



The Compassionate Friends *Lifeline*



TCF/SWMB: #2 -1321 - 13th Street
Brandon Manitoba R7A 4S5 (204) 727-1823 (727-1TCF)

*July * August * September 2005*

*www.compassionatefriends.ca ** email ~ tcf@compassionatefriends.ca*

*If I could catch a rainbow
I would do it just for you,
And share with you its beauty
On the days you're feeling blue.*

*If I could build a mountain
You could call your very own,
A place to find serenity
A place to be alone.*

*If I could take your troubles
I would toss them in the sea,
But all these things I'm finding
Are impossible for me.*

*I cannot build a mountain
Or catch a rainbow fair,
But let me be what I know best
A friend that's always there*

Author unknown

The Compassionate Friends Canada:

Phone TOLL FREE: 1-866-823-0141 www.TCFCanada.net
NationalOffice@TCFCanada.net



This beautiful poem spoke so eloquently to the feelings so many have I wanted to share it with you, even though the circumstance of his grief are different from yours.

Say Jenny

By George Lopez

*The curtain descends
The moment has passed
Her life fades into the shadows,
Her name no longer uttered for fear of
upsetting me.*

*The drama is over.
The spotlight is off.
The applause are silent.*

*But for me, the play will never end.
The memories will go on forever.
On the stage of my life, she was both lead and
supporting actress.*

Say "Jenny " to me.

*Do not tiptoe around the greatest event of my
life.
Love does not die.
Her name is etched into my soul.
The sound of her voice forever echoes in my
mind.*

*It hurts to bury her memory in silence.
What she was in the flesh has now turned to
dust.
What she is in the spirit will always stir within
me.
She was my wife in the past, she is my guide
in the present, she is my hope for the future.*

Say "Jenny" to me

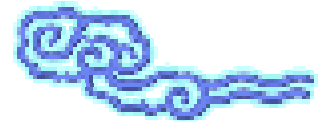
*You don't want to remind me.
You don't understand that I cannot forget.
I forgive you because you cannot know.
I forgive you because I don't want you to
know.
I do not judge you, for I was like you not too
long ago.*

I do not ask you to walk this road with me.

*There will be storms, child
There will be storms
And with each tempest
You will seem to stand alone
Against cruel winds*

*But with time, the rage and fury
Shall subside
And when the sky clears
You will find yourself
Clinging to someone
You would have never known
But for storms.*

"Storms"
by Margie DeMerell



*The ascent is steep and the burden heavy.
I walk it, not by choice, but with dignity.*

*I do what I have to do.
I am what I have to be.
What I have lost you cannot feel.
What I have gained you cannot see.*

Say "Jenny" to me.

*She and I will meet again, though in many
ways we have never parted.
She plays songs in my mind, draws pictures
in my dreams.
She is real and she is ethereal.
She was, she is, she will always be.
I still love her as I always did and as I always
will.*

Say "Jenny"

In loving memory of my wife, Jenny Beltran-Lopez

LLF TCF Los Angeles May 2005.





I'm a Mother too!

By J Rebgetz

"I'm a Mother too" she said
"Although I don't have a child
But in my heart I know the baby I carried
For those few short weeks
Is still with me and is mine

Please don't judge me
Because I don't have a child you can see
Don't say the life I lead is selfish
You cannot know about the emptiness and
pain
Which may diminish with time
But will always be there
I have a child in my heart
And I'm a Mother too!"

Theses two poems LLF <http://www.geocities.com/babiesinheaven/poems.htm>

I'll Never Know

By LisaMarie Emerle

How do I say goodbye ... when I didn't get
to say hello?
I want so bad to keep you ... how do I let
you go?
I have so many dreams, so much love I
want to share
There's nothing I can do ...why is life un-
fair?
You're my perfect angel...I dreamed you
long ago
I never got to hold you but it breaks my
heart to let you go
The pain and confusion I feel inside
I can not explain...I can not describe
God will rock you in your cradle and watch
you as you sleep
I will love you in my heart ... it's all I get to
keep
you are blessed my child ... you're in
heaven up above
You'll never be alone...you have Mommy &
Daddy's love
Hush my little baby...you need not ever cry
You were always wanted! I wish you didn't
die
You'll be my sunshine in the daylight and
the brightest star at night
Reach for God's hand and go to the light
I would rather endure the pain of losing you
right now
Then the thought of you suffering thru life...
we'll get thru somehow
I was blessed to have you briefly...even
though I have to let you go
I wish I knew the reason but I guess I'll
never know

...Just Believe

For Katie



I know your heart is weary,
Such a heavy load you bear;
You think that Sarah's gone now,
But she's with you everywhere...
...just believe

She's still with you every morning
As you wake up from your sleep
Close beside you, never leaving
Gently wiping tears you weep...
...just believe

Watching over you as you stumble
Heavy-hearted through your days,
She's the kindness shown by strangers;
She's the hope that lights your way...
... just believe

And as you venture forth without her
Working hard to honour her
Making sure that she's remembered
She's the force that drives you there...
...just believe

She's so proud of her l'il sister
She knows just how hard you try
She's that gentle peace within you
Her arms hold you when you cry
She's the strength that keeps you going
She's the voice that cheers you on
And she needs you to remember
She's here with you; she's not gone...
...just believe

And she knows that some day, some time;
You will come to understand
That in those moments when you need her
She is always close a at hand
There beside you, gently guiding
Quietly showing you the way
Always with you; never leaving,
In your heart, she's there to stay...
...just believe

Sue Diotte, Arnprior Ont.
Mother of Katie and Sarah.



grief issues special to miscarriage



Miscarriage involves a number of potential significant losses and is a complex grief that can involve an additional kind of suffering that is not necessarily present with other types of bereavement. Not only have we lost our baby, we are suffering from the effects of a birth and a death and we usually do not have a baby to bury. A funeral normally gives others their cue of how to behave appropriately and when there isn't one they are often at a loss themselves and may not even realize we are grieving. This adds to our stress as we can then feel we need to explain this, whereas with a still-birth or loss of a child, everyone is aware of the devastation and expects us to grieve. People may not want to talk about what has happened and it's the only thing we can think of.

When our miscarriage has been early in the pregnancy (or even later) it can be minimized and invalidated but for us, it is the strength of the bond with our baby not the length of the pregnancy that determines the depth of our grief.

There are also the other losses that are more difficult to explain unless the person has had a miscarriage themselves, which is why talking to someone who has had one, can offer the most comfort and empathy. This can be a grandmother, mother, sister, friend, medical professional and even sometimes, unexpectedly, a woman who is perhaps only an acquaintance or even a stranger (as on a bulletin board) because they understand the feelings and possible losses involved like -

- the loss of the festivities of a joyous birth and perhaps future ones
- the loss of our dreams for this child and the future our family would have had together - we had made plans for life
- the loss of being able to call ourselves a mother (if no previous pregnancies)
- the loss of access to successful womanhood (in our own or others eyes)
- the loss of trust in the body we feel has betrayed us
- the actual physical loss and the fear that can be felt from the amount of blood passed
- the confusion and dismay when experiencing a 'blighted ovum' when there is only an empty sac
- the loss of innocence for future pregnancies
- the loss of the belief system we didn't even necessarily recognize we held that says "this won't happen to me"
- the loss of our basic trust in life
- the loss of control over our expectations of life
- the loss of the achievement of a goal we had set for ourselves (this may not have been experienced before)
- the loss of self-confidence
- the loss of control of our feelings
- the threat of loss of our identity
- the failure to reproduce when the body is giving monthly signals of fertility
- the illogical shame, guilt or embarrassment
- the worries or fears that this amount of grief (over what is often seen as a minor blip in life) cannot be normal
- the feeling we should hide our loss and not talk about it as others think we are over-reacting
- to be unable to do what other women seem easily able to do as a 'natural part of life' and our jealousy and anger of that
- the loss or change in relationships (sometimes permanently) as we experience others lack of understanding and the isolation and loneliness this causes
- dealing with others' inappropriate comments, some with the best of intentions

- dealing with the thoughtless attitude of others, who have children without experiencing problems, which can be complacent, smug or pitying (perhaps unintentionally)
- dealing with our feelings over others' pregnancies (relatives being even more difficult), especially when they are due around the time we would have been and then later their new babies
- our strong reaction when we observe children being mistreated, feeling how precious they would be to us
- the 'what if's' or 'if only's' that may result from us not even knowing we were pregnant
- the thought that we have somehow killed our baby, or we did something wrong
- the longing for our baby not to be taken away with a D&C even when we know he or she is dead
- the loss of our last chance of having a child because of our age
- the loss of our last chance to conceive because of the inability to pay or be eligible for further IVF treatment
- the feeling we have let our partner/others down
- the guilt and confusion if we have previously had an abortion
- the sometimes harsh judgements we make about ourselves

Living in a world where science has overcome many things, and especially in the health area, she can be shocked and dismayed to find that there are no straight-forward answers to miscarriage from the health professionals. Sometimes their pragmatic attitude to miscarriage can be very hurtful. Referring to the baby as 'clots' or 'tissue' and their use of the medical term 'abortion' in conjunction with a 'miscarriage' seems harsh and judgmental to us. A miscarriage can be seen as a minor medical occurrence by them and the grief that it can generate is not always understood. We have found that women heal more quickly when they experience an understanding and empathetic attitude from the medical professionals who they come in contact with during this devastating experience..

In this century with the expectation of 'instant everything' and 'women can do it!' along with perhaps not experiencing death, there is also not the sense of acceptance and resignation of life's realities, which could help with the acceptance of losses.

As women (certainly in New Zealand) now have their children later, average age 28.5 years, and their genetic signals intensify (they become aware of their biological clock ticking), so their reaction to loss can be stronger. Their chances of a healthy baby lessen with age too. Women are born with about 2 million eggs although only about 400 of these will be released in our lifetime. The perfection of these eggs decreases with a woman's age and from approximately 35 years on, the rate of decline accelerates (something many women are not aware of). This leads to a higher rate of pregnancy loss and can also create problems even if the baby is carried to full term. Women can feel pressured (by themselves or others) to try again quickly, often not taking the time to allow the grief from their miscarriage to pass. This can have consequences such as partnership stress and/or post-natal depression later following a successful pregnancy.

Women are always looking for answers to 'why' and, although there are reasons, they do not usually find out what they are, so miscarriage grief is not so much about finding the answer they yearn for, as learning how to live without one.



When one door closes, another opens. But we often look so regretfully upon the closed door that we don't see the one that has opened for us. - Alexander Graham Bell



Bibliotherapy for Bereaved Siblings

What is it? How do you use it?

Bibliotherapy means to use the reading of books as a way to heal yourself or solve a problem. Although it is often associated with "self-help" books, any kind of book, fiction or nonfiction, can be used. Bibliotherapy is a dynamic process, by which I mean that you meet the author in the pages of the book. As you read, a dialog begins to take place between you and the author. You interpret what you read in light of your own experiences, and thus become a part of the book.

CAUTION: This kind of reading may bring unresolved feelings to the surface. Make sure you have emotional support available to you when you undertake bibliotherapy.

One of the most troublesome results of losing a sibling is that you feel powerless. In a flash, your power is robbed from you. Reading and actively using bibliotherapy can help you get some of that power back. As you gather information, identify language and feelings that define what happened to you, you begin to gain some mastery of the experience. Your attempt to understand what you read and effort to compare and contrast it to your experience creates new, hopefully beneficial ways of thinking and feeling.

For bereaved siblings, some of the benefits can be to:

- Give you a vocabulary about the subject of sibling grief and sibling loss
- Gather information about sibling loss in general
- Help you work through your experience by giving you an opportunity to compare and contrast your experience with that described in the book
- Help you identify and name your feelings about the loss.
- Reduce your feelings of isolation as you recognize characters who remind you of yourself
- Give you a sense of perspective about the level of resources and support available to you at the time of the loss.
- Let you "go back in time" by observing a character who is the age that you were at the time of your sibling's death
- Help you see that your negative emotions, such as jealousy and guilt, are normal
- Let you see how the loss impacted others (which you may have missed if you were numb after the loss.)
- Learn how other bereaved siblings adjusted to the loss.
- Make it easier for you to tell your story, and to place the experience of loss within the story of your life.
- Provide catharsis, or the release of buried emotions.
- Encourage insight and self-awareness.
- Help break up stagnant ways of thinking about your experience.
- Stimulate your own creativity

One difference between simply reading and *bibliotherapy* is that of intention. You purposely choose the book because you believe it may solve a problem or facilitate healing. Since you are practicing bibliotherapy instead of just reading the book, follow these four basic steps: 1. Hoping 2. Reading 3. Evaluating 4. Creating

Hoping

The first step is an attitude of hopefulness and curiosity. The reading of books during grief seems to be something that people either do a lot of, or not at all. Those that do not sometimes reject the idea that reading a book can be helpful because of preset attitudes, and this could prevent them from accessing a viable source of support. As much as you can, try to let go of negative attitudes about a book while you carry out this exercise. To benefit from bibliotherapy, you need to have an open mind.

Reading

Step two is to read the book. Try to find time when you won't be disturbed. Then read the book, taking notes if necessary.

Evaluating

Step three is the most important part of the exercise. Think about what you have read and give it some time to sink in. Then talk about it with a therapist, spouse, or trusted friend. Evaluate the book from the point of view of the story of the loss AND as a piece of written material. You may, for example, find the surviving sibling's story to be thought provoking, even though you think the writing is terrible. You may have enjoyed the inspired language in the book, and yet found the story of loss to be unrealistic. With your

listener there to support you, compare and contrast the story with your experience, and ask yourself what you have learned from the book.

If you like, use the guidelines here during the evaluating phase, by completing the following sentences and adding others:

1. Before I read the book, I hoped_____.
2. The character with whom I identified most was _____ because_____.
3. My experience differed from that of the surviving sibling in the book because _____.
4. My experience was like that of the surviving sibling in the book because _____.
5. The way the surviving sibling (and the family in the book) changed as a result of the loss was_____.
6. The way I changed (and my family) after our loss was_____.
7. Now that I realize how young (innocent, naïve) I was at the time of the loss, I _____.
8. I'm sorry that_____.
9. I wish that _____.
10. Talking to you about this feels_____.



Creating

Finally, try to bring some closure to your work with the book, perhaps by a creative effort of your own, such as drawing, painting, or writing. If you can't think of any ideas for this stage, use one of these.

1. Even if you stopped drawing at the age of 8, draw a picture related to the book, or to your own experience. Use callouts (comic strip balloons) and put in what you were thinking or what you said.
2. Make a list of words that described your feelings about the book and make them into a poem.
3. Make a collage from magazine pictures to illustrate some aspect of your experience.
4. Write a letter to the author of the book (which you don't have to send) and tell him or her about your story and how the book connected to it

Some Non-Fiction Books about the Death of a Sibling

All are written by a surviving sibling



A Book of Reasons_ John Vernon NF

When John Vernon's brother dies suddenly, he searches for reasons why his brother lived the way he did.

The Boy on the Green Bicycle : A Memoir_ Margaret Diehl NF

A look from adulthood back into childhood when the author was 9 years old and her 14 year old brother died. She talks about the separate grief of the family members and how the loss impacted her own life.

Dancing in the Dark : A Sister Grieves_ Elsie K. Neufeld David Augsburg NF

This is the story of a sister who writes about the death of her brother in a car accident.

Do They Have Bad Days in Heaven? Surviving the Suicide Loss of a Sibling_ Michelle Linn-Gust NF

when the author was a junior in college, her sister Diane committed suicide. It completely changed her life. This book offers education about sibling grief and hope to other suicide survivors.

If the Spirit Moves You : Love and Life After Death_ Justine Picardie NF

Written as a diary, the book describes the year in the life of the author after her sister's death from breast cancer.

The Jim and Dan Stories: A Journey of Grief and Faith_ Colleen Redman The author lost two adult brothers one month apart--a devastating loss that she dealt with by writing. The result is an inspiring book for those who have lost adult siblings.

Landscape Without Gravity : A Memoir of Grief_ Barbara Lazear Ascher NF

A beautifully written tribute to her brother, who died of AIDS. There is also information here about siblings and their grief, and how strong the bond is, regardless of whether the siblings were close.

Letters to Sara: The Agony of Adult Sibling Loss_ Anne McCurry NF

The author wrote letters to her sister after her death from breast cancer. The reader learns about the grief process along with the author as she searches for anything that will help her make sense of her loss.

Memories of My Sister : Dealing With Sudden Death_ Linda Rener NF

The author tells her personal story of loss and then goes on to talk about grief in general and normalize it for the reader.

Phoenix : A Brother's Life (Vintage)_ J.D. Dolan NF

When his brother, John, was injured in an explosion, the author had not spoken to him in five years. He is able to reconnect with the love he felt for his brother.



Standing Together

Most treasured moments of days in the past
The longings the tears they just seem to last
The dark places my heart sees, go on and on
 The joys of life no longer belong
 To any of us who have lost a child
The days are dark the nights are wild
 We are a group of people that see
 A pain in life that no other can see.
 Our loss is deep our loss endures
Our loss is a pain that there is no cure
 We look the same to others, that see
 Our days continue with lives that be.
But we're not the same—so deeply changed
So scarred and hurt our hearts are maimed
 We grope and struggle to find our way
 To find a purpose for every day
 When all we want is what we had
 To be a mum, to be a dad
 To our child, no longer to be
 Our joy our treasure our legacy.
We search for strength for air to breathe
 We look for meaning in what we see
Hold on to each other and bear our tears
 We stay together throughout the years
 A tragic bond that brings us here
Our hearts are broken we come to share
 To help each other to bear this pain
So maybe one day we'll feel sane again

Joan Sheloff
TCF Coquitlam, May/June 2005.
Written after her second TCF meeting
Nov 2004



*Flowers are the spirits of children whose footsteps
have passed from the earth, but reappear each
year to gladden the pathway for those now living*

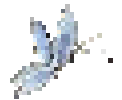
Cowlitz Indian legend



Don't Think of Him As Gone Away

Don't think of him as gone away--
 his journey's just begun;
 life holds so many facets--
 this earth is only one.
Just think of him as resting
 from the sorrows and tears
in a place of warmth and comfort
 where there are no days and years
Think how he must be wishing
 that we could know, today,
 how nothing but our sadness
 can really pass away.
And think of him living
in the hearts of those he touched...
for nothing loved is ever lost--
and he was loved so much.

Ellen Brenneman
Lif TCF Atlanta Online



“Death is nothing at all. It does not count. I have only slipped away into the next room. Nothing has happened. Everything remains exactly as it was. I am I, and you are you, and the old life that we lived so fondly together is untouched, unchanged. Whatever we were to each other, that we are still. Call me by the old familiar name. Speak of me in the easy way which you always used. Put no difference into your tone. Wear no forced air of solemnity or sorrow. Laugh as we always laughed at the little jokes that we enjoyed together. Play, smile, think of me, pray for me. Let my name be ever the household word that it always was. Let it be spoken without an effort, without the ghost of a shadow upon it. Life means all that it ever meant. It is the same as it ever was. There is absolute and unbroken continuity. What is this death but a negligible accident? Why should I be out of mind because I am out of sight? I am but waiting for you, for an interval, somewhere very near, just round the corner. All is well.”

Henry Scott Holland

Hope is grief's best music.

*From:
After Loss,
Coping With Suicide*

The Burden of Guilt

Guilt in some form is shared by most everyone who loses a loved one.



Death by suicide sends survivors into a spin of questioning. Before this happened to someone close to you, you may have held certain views about one who would commit such an act of self-destruction. You may have thought that suicide was very rare and that most people exhibit obvious signs of mental illness, confusion or addiction.

These beliefs lend themselves well to the idea that the death could have been prevented *if only* you had read the signals correctly. And that kind of thinking can lead to the greatest burden grievers can carry which is guilt.

In our dire need to understand what went wrong in the life and mind of our loved one, the period of deep and intense questioning begins immediately after the suicide and may continue for a time. *It may be the hurdle that we find most difficult to cross.* Because there are no definitive answers, our search for one has a tendency to intensify and to prolong the already complicated grief process. And during this time of deep introspection, we seem to return again and again to the issues surrounding fault and blame.

We ask, “Who’s fault was this?” and “Who’s to blame for this tragedy. Often the answers we construct lead directly to deep and seemingly unshakable feelings of guilt. Guilt comes in many packages—none of them pleasant. You may feel that you missed all the markers and if you had listened better, helped more, paid closer attention, etc. etc., you could have prevented the suicide. You are trying to assign blame and you may be seeing yourself as an accessory to what happened.

Your guilt may come in the form of despair because the weapon used or the place the suicide happened belonged to you. You believe that without these particular circumstances the person would still be alive. Again you believe that in a way, it was your fault.

Survivors often feel guilty because they fear they added to the stress and possible despair that led to the suicide by not being there every hour of every day, or by leaving them alone at the time, or by being human enough to attend to your own needs at times. Often the most caring, devoted loving individuals seem to feel they failed their loved one even when there is no rational reason to think this way.

Strong emotions are rarely rational. You may experience guilt because your loved one actually spoke of suicide or reached out to you in some way on the day it

happened.

Looking back it seems as if suicide should have been obvious to you and because you did not intervene in some way, you feel as if you were an accessory to what occurred. It is highly disturbing to believe that of one’s self and may take some professional assistance to be able to look at these feelings objectively.

You may feel guilty because you feel a sense of relief about the death. In some cases the time before the suicide may have been so chaotic and painful that to be free of that disruption brings a welcome release. Perhaps your loved one threatened suicide so often that you felt manipulated and victimized by his or her behavior.

You may feel that you missed all the markers and if you had listened better, helped more or paid closer attention you could have prevented the suicide.

Feeling liberated from living with this intensity is a natural and normal reaction. *Those who feel that suicide is a sin* feel deeply ashamed and humiliated that a family member could commit this kind of act. The guilt comes from taking on the family’s “sin” as your own. Some feel totally disgraced in the eyes of God and in the eyes of others.

Even if you have not identified with the kinds of guilt listed above, whenever one of our peers or someone close to us dies, we are forced to face our own mortality. For most that is such an uncomfortable thought that we try to avoid it at all costs. It produces *survivor’s guilt* which is a phenomenon we all experience several times in our lives.

Survivor’s guilt is very pronounced in families where a young person dies. All of those who are older than the deceased experience some degree of the “it should have been me” syndrome.

In my years of researching the behavior of survivors it is clear that grief and guilt are most usually synonymous. Because they go hand-in-hand, they are to some extent a part of everyone’s bereavement journey. Sometimes just knowing that the feelings and thoughts that seem to haunt us so are a natural part of processing grief, we can take small comfort knowing if other have walked this rocky path and found their way back...then so can we.

Take heart in small comforts for now.



AIDS TO RECOVERY

- * Decide on how you can comfortably answer the question, “How many children do you have?” The child that died was a member of your family but how you answer each person will depend on how much of your personal life you want to share.
- * Try a new activity, passive or active. Writing or drawing, creative releases, can vent a lot of pent-up feelings. Books can offer insights. Physical exercise is also a healthy outlet and can produce a good fatigue. Keeping a journal can be therapeutic.
- * If you are haunted by “if onlys”, make a lists so they fall into perspective.
- * Make an effort to think or care for another’s needs. It is a good way to channel your sensitive feelings.
- * Be open to support groups or friends who understand. Wholesome wit and laughter with friends lift the burden of sorrow awhile and are good.
- * First year events such as birthdays and anniversaries can be especially difficult. One way to handle them is to establish new patterns of celebration so they are not oppressive but are commemorative. One might use these occasions to reach out to others. Sometimes those special days have taken so much of our energy that the day is not so overwhelming as we had dreaded.
- * If you do not already have a faith, or life philosophy and belief, you may feel drawn towards affirming one. Grief comes to many; it is what we do with it that determines whether we diminish as individuals or grow.
- * Faith allows us to live life without having to know every answer or explanation. There are not always answers to “Why?”, but asking the difficult questions about the meaning of death can lead to a deeper appreciation of life.
- * One natural occurrence that happens to some parents as they adjust to the loss of a child is that they form an identification with some aspect of the child. They may incorporate or identify with some of his aspirations, ideals or even likes and dislikes. For parents of a young child this is harder because their child’s personality has not been as well defined. This fact may extend their period of mourning (especially true in infant death - see note below), because identification is a natural and helpful part of mourning. Our inner world is trying to comfort itself by enriching itself with a valued quality of the lost loved one.



Note:

Society views the death of an infant as not as “tragic” as other deaths and assumes that the parents will “get over” it quickly. But this is totally incorrect. On the contrary, recent studies, “*Motherhood and Mourning*” by Peppers and Knabb, 1989, have found “that mothers not only experience an unusual duration of their grief, but they may also experience an intensity of grief at the time of their loss.” It has been found that “to successfully accomplish grief work requires a degree of community sympathy and support.” (“Community” defined as friends, neighbors, relatives, doctores, nurses and hopital staff.) Because of society’s view towards infant death, parents who lose an infant are often denied any support. Thus, “They are not allowed to complete their grief work.” (Peppers and Knapp recommend support groups such as Compassionate Friends as a solution to community support.)

TCF Greater Ozarks Chapter

That best portion of a good man's life; his little, nameless, unremembered acts of kindness and love.

William Wordsworth

