



Care & Share Newsletter

November 2016

Local Services, Local Support



Cindy Feist
Executive Director

BE THANKFUL, BE WELL

It is that time of year again when leaves are changing color and a chill is in the air. That time, when thinking of eating brings thoughts of a warm bowl of soup or a nutritious meal to help keep us healthy during the flu season.

Thankfully this year we have been given a grant from The Women's Fund for nutrition classes. We are excited that Chris and Henriette from Habanera Farm are again teaching us to prepare foods to help build our energy and increase

our immune system. If interested, we still have some space available and are opening the classes to all cancer survivors and their caretakers in both Wicomico and Worcester Counties. Please see the flyer below for additional information.

From all of us at Women Supporting Women

HAPPY THANKSGIVING!

Regular Features

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Donation Slip Back Page

Cooking For The New Me

THURSDAYS	SATURDAYS
5:30-7:30PM	11AM-1PM
OCT 20	OCT 22
OCT 27	OCT 29
NOV 3	NOV 5
NOV 17	NOV 19

Each session includes four classes. Class topics are:

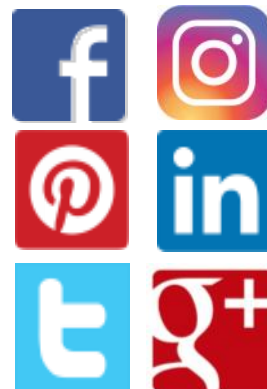
- Class 1: Detoxification Class 3: Energy Building
- Class 2: Healthy Weight Class 4: Immune Support

ALL CLASSES ARE FREE and teach you how to use healthy fats, vegetables and help you to become familiar with several sources of protein and the healthiest ways to prepare ingredients that are both familiar and new to you.

Call 410-548-7880 to register.



FOLLOW US:



Be thankful for what you have.
Your life, no matter how bad you think it is, is someone else's fairy tale.
-Wale Aveni

SURVIVOR SUPPORT GROUP MEETINGS

Salisbury Office
1320 Belmont Avenue, Suite 402
Salisbury, 410-548-7880

*6:30 pm, Thursday
November 3rd*

Topic/Speaker: Over the Counter Medications
What interacts with what??
Elisa Lawson, Certified Prosthesis
Specialist

Facilitator: Kyle Beebe

Pocomoke Community Center

1410 Market Street - Maryland Room
Pocomoke, 202-247-7526

*5:30 pm, Thursday
November 17th*

Topic/Speaker: Open Forum

Facilitator: Virginia Schneider

Crisfield

If you would like to talk to someone or be mentored
please call for an appointment 410-548-7880

Facilitator: Monique Welch, RN

Atlantic Health Center Conference Room

9714 Healthway Dr - Berlin, MD
Ocean City, 410-213-1177

*10:00 am, Wednesday
November 16th*

Topic/Speaker: Open Forum

Facilitator: Cindy Elliott, RN, Nurse Navigator
Bev Ward, RN Breast Care Navigator

****Lunch provided at ALL meetings...thank you AGH!***

Christ Episcopal Church

601 Church Street
Cambridge, 410-463-0946

*6:30 pm, Tuesday
November 22nd*

Topic/Speaker: Open Forum

Facilitator: Sue Todd, LCSW-C

SURVIVOR STORY



MEN HAVE BREASTS TOO!

By Stephen Sala
October 2016

In early August this year, the day before my family and I were headed to Myrtle Beach on vacation, I discovered a small lump on my right chest. I was a bit concerned, but decided it could wait until I returned from vacation. I scheduled a physical for the following week with my primary doctor. He told me not to worry. He said it was probably a cyst, but scheduled an ultrasound for me to be sure. At the ultrasound I could tell the nurses seemed concerned. I was sent for a mammogram the same day. The doctor told me the lump wasn't just a cyst after all and I would need a needle biopsy. A week after the biopsy, which was the day after Labor Day, my wife and I received the news I had breast cancer. I was one of 1000 men diagnosed with breast cancer.

As a 41-year-old dad of three children, I elected to have a bilateral mastectomy even though the genetic tests for BRCA 1/2 mutations were negative. This was a choice my wife and I made to reduce my risk of recurrence on my left side.

After my surgery on October 4th, the doctor told me the pathology results indicated I had early stage cancer in my left breast too. Thankfully, we received wonderful news my margins were clear and the tumors in both breasts were gone. We are still waiting to learn if the results of my MammoPrint to determine the likelihood of my tumor to reoccur, which will determine if I need chemotherapy.

Initially I struggled with the fact I had male breast cancer and was telling everyone I had a tumor on my chest. It took a few weeks to fully accept I had what most people perceived as a women's disease.

My breast cancer was caught early and it is a non-aggressive, non-genetic tumor. I am lucky. I believe through the work I do with Bringing Hope Home, Kisses for Kyle and some other cancer organizations, it made me aware of this horrible disease and prompted me to get my lump addressed. I believe this awareness has helped me, and my doctors, detect my tumor at a very early stage. My prognosis is very optimistic!

Now I started posting my story and journey on social media to raise male breast cancer awareness and to educate people about this disease which does not discriminate. Breast cancer can be a very treatable disease when detected early, but most men wait too long because they don't understand this can happen to men and women.

The day before my surgery was my twins' 11th birthday. We took a family trip to New York and happened to meet a few breast cancer survivors at the Today Show. During the taping I noticed one man, Michael Singer, who was a six-year survivor. I had a lengthy conversation with Michael that day and we exchanged information. It was fate that brought me to Michael on October 3rd in a city of millions of people. He introduced me to the Male Breast Cancer Coalition and the family at MBCC has provided me support through this difficult time.

MEDICAL UPDATE

Inspiration and Progress: Our National Commitment to Defeat Cancer



A NATIONAL CANCER INSTITUTE ANNUAL REPORT

by Douglas R. Lowy, MD, acting director of the National Cancer Institute

Every year, for the past two decades, the National Cancer Institute has had the honor of writing an article for *Coping's* July/August issue. While searching for a fitting theme for this year's contribution, I was struck by the challenge we sometimes face – both as individuals touched by cancer and as a nation – in articulating the inspiration needed to confront cancer.

As a cancer researcher, I am personally inspired by the fact that each day will bring new insights to our quest to better prevent, detect, and treat many forms of cancer in adults and children. It is a quest that has produced unmitigable progress, yet with much more still to do.

Thanks to the great strides we have made over the years, people are living longer today after a cancer diagnosis due to earlier detection and improved treatments. The number of people surviving cancer has more than doubled in the last quarter century in the United States. In 1992, there were 7 million survivors; in 2016, that number rose to 15.5 million; and by 2026, it is expected to increase to more than 20 million.

Working closely with leading cancer investigators in the U.S. and around the world is another source of inspiration for me. Years of investment in biomedical research have transformed both our understanding of and approach to researching and treating cancer. I hear unprecedented optimism that we are on the verge of pivotal advances in oncology. And just as important as what happens in research institutions like the NCI, there is also an extraordinary resurgence of commitment and determination across government, academia, industry, and the patient community.

During the president's final State of the Union address in January of this year, I was most gratified to hear President Barack Obama announce the launch of the Cancer Moonshot. The initiative, led by Vice President Joe Biden, aims to double the rate of progress in cancer research and bring therapies to more patients, striving to fast-track what might otherwise be achieved in ten years in just five. This opportunity to make tremendous breakthroughs in the field is enormously inspiring.

The number of people surviving cancer has more than doubled in the last quarter century in the United States.

To ensure that the Cancer Moonshot Initiative's goals and approaches are grounded in the best science, the White House established a Blue Ribbon Panel, a working group of the National Cancer Advisory Board. The Blue Ribbon Panel, whose 28 members include leading experts representing a range of scientific disciplines, government agencies, cancer centers, universities, and leaders from industry and the patient advocacy community, is responsible for recommending and guiding the scientific direction and cancer research efforts to be funded by the initiative over the coming years.

The panel created seven working groups, each comprising more than a dozen subject matter experts and patient advocates, to focus on providing the Vice President with their best thinking to guide the Cancer Moonshot. The working groups began their meetings in May, continuing weekly through mid-summer, and deliberated research opportunities in seven priority areas. The goal of each working group was to identify two to three of the most promising opportunities in cancer research that, with additional funding and focus, were poised to produce significant breakthroughs within a short period of time.

Both the White House and NCI cast the widest net possible and invited researchers and the general public to submit their best ideas for preventing and treating cancer for the Blue Ribbon Panel to consider. Approximately 850 ideas were submitted via NCI's [CancerResearchIdeas.cancer.gov](https://www.cancer.gov/cancerresearchideas) website. Members of the Blue Ribbon Panel also held sessions at the annual meetings of the American Association for Cancer Research and the American Society of Clinical Oncology, as well as participated in online chats to encourage people to submit research ideas for consideration.

More and more, research and treatment approaches are informed by input from the patient community, ensuring that patients and families are treated as partners.

As the Blue Ribbon Panel deliberations are winding down, other efforts and activities of the initiative are being launched. On June 29, the Vice President hosted an unprecedented Cancer Moonshot Summit, a daylong conference in Washington, D.C. Attendees included scientists, oncologists, and patients who came together to help galvanize the push to double the pace of cancer research. What made it both a national and local event were the many regional summits that also took place in communities across the nation.

In addition to the priority programs being recommended by the Blue Ribbon Panel, the Cancer Moonshot is expanding or adapting several existing government initiatives to make conducting and participating in cancer research easier for both researchers and patients:

⌘ **Increased Access to and Awareness of Cancer Clinical Trials**

Clinical trials are a critical part of the research process for the development of new treatments for cancer. But only about five percent of adult cancer patients in the U.S. currently participate in cancer clinical trials. Under the Cancer Moonshot, NCI is working to make searching for a clinical trial on the NCI website, cancer.gov, easier for patients, physicians, and others. We are also working to encourage more patients from racially/ethnically and socioeconomically diverse populations to consider participating in a cancer clinical trial. These communities experience a disproportionate burden of cancer and historically have not been well-represented in clinical trials. Achieving health equity in cancer detection, treatment, and survivorship requires clinical trials with populations that are representative of the nation's diversity.

⌘ **Expanded Precision Medicine Research**

The idea behind precision medicine is to treat patients according to their individual genes, lifestyles, and environments within which they live. By expanding the Precision Medicine Initiative announced by President Obama last year, we have the opportunity to accelerate research and provide clinicians with new tools to select targeted and tailored cancer prevention methods and therapies that will work best with the least toxicity in individual patients.

⌘ **Greater Research Access to Investigational Drugs**

Accessing drugs from different pharmaceutical companies to test combinations of therapies in clinical trials can be time-consuming, expensive, and difficult. But prescribing two or more drugs instead of just one can often help patients avoid developing resistance to a single drug and make therapies as effective as possible. To speed the development and delivery of effective combinations of treatments to cancer patients, NCI is developing a virtual cancer drug formulary, or library, which would give researchers access to a large number of drugs contributed by pharmaceutical companies to test in combination with others.

⌘ **Greater Access to Genomic Data**

Last month, NCI launched its Genomic Data Commons, a first-of-its-kind, open-access, cancer data-sharing repository that allows researchers to contribute data from decades of research studies conducted around the world into one repository to facilitate access, sharing, and reanalysis of the raw data. Among the data the GDC will store, with safeguards for patients' privacy, are the treatments that patients received and patient response, enabling investigators to gain a deeper understanding of cancer and develop more effective treatments.

The Cancer Moonshot has asked a great deal of the cancer community in stepping forward to accomplish a monumental amount of work in such a short period of time. The community, including the survivor and advocacy communities, has generously and enthusiastically responded with the understanding that what they are contributing now will make a difference for the future. I am grateful for their service, humbled by their contributions, and confident that the results will benefit everyone who cares about cancer.

More and more, research and treatment approaches are informed by input from the patient community, ensuring that patients and families are treated as partners. They bring a vital point of view to the process, providing a better understanding of the unique physical, psychological, social, and economic needs of the growing population of cancer survivors, and enhancing our ability to address those needs.

Working in partnership with survivors and patient advocates helps to keep our healthcare system in check, ensuring none of us loses sight of the fact that healthcare is not just about medicine, treatment, and statistics. Above all, it's about the enrichment of people's lives by improving outcomes and providing inspiration and hope.

COMPLEMENTARY CARE

Exercise and Cancer

WHAT HAVE WE LEARNED THE PAST 20 YEARS?

by Claudio Battaglini, PhD, FACS, and Erik Hanson, PhD, CSCS

Since the first studies examining the effects of exercise in cancer survivors began to be published in the mid-80s, the interest in this intriguing area of research has grown exponentially. Because exercise is non-invasive, effective, and can be done by cancer survivors in the comfort and convenience of their own homes, the medical community has started to give more attention to the use of exercise as a complementary intervention in cancer rehabilitation. The key benefits of exercise during and after cancer treatment include the alleviation of certain cancer treatment-related side effects, a reduced risk for cancer recurrence, and improvements in overall functionality, health, and longevity of cancer survivors.

With the field of exercise oncology now entering its third decade, what have we learned during the past two decades of investigating the role of exercise in cancer survivorship? Many excellent scientific reviews on the topic, focusing on traditional exercise interventions with at least one objective measurement of fitness, have been published in the last few years. All of them show evidence that exercise provides many benefits to cancer survivors. Let's take a closer look.

Overall Study Characteristics

- ◆ From the mid-80s to 1999: Most studies had low participant enrollment, the exercise interventions were only aerobic-based training programs, and most studies were conducted in people undergoing active treatment.
- ◆ From early 2000 to the mid-2000s: Larger sample sizes with different modes of exercise, including resistance training, began to be explored, and about half of the studies were conducted in people undergoing active treatment, with the other half including cancer survivors who had finished treatment.
- ◆ From the mid-2000s to today: A greater proportion of studies had improved methodological designs, with approximately 70 percent of the studies being randomized clinical trials in a supervised setting. Other types of cancers besides breast and prostate cancer were increasingly studied, and the studies focused on evaluating specific outcomes, for example body composition, immune responses, and exercise adherence.

Throughout the years, the most noticeable effects of exercise training were improvements in fatigue and depression.

Overall Study Results

- ◆ Throughout the years, the most noticeable effects of exercise training were improvements in fatigue and depression. Modest but clinically relevant increases have also been observed for cardiorespiratory capacity, strength, and lean body mass, as well as decreases in body fat percentage.
- ◆ For trials that examined the independent effects of strength training, significant and consistent gains in overall strength have been documented.
- ◆ Minimal adverse events due to exercise have been reported. When adverse events were reported, lightheadedness, low blood pressure, nausea, and weakness during exercise were the most common.

Based on all of the exercise oncology studies to date, regular exercise appears to promote many benefits that outweigh the potential adverse events for cancer survivors who are able to safely engage in regular physical activity during and after the completion of cancer treatments. Additional evidence is also available on the importance of being physically active in reducing the risk of cancer recurrence.

It is therefore recommended, according to guidelines set forth by the American College of Sports Medicine, that cancer survivors should engage in at least 150 minutes of moderate intensity exercise or 75 minutes of vigorous intensity exercise per week. This would equal to around 30 minutes of comfortably paced walking five times a week or about 25 minutes of faster paced walking three times a week.

Cancer survivors should include both aerobic and strength training as part of their exercise routines, as these modes of exercise promote specific benefits that can help survivors improve their overall stamina, functionality, physical and mental health, and quality of life. Still, there is no evidence that one type of exercise is superior to another, so you should choose activities that you find enjoyable and that you'll be more likely to stick with. Consistency is the key to reaping the benefits of exercise during and after cancer treatment.

What you are waiting for? Check with your doctor and start your exercise training today. You can also consult with an exercise science specialist to help you design a personalized exercise routine that is both effective and safe for cancer survivors.

Important!

Consult your doctor before beginning any type of exercise, even one that you participated in regularly prior to your cancer diagnosis. For those survivors with immune dysfunction, severe fatigue, or other comorbidities, it is even more imperative that you consult with your doctor before you begin your exercise program.

NUTRITIONAL INFORMATION

What does healthy mean? Tell FDA

By Author Alice RD Posted on October 5, 2016

Last week, the Food and Drug Administration (FDA) announced they want to redefine what the “healthy” claim on food packages means. Healthy is an official term that food manufacturers are allowed to put on a processed food if it meets certain FDA nutrient requirements.

The FDA rethinking comes after a manufacturer objected that their product could not be labeled healthy because it isn’t low fat – it contains whole nuts. They won their case, citing US Dietary Guidelines that say type of fat has more relevance to health than the amount of fat in a single food. High fat foods like nuts and avocados are part of overall healthy and cancer-protective diets, like the Mediterranean diet.

It’s important to know that these claims are designed for processed foods or food products, as a marketing tool – not for whole foods like vegetables, fruit, beans and whole grains like brown rice and barley. Marian Nestle explained this in her Food Politics blog last week.

Of course, healthy is really about your whole diet. No one food makes a diet healthy – or unhealthy. AICR’s evidence-based recommendations lay out what a healthy, cancer-protective diet is. It’s focused on vegetables, beans, fruit and whole grains – colorful, crunchy, fiber-filled plant foods. These can be fresh or minimally processed (such as frozen or canned).

Yet there are differences between food products, like breads or ready to eat cereals, for example. Do they primarily contain whole or lightly processed ingredients like whole grains, nuts and seeds, or are they loaded with refined grains, added sugar or saturated fats? This is where a clearly labeled food product that is truly health-promoting could be helpful for consumers.

The question FDA has for you: How would a healthy label help you make your food choices? What criteria should the FDA set for a healthy label?

AICR.org

American Institute for Cancer Research

Tax sugary drinks to lower obesity (and cancer risk), says World Health Organization

By Author Mya Nelson Posted on October 11, 2016

The World Health Organization is urging countries to tax sugary sodas, and other sugary drinks in order to lower consumption, which can reduce the numbers of people suffering from diabetes as well as cancer and other non-communicable diseases, according to a report they released today.

Regular consumption of sugary drinks leads to overweight and obesity, diabetes and tooth decay, the report highlights. With these their link to weight gain, sugary drinks also increase cancer risk. AICR research shows overweight and obesity increases risk of eleven cancers, including post-menopausal breast, colorectal and esophageal.

Avoiding sugary drinks is one of AICR’s Recommendations for Cancer Prevention.

Foods and beverages high in added sugars are a major source of excess calories, particularly for children, adolescents and young adults, says the report.

Worldwide, an estimated 42 million children aged under 5 were overweight or obese in 2015, an increase of about 11 million during the past 15 years. For adults, prevalence of obesity more than doubled between 1980 and 2014. Today’s report coincides with World Obesity Day, which this year focuses on highlighting and reversing childhood obesity trends.

The WHO report says there is growing and consistent evidence showing that taxes and subsidies are effective at reducing consumption of sugary drinks and increasing fruit and vegetable intake. For sugary drink reductions, evidence was strongest and most consistent for taxing the drinks from 20 to 50 percent. Sugary drinks include fruit drinks, sports drinks, energy drinks and sodas.

Adopting these policies will not only lead to the reduction of diabetes, cancer and other non-communicable diseases, the report states. It will also reduce the economic burden these diseases bring.

Autumn Wine Festival



WICOMICO COUNTY CHAPTER NEWS

1320 BELMONT AVENUE, SUITE 402
SALISBURY, MARYLAND 21804
410-548-7880

WICOMICO@WOMENSUPPORTINGWOMEN.ORG

OFFICE HOURS: MONDAY - FRIDAY, 9:00 - 4:00

Upcoming Events

Knitting Group
Salisbury Office
Nov 2nd, 12 pm

November 11th
Hope Dinner –Mafia Murder
Dove Pointe, Salisbury

FUN FACT:

Turducken, a turkey stuffed with a duck stuffed with a chicken, is becoming more popular in Thanksgiving (originated in Louisiana). A turducken is a de-boned turkey stuffed with a de-boned duck, which itself is stuffed with a small de-boned chicken. The cavity of the chicken and the rest of the gaps are filled with, at the very least, stuffing/dressing.

Wicomico County Chapter Staff Members

Cindy Feist
Executive Director

Emily Rantz
PR & Marketing Director

Natassia Feather
Office Manager

Sue Revelle
Mentoring Coordinator/Co-Founder

Can you believe it is already November??!! Last month was a whirlwind; filled with a plethora of events that we held, were directly involved with, and 3rd Party fundraisers. While we are disappointed that we had to cancel the Walk for Awareness due to flooding at Winterplace Park, we are extremely thankful for the patience and understanding of our supporter and sponsors.

Team Hoy shown below didn't let the weather stop them! Their team of 91 gathered and walked as a group in their neighborhood.



Our **Annual Hope Gala** is almost upon us!! **Ovation Dinner Theatre** is planning an evening filled with interactive intrigue in their production, **Mafia Murder Mystery**. This will be a night you do not want to miss...come decked out in your finest flapper and gangster gear and help bring back the ambience of the Roaring 20's! A prize will be given to the best dressed! Dinner is being prepared by the delicious **Milestone Catering** and we will have a mystery wine table (\$10 a bottle), a cupcake pull featuring the mouth watering cupcakes of **Sugar Rush by Theresa** and a chance to win a piece of custom jewelry by **Kyle Edwards**, a selfie station, live music and much more.

Please keep in mind that we have sold out of tickets the last two years, so make sure to purchase yours as soon as possible. For more information please see the flyer on page 11.

While we are ALWAYS thankful for our amazing volunteers, donations, fundraisers and participants at events throughout the year, we find ourselves wonderfully overwhelmed with the support we received during the month of October to benefit WSW. Thank You.

The Bank of Delmarva presents a check to Cindy for casual days held during the month of October.



NEW!!! WSW Group Nutrition Discussion

Sugar & Your Immune System

November 30th, 10:30 am - 11:30 am

At Women Supporting Women

RSVP by November 28th - Friend and/or family welcome

Mentoring Minute

Clean Eating

What is clean eating? Some people may think it relates to cleaning their fruits and vegetables, but it is about what foods you are consuming. Eating clean is not about calories. It is eating whole foods or "real" foods; ones un or minimally processed, refined, or handled. Purchase foods that are normally around the periphery of the grocery store. The processed foods are mainly in the middle. Processed foods are usually in boxes, cans, or plastic bags. Fresh or frozen are the things to look for, the ones with no chemicals, additives, GMO's and preservatives which are in the other not-so-natural fake foods.

1. Eat lots of plants - mostly foods that are off a tree, bush, plant or vine, and you've pretty much got it covered. The idea is to stay away from anything that humans (food corporations) have altered in any way. Organic are always better but more expensive.
2. Don't buy pre-packaged meat products because you never know what's in them. Get meat from the local butcher or butcher at the grocery store and cook, grind, or slice your own.
3. Eat grains that are still complete and haven't been broken down into "glue" -- ie. White breads. Try unusual grains like quinoa, rye, spelt, wild rice, barley, or oats.

No sodas, diet sodas, sugary coffees or heavy sugar laden sweets. Drink plenty of water, water, water.

Remember, you can exercise day after day, but if you make a run through your local drive-through afterwards or eat lots of unclean foods (goal is to eat none) every day, you just are not going to get anywhere fast.

****REMINDER THAT I AM OFFERING ONE-ON-ONE NUTRITION TRAINING FOR EATING HEALTHIER, CALL THE OFFICE TO SET UP AN APPOINTMENT LASTING ONE HOUR ON MON., TUES., OR WED. 410-548-7880. IT WILL BE TAYLORED TO YOUR NEEDS.****

Funding for this program is provided by a grant from MAERDAF.

Sue Revelle - Mentoring Coordinator




Dream Cars employees walked 19 MILES to raise awareness of breast cancer and donate \$1000!

ONLY
120
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NOW!

Women Supporting Women

Announces



MAFIA MURDERS

*An Audience-Interactive
Comedy/Murder Mystery Dinner Theatre*

Presented By
Ovation Dinner Theatre

Friday, November 11

5:30PM
Cocktail Hour

Event Location:
Dove Pointe, Salisbury MD

*Admission: \$55 per person
or \$400 per table of 8
Includes show, 3-course dinner,
& 1 complimentary drink*

RESERVATIONS: www.womensupportingwomen.org

COMMUNITY SUPPORT



Tall Pines Harbor Campground held a Pink weekend benefitting WSW and raised \$3531.00!!



Your Pie chose WSW as the recipient of donations made during their two day soft opening, raising \$2023.00.



2016 Endless Summer Car Show held at Tanger Outlets, OC, MD .



The Farmer's Wife in Hebron, MD held a breast cancer awareness day with a portion of proceeds donated to WSW totaling \$500.

DONOR THANKS

Individual

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In Memory Of:

Anita Procop
Wendy West

Betty Payne

Jennifer Donoway
Kathleen Timmons
Ruth Fletcher
Carolyn Thompson
Donald & Ginger Hall

In Honor Of:

Mary Henderson
From a dear friend

Business

Ayers Creek Adventures
Avery Hall Insurance Agency
Your Pie
The Farmer's Wife
Tall Pines Harbor Campground
The Bank of Delmarva
Dream Cars
Alon Davis MD

Civic

Delmar Elementary School
Wed. Night Ladies Bowling
Somerset Intermediate School



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Cancer Institute
Peninsula Regional Medical Center

Pink Ribbon

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Sharp Energy

Joke of the Month

It was almost Thanksgiving, but May's birthday is only two days before thanksgiving. Right before her birthday, she got a parrot named Squawky. He is a tamed parrot, but says inappropriate things. "My madam's is so friggin stupid. Always bossin' me around. Wait till I kick your ass!!!" May is getting frustrated over her parrot and she needs him to STOP SWEARING. She threw the parrot in the freezer and told him to come out when he stops swearing and respects her. After a few minutes, May put the parrot on the table and nuzzled it with a blanket. "Have you learned a lesson?" "Yes... One question though. What did the turkey and chicken do?"



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1320 Belmont Avenue ♥ Suite 402
Salisbury, MD 21804

RETURN SERVICE REQUESTED

Please contact the office if you are not reading
or if you no longer wish to receive our
newsletter. Thank you.

410-548-7880 or

Tassia@womensupportingwomen.org

Women Supporting Women 2016 Board of Directors

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Cindy Lunsford

Julie McKamey

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All donations stay 100% local - WSW is not affiliated with any national organizations.

I would like to make a donation:

Please use this gift where it is most needed.

Name: _____

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Phone: _____ Email: _____

Enclosed is a check for \$_____ made payable to WSW

Charge my: Visa Mastercard

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SPECIAL OCCASION GIVING:

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