,000	-	100,000
Buildings	593,486	138,455	455,031
Computer equipment	8,563	8,563	-
Office equipment	195,744	183,338	12,436
Database	21,473	20,137	1,336
	919,296	350,493	568,803

5. Accounts payable and accrued liabilities

	2025	2024
Trade payables	23,535	1,660
Credit Card	1,440	326
Wages	20,856	25,763
Accrued liabilities	8,691	23,838
	54,522	51,587

6. Bank credit facility

The Organization has a credit facility for an operating demand loan in the amount of \$150,000 with interest at prime plus 1.00% and a non-revolving demand loan in the amount of \$35,000 with interest at prime plus 1.00%. The facility was not used at December 31, 2025 (2024 - nil).

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7. Term loan due on demand

	2025	2024
Term loan due on demand, repayable in monthly instalments of \$4,171 per month bearing interest at prime plus 1%, due May 2030, secured with the Organization's building pledged as collateral, and a general security agreement.	192,245	228,930

Principal repayments on term loan due on demand in each of the next five years, assuming demand is not made are estimated as follows:

2026	36,619
2027	41,185
2028	43,921
2029	44,531
2030	25,989
	192,245

8. Financial instruments

The Organization, as part of its operations, carries a number of financial instruments. It is management's opinion that the Organization is not exposed to significant interest, currency, credit, liquidity or other price risks arising from these financial instruments except as otherwise disclosed.

Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. Changes in market interest rates may have an effect on the cash flows associated with some financial assets and liabilities, known as cash flow risk, and on the fair value of other financial assets or liabilities, known as price risk. The Organization is exposed to interest rate risk primarily relating to operating demand loan, term loan due on demand and portfolio investments.

Liquidity risk

Liquidity risk is the risk that the Organization will encounter difficulty in meeting obligations associated with financial liabilities. The Organization enters into transactions to borrow funds from financial institutions for which repayment is required at various maturity dates.

Other price risk

Other price risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices (other than those arising from interest rate risk or foreign currency risk), whether those changes are caused by factors specific to the individual financial instrument or its issuer, or factors affecting all similar financial instruments traded in the market. The Organization's investment in publicly-traded securities exposes the Organization to price risk as these investments are subject to price changes in an open market due to a variety of reasons including changes in market rates of interest, general economic indicators and restriction on credit markets.

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9. Internally restricted net assets

The Council (governing body) of the Organization has established an internally restricted fund for the purpose of funding future legal expenses.

The Organization may not use these internally restricted amounts for any other purposes without the approval of Council.

At year-end the legal fund was at \$500,000 (2024 - \$500,000).