

Amazing Aging!

For Seniors and Those Who Love Them

A free publication of the Jayhawk Area Agency on Aging, Inc.
Advocacy, Action and Answers on Aging for Shawnee, Jefferson and Douglas Counties

SPRING 2020



Our Mission

Jayhawk Area Agency on Aging, Inc. advocates on aging issues, builds community partnerships and implements programs within Shawnee, Jefferson, and Douglas counties to help seniors live independent and dignified lives.

- Is a 501(c)3 non-profit organization
- Is funded by tax-deductible contributions, federal funds, under state general funds and funds through local governments
- Does not discriminate on the basis of race, color, sex, national origin, age, religion, or disability



Margaret Officer and Lee Gerhard are caring for their spouses who are cognitively impaired. For each, it is a labor of love — but labor nonetheless. Please see story on page 3.

A Message from Susan Harris, JAAA Executive Director

Every spring Jayhawk Area Agency on Aging goes through a process known as allocations where a team of individuals determine what services and provider agencies will receive funding through the Older Americans Act to provide services to those age 60 and older. This year, as with many years, it is a difficult process determining what services will be funded with the limited funds received each year. The committee meets with providers to discuss what is going well, what needs to improve, and what the future holds for these providers and services. With the increase in the number of people age 60 and older residing in our service

area and the growth of funding not following suit, the Allocations Committee members have a tough job of making sure that services and funding are targeted to specific needs that will benefit the communities we serve.



Susan Harris

Older Americans Act services are not means tested in any way and they are provided on a donation basis, with that being said, donations are vital to the programs funded by the OAA. The donations received are returned back to the specific service as program income allowing for more services to be provided, the more donations received, the more services that can be provided. The allocation dollar and service amounts

determined by the Allocations Committee are submitted to Jayhawk Advisory Committee for review and recommendation to approve and then presented to the JAAA Board of Directors for approval and incorporation into the annual area plan.

Every May, we observe Older Americans Month and this year's theme is "Make Your Mark." The Administration for Community Living selected this theme to

encourage and celebrate countless contributions that older adults make to our communities. Their time, experience, and talents benefit family, peers, and neighbors every day. Communities, organizations, and individuals of all ages are also making their marks. This year's theme highlights the difference everyone can make — in the lives of older adults, in support of caregivers, and to strengthen communities.

CHAMPSS Orientation Sessions

Lawrence: Lawrence Public Library, first Monday of each month at 2 p.m.

May 4 June 1 July 6

Shawnee County: JAAA, first Wednesday of each month at 1:30 p.m. Shawnee residents must call JAAA receptionist to register for an orientation.

May 6 June 3 July 1

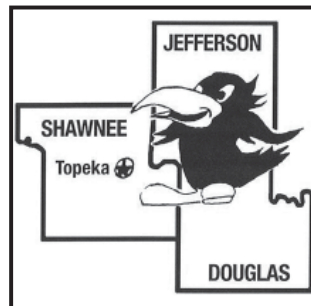
Jefferson County: residents may enroll at Topeka or Lawrence orientation sessions.

- Amazing Aging is a publication of Jayhawk Area Agency on Aging, Inc.
- Funded by annual contributions from readers like you, and advertising
- Copies distributed: 6,000+

You are encouraged to write us at:

Jayhawk Area Agency on Aging, Inc.
2910 SW Topeka Blvd.
Topeka, KS 66611-2121
(800) 798-1366 or (785) 235-1367

Marsha Henry Goff, editor



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Amazing Aging strives to provide readers with the information they need to live independent and productive lives. We also seek to feature stories of seniors who are active as workers, volunteers or engaged in hobbies. If you know a senior you would like to see featured in a future issue, please contact editor Marsha Henry Goff at mhgink@netscape.net or write to her in care of JAAA, 2910 SW Topeka Boulevard, Topeka, KS 66611.

A caregiver's life (with a cognitively impaired spouse), Part I

By Lee Gerhard and Margaret Officer

Editor's note: Dr. Lee Gerhard was State Geologist and Director of the Kansas Geological Survey prior to retirement, living in Lawrence for 30 years. A farm kid and Army veteran, his career included academia, industry and government. Increasing caregiver issues prompted his move to Franklin, Tennessee to be closer to family support.

Mrs. Margaret Officer has a Master's Degree in Education. She was a classroom teacher for 30+ years with Metropolitan Nashville Public Schools and Nashville State Community College. After retiring from the classroom, she served for 16 years as an educational consultant and mentor with Belmont University, Nashville Institute for the Arts, The Leonard Bernstein Center and Modern Red Schoolhouse. Margaret is a native Tennessean and has lived with her husband in the Nashville area all her adult life.

The authors met at an Alzheimer's Support Group meeting. They discovered they were neighbors with similar experiences caring for their spouses. Their stories of caring for their beloved spouses are compelling and will conclude with Part II in the next issue.

It's insidious. We don't see it happening until a significant event occurs. Then our spouses' cognitive decline smacks us in the face. We're guilty of not seeing the forest. We attribute slight nuances of behavior and personality change to simple aging, seeing only a few trees. First it might be our spouses forgetting little things. Then it's our spouses' conversations

being repetitive. Maybe their behavior changes. Something has gone terribly wrong. Our perfect hindsight focuses on the few hints thrown at us but which we never caught. We're guilty of insensitivity, of ignoring the obvious and of denying the reality we see every day.

Every caregiver for someone who is cognitively impaired has a story. Here are two of them.

Lee' story: Marbella, Spain, is a resort city by the Mediterranean. During our two-week visit I arranged for us to tour Alhambra and then to take a day trip to Tangier. Strangely, my wife did not have any interest in touring around Marbella and only grudgingly accompanied me on the two tours. She had always enthusiastically embraced new adventures, learning new skills. We spent a number of days just holed up in our room, reading. That was not normal.

About the same time we had two travel episodes on the road between Kansas and Tennessee, the first when she missed a left turn to cross the Mississippi despite me pointing out the turn well before. Then after a lunch break on the way home, another trip, she drove as usual while I took my post-lunch siesta. I woke up about an hour later and found the sun was to my left. We were driving north, not west. There were words exchanged. The episode left me uneasy.

When she returned from a trip to a specific store, I asked what she had purchased. "Nothing, "I couldn't find the store." A store she had visited for nearly 30 years. Then I asked what her doctor had said about a prob-



Margaret and Bob Officer in earlier times.

lem. "I couldn't find the doctor's office." Shortly thereafter our neurologist arranged an evaluation. I watched the first few minutes of the exercise. I knew. It hit like a lump of lead in the middle of my being. The results were horrible. "Significant cognitive impairment."

This was not what we planned. Then it got worse.

Margaret' story: My husband lost his sense of smell many years before other symptoms began to expose themselves. He bragged that if one had to lose a sense it should be the sense of smell. I noticed he began to ask the same questions of the same people during social discussions. Sometimes the friend would respond, "I just told you that!" and then repeat their answer. Later returning home, I would tell my husband that he had repeatedly asked the same questions and it appeared that he was not paying attention. His response was, "Really? I'll have to work on that!"

At the next yearly physical, I asked my husband to say some-

thing to the doctor about his memory issues since he was continuing to behave the same in social settings, even more so. The doctor gave him several of the usual tests and said my husband's memory was better than his! But we both knew that was not true.

When more and more memory issues became obvious, like forgetting to pay the bills or misunderstanding legal documents, I finally called his doctor for the name of a neurologist for more memory testing and of course, he was diagnosed with mild cognitive impairment. I was extremely angry, not at my husband but at this disease that was destroying him. After the diagnosis which I knew was coming, I became a student of the disease, trying to learn all I could about how it would manifest itself.

He realizes he has serious memory issues but tries so hard to make sense of things.

I cried for him....not for me. He is the best, kindest, most

CONTINUED ON PAGE FIVE

Two ways you can help us help seniors

S.O.S. (Sponsor Our Seniors)

JAAA is serious about our mission to help seniors stay in their homes where they are comfortable and content as long as possible. Sometimes only a little help is needed. Perhaps bathing is no longer safe or housekeeping duties are just too challenging for them. Maybe help is needed for grocery shopping. Not every senior has family nearby who can assist them. That is where we come in.

Seniors who are on Medicaid are helped by Older American Act (OAA) funds which mean services cost nothing, while Senior Care Act (SCA) funds are used to help seniors whose income exceeds the limits required by OAA. SCA funds assist those who can pay something for the services. The amount a senior pays is based on a sliding scale depending on income.

The graphic on this page shows that \$2,000 will provide two baths a week or two housekeeping services a week for an entire year. Often there are not enough of those funds to cover all the needs. We do not like to put seniors on waiting lists and S.O.S. (Sponsor Our Seniors) helps us avoid that. Any amount you wish to donate to this cause is greatly appreciated.

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What if you could give five percent of the cost of each of your eligible purchases on Amazon to Jayhawk Area Agency on Aging and it came

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S.O.S. Sponsor Our Seniors See what \$2,000 will do!

Any donation welcomed and appreciated!



B.A.T.H. Be A True Hero

\$2,000 will provide one Older Adult two baths a week for a year!

S.O.A.P. Supporting Older Adults Preference



\$2,000 will provide one Older Adult two homemaker services a week for a year!



Shawnee, Jefferson & Douglas Counties

Learn how to donate at:
<http://www.jhawkaaa.org/about-us/donate>

Caregiver's life

CONTINUED FROM PAGE THREE

thoughtful, funniest, most together person who has provided all I could ever ask for and this has to happen to him, and I can't help.

The following years became a learning process with a vast learning curve. There have been many tears, many smiles and much laughter.

Lifestyle Changes

As cognitive decline continues, simple tasks become difficult for the impaired amidst lifestyle upheaval. Spousal caregivers take on new responsibilities, many of them previously gender-defined, all wrenching explorations into mostly uncharted territory. Our roles don't reverse, instead we add new ones on top of our existing loads. Our backpacks now carry lead weights instead of feather pillows.

Now that there is impairment, who cooks, who cleans, who manages the home? Who cuts the grass, shovels the snow, fixes the leaking faucet, keeps the books, does the taxes, pays the bills, balances the checkbook or drives the car? The tasks that two people shared are now the province of one person.

While mental slippage is in early stages, the learning curve for the caregiver is very steep. Chefs are not created overnight nor is the business part of a home and family intuitive. All this while caring for a declining spouse, a third job. Now it's his, hers, and the most difficult, caregiver. It is doubtful that anyone not experiencing this can appreciate the stress of caregiving.

These are only the superficial, daily, lifestyle changes the caregiver undergoes. Massive lifestyle changes affect social events, friends, travel, hobbies, business and recreation. As the decline continues, if the couple traveled frequently, that activity is gradually curtailed. Friends sometimes drift away, uncomfortable with social contact with an ever-decreasing personality. Going out to dinner becomes a struggle. Attending concerts or other events ends. What used to be one person's overnight travel to hunt or fish, or to visit sorority sisters or to attend a book club tour vanishes. If the couple needs to move to a new location to be with family, entire social infrastructures are ripped asunder. Legal documents need updating. The impaired becomes totally dependent upon the caregiver. In turn, the caregiver can



Lee and Darcy Gerhard in earlier times.

become effectively isolated and losing independence.

Adult children can be helpful, but they have their own families to care for and despite the very best of intentions, they cannot be available for routine assistance.

Progression

Cognitive impairment, whether deemed dementia (a term we abhor as it derives from 'crazy') or Alzheimer's, is not curable and is inexorably progressive, albeit at varying rates of decline. What starts as simple forgetful episodes slide slowly into missing appointments and being lost in familiar surroundings. A burned casserole

becomes a kitchen fire. A stylish dresser becomes unkempt and hygiene significantly slips. The impaired individual may forget to brush teeth or to change clothes. Physical decline frequently accompanies mental decline, exacerbating difficulties. Sleeping hours change, frequently abbreviated early on and extended in later stages of decline. The caregiver knows this will happen but is powerless to prevent the decline. It truly is insidious. We can only adjust our level of care to the inevitable changes. Adaptation to the new reality is difficult, even overwhelming. But we do it. Until we no longer can.

S.O.S.

CONTINUED FROM PAGE FOUR

out of Amazon's pocket, not yours? Well, you can! Amazon Smile (smile.amazon.com) has exactly the same items and the same prices, same two-day delivery if you are a Prime member, as the Amazon site you cur-

rently use to order. Just go to <https://smile.amazon.com>, sign in with your Amazon.com credentials, search for and select JAAA as your charitable organization and start shopping. You only have to do that once. Just remember that, in order for five percent of your purchases to go to JAAA, you must be on the Amazon Smile site. You'll be supporting a great cause.

Here's something we think you'll want to know!

During Medicare Part D open enrollment, SHICK volunteers at Jayhawk Area Agency on Aging had over 2,500 customer contacts.

And we saved them a total of \$572,364 — an average of \$229 per person.



Elvis (aka Bob Lockwood of McLouth) is a very popular entertainer at Perry Senior Citizens' monthly luncheons. With his soundman Brian Cooper and recorded backup singing from his band, he puts on quite a show. He also targets some lucky audience members and presents them with teddy bears, leis or scarfs. Marianne Idhe of Ozawkie, soon to be 90-years-young, is the happy recipient of a blue Elvis scarf while he serenades her with "Love Me Tender."

If you would like to place your display ad in the SUMMER 2020 issue of *Amazing Aging*, please call Kevin at (785) 841-9417! The deadline is July 15.

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A story revisited: Why are our seniors [STILL] being left behind?

By Marsha Henry Goff

Two years ago I researched and wrote an article about retirees — most of whom had budgeted and planned for retirement — who learned that their fixed income was actually a declining income. Until the coronavirus shut the country down, the last three years have featured a booming economy with both wages and the stock market rising dramatically. On a fixed income, however, especially for those who rely solely on Social Security, the boom has been a bust.

As the seniors who were featured in the last article relate their current worries about tapping their dwindling reserves (some have depleted theirs), their requests for anonymity have been observed with the same pseudonyms used in the last article.

As Cheryl and her husband looked toward retirement two years ago, they were worried whether they would be able to stay in the beautiful home they built a dozen years previously. Cheryl was adamant that they did not want to deplete their 401Ks just to pay real estate property taxes. Now that both are retired and the Kansas legislature has not offered much-needed relief for senior homeowners — along with a steep rise in property taxes — the future they worried about is here.

The booming economy the last two years increased the value of their 401Ks but the recent shut-down due to the pandemic has taken away much of that gain. The couple has not yet decided what to do but say that until they are eligible for Medicare in a few months, COBRA (the Consoli-

dated Omnibus Budget Reconciliation Act), an insurance program for those who have lost or quit their jobs, has made quite a dent in their monthly income. Cobra can cost over \$6,000 for an individual and almost \$19,000 for a family annually.

Although retired with a KPERS pension, Sally continues to work part-time for a private school. Her main concerns are ever-increasing high real estate property taxes and tax on groceries. Kansas is one of only 18 states out of 50 that tax groceries. Sally is one of many Kansas residents who cannot understand why the legislature did not cap taxes on real estate for seniors before they rose so high. Even those who are not currently seniors will be one day or are watching their parents and grandparents struggle to pay taxes in order to live in the homes they worked so hard to buy.

For Rachel, who has health challenges that require she use a wheelchair, financial problems have worsened. The increases in Medicare and her Medigap policy greatly exceeded her 1.3% increase in Social Security benefits for the entire year. She notes that, “Taxes on my townhome will go up drastically. The 2019 valuation went up 11%. Once my first half taxes are paid from escrow in April, I expect a \$50/month increase as a minimum in my house payment. The early valuation for 2020, which I expect to change again this year, increased by a little more than 5%. Add this to water and waste, which the city stated could be double, the negative impact to income increases greatly.”

Her town home required main-



tenance that placed a big hit on her budget. Finding someone to repair her wheelchair is increasingly difficult. Because no company locally or nearby will accept payment from Medicare, she must rely on a national company. “Another repair to the wheelchair was delayed for almost five months because the national repair company could not find anyone to do the repair. They finally found someone who lived a good distance away and I was told I would need to pay \$100 to compensate. Fortunately, they were able to send the parts and a friend completed the repair instead.”

Rachel and her husband were both professionals and made plans for an enjoyable retirement. However she was widowed in her mid-50s and was disabled shortly before her husband died. One of the problems of disability is cost. Things once easily managed on her own, like housekeeping and minor household repairs, must be hired done. And because her investments which once provided a comfortable backup are now

negligible, earnings cannot begin to cover the increase in her cost of living. “Reserves” she says, “are rapidly being utilized to just make ends meet.”

Property taxes are still the number one worry for Chris and Louanne. The property values on their home increased over 50%. Even though the valuation statement offers the reassuring statement: *Please be aware that if your property value goes up, it does not necessarily mean you will pay more taxes. Likewise, if your property value goes down or does not change, it does not automatically mean you will pay less or the same amount of taxes. Your property taxes are based on how much your local government decides to spend on roads, parks, fire protection, health and other services each year.*

“Oh, really?” questions Louanne, “when was the last time your city or county *reduced* taxes on real estate? The power to tax really is the power to destroy.” If you ever wondered where

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that often cited quote originated, it was from John Marshall, the fourth Chief Justice of the US Supreme Court who wrote it in an opinion, an axiom that still stands today.

When I wrote the original article, the person that concerned me the most was Janice, a delightful senior who is still working because she struggles to make ends meet. She had a litany of worries about taxes, prices going up while her income remained unchanged, and medical insurance costs rising far more than the COLA she received from Social Security. She also mentioned that even though she had the same car and had not had a claim, her car insurance rose because she became a year older. About half of the states do not allow insurance companies to raise their rates on car insurance for seniors simply because they become older. Unfortunately for Janice and many other seniors residing here, Kansas is a state that allows that.

When I wrote the original article, Kansas was rated by Kiplinger as the eighth least friendly state to seniors. Instead of getting better the last two years, it has worsened. The state's average effective property tax rate is the 15th highest in the U.S. Of the counties JAAA serves, Douglas County has the second highest property tax in the state (Johnson County is first). Real estate taxes for residents of Shawnee and Jefferson Counties are lower than for Douglas County residents but not appreciably so. It is time for the legislature to act to help the seniors who have toiled for decades to make Kansas a great state.

A flu story: How my mother got her name

My mother was born in Oklahoma in 1917, the twelfth child of Jacob and Maude Shellhammer. Until she was two years old, she was called Baby because the family couldn't agree on a name for her.



The Shellhammer family in a 1917 photo. Babe is the fourth from the left in the back row and Jake is standing next to her on the right. My mother, though you can hardly see her, is the baby on her mother's lap.

The family's oldest child was a schoolteacher named Edna Grace, referred to as Babe and loved by all who knew her. She would have been considered a spinster at 27 years old were she not engaged to be married.

In 1918, American soldiers were fighting in World War I, the war to end all wars. But before the war ended, the Spanish flu, which began in the spring of 1918 as a relatively mild virus mutated in autumn into a deadly, highly contagious influenza that curiously attacked young, healthy people usually unaffected by flu, and killed its victims within hours or days of the onset of symptoms. It killed more young soldiers in all armies than died in combat.

The Spanish flu pandemic killed over 675,000 people in the United States. One of them was Babe, Jake and Maude's beloved firstborn. When she became ill, the family called the town's doctor who placed her in a sealed room and didn't allow visitors. Not even her fiancé was allowed to see her. If her illness followed the course of others who died, her skin turned blue as her lungs filled with fluid and she slowly suffocated.

But the flu wasn't finished with the family. Another child, Jake, Jr., was stricken. Because of his failure to save Babe, the doctor had lost the family's confidence and they called the local veterinarian to care for Jake. His treatment was very different. He placed Jake in a room, opened all the windows though it was October, and piled on the covers. Whether because of the veterinarian's innovative treatment or in spite of it, Jake survived. No other Shellhammer sibling contracted the flu.

By the time the spring of 1919 arrived and the pandemic waned, an estimated 20 to 50 million people had died worldwide. Some put the estimate even higher at 100 million, three percent of the world's population. In 1919 the Spanish flu pandemic ended — after lowering life expectancy in the US by 12 years — and so did World War I, the war to end all wars that did not.

And one more thing of importance occurred that year. On February 10 at the age of two, my mother was finally given her name: Genevieve June. It was the name that her sister Babe had chosen for her. — MHG



Genevieve June
Shellhammer Henry

Caregiver Support

Aging in Place

By Michele Dillon
JAAA ADRC Supervisor

I think we can all agree on two things. Healthcare is costly and aging is not for sissys. How do we save money on one while trying to maneuver the other? In this issue, I will discuss options for home modifications to help your loved one stay in their home for as long as they are able or choose too.

One of the main reasons why people have to move out of their homes is an increase in falls. Wear shoes with nonskid soles (not house slippers).

Be sure the home is well lit so that you can see things you might trip over.

Use night lights in the bedroom, bathroom, hallways and stairways.

Remove throw rugs or fasten them to the floor with carpet tape. Tack down carpet edges. Remove electrical cords from across pathways. Have grab bars put in the bathtub, shower and toilet area. Have handrails put on both sides of stairs. Go over all of your loved ones medications with their doctor. There are several that can cause lightheadedness or mess with the blood pressure, which can increase falls.

Remodeling

Decks, patios, porches, and approaches to doorways should be wide enough to allow a

walker, mobility scooter or wheelchair to pass easily. Stairs should be replaced in favor of gently sloping ramps with handrails or guardrails. These areas should also be a non-slip surface and covered if possible. Make sure your tub/shower is accessible. This may mean a roll-in shower or a walk-in tub and shower combination that reduces the need to step up and over the side of a bathtub. Handrails should be installed near toilets and tub/shower entrances.

Non-slip flooring outside of shower and toilet seat risers.

Tips for aging in place for seniors with Alzheimer's. If they are living alone these tips are only temporary as they will need to live with family or need 24/7 care at some point when the disease advances. These tips will help extend their time in the home.

- Eliminate clutter throughout the house, keeping pathways clear and reducing the risk of tripping.

- Keep frequently used items (such as cell phones and remote controls) in easy-to-remember and highly-visible locations.

- Install "smart" devices that shut down potentially dangerous appliances like stove tops if left unattended.

Install grab bars near showers and tubs and handrails near steps and stairwells.



Michele Dillon

- Install motorized stair lifts or in-home elevators to make floor-to-floor travel safer.

We all want to live at home as long as possible. Sometime we can do that and other times

it may not be realistic. Never make a loved one promise to not put you in a nursing home. That is an unrealistic expectation for a caregiver and creates an undue burden.



JAAA gets around! Look for us!

Caregivers' Support Groups

Baldwin Methodist Church, first Wednesday of each month, 1 p.m - 2 p.m.

May 6 June 3 July 1

Topeka/Shawnee Library, second Monday of each month, 3:30 p.m. - 4:30 p.m.

May 11 June 8 July 13

JAAA, third Friday of each month, 12:00 noon - 1:00 p.m.

May 15 June 19 July 17

Events and Presentations

Medicare Monday, we'll answer your Medicare questions, Topeka Public Library, 1 p.m. - 3 p.m.

May 4 June 1 July 6

Do It Yourself Medicare Part D, Topeka Public Library, third Monday of each month 1:00 p.m.

May 18 June 15 July 20

Grey Wolves in Meriden, Meriden United Methodist Church, third Tuesday of each month, 11 a.m.

May 19 June 16 July 21

Medicare Quarterly Evening, Topeka Public Library, 6:00 p.m. on **July 13**

The smiling bureaucrat

(Who knew it would be so hard to get a “real ID” Driver’s License?)

By Marsha Henry Goff

The bureaucrat in the graphic below looks mean. Mine today at the Driver’s License Bureau had a smile on his face and a pleasant enough demeanor but his “NO!” answer was the same. So I ask you: Is a smiling bureaucrat better than a frowning bureaucrat? Not, in my opinion, if the result is the same.

The instructions are clear: If you want your Driver’s License to be a Real ID you can use to board airplanes, you must bring documents, many documents. For me that was bringing: 1) a Birth Certificate showing proof of lawful presence; 2) a 1099 showing my full Social Security Number; my current Driver’s License and a Credit Card Statement showing my current address. Sounds easy enough, doesn’t it? I thought so, too, until my bureaucrat perused my documents, then said, “The names on your Birth Certificate and the other documents don’t match. The name on your Birth Certificate is different.”



Is “NO” easier to take from a smiling bureaucrat? NO, it is not.

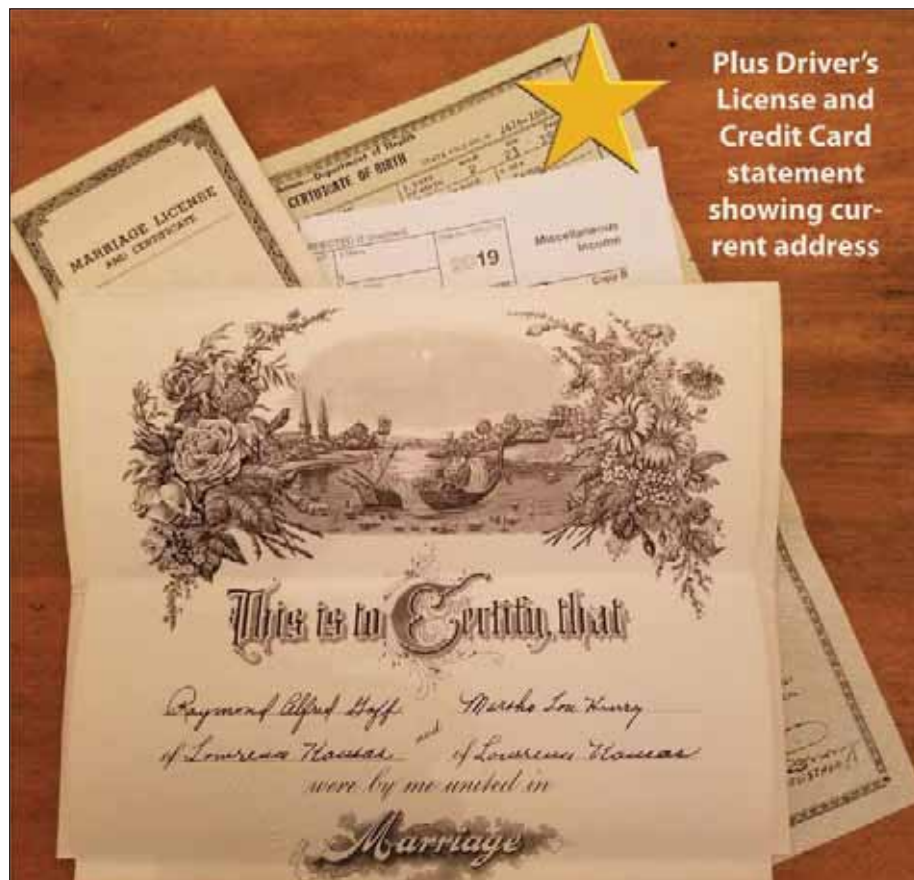
“That’s because I wasn’t married when I was born,” I said. But here’s the deal. My home state apparently lost the cards my mother and the doctor who delivered me sent to the Oklahoma Bureau of Vital Statistics. Hence, at the advanced age of 44, I had to get a delayed Birth Certificate in order to obtain a passport. How did I do that? Easy-peasy. I sent an Affidavit of Personal Knowledge from my mother who claimed she was present at my birth; my son Greg’s Birth Certificate listing my age at his birth; and my school record listing my parents’ names and my age when I entered high school.

The delayed birth certificate was a necessity because I couldn’t get a passport without it and when I realized I had to get a delayed Certificate of Birth. I told my sister Lesta, 13 months younger than I, that I was going to be younger than she was! I figured the hassle was worth shaving a few years off my age, don’t you?

I told my bureaucrat at the

Driver’s License Bureau that my present name was on my Birth Certificate. And it is. Although the certificate lists my name at birth as Marsha Lou Henry, on the Delayed Certificate of Birth itself, I had to sign and have notarized an Affidavit of Registrant (person whose birth is being recorded). My signature on the document which is actually a part of the Birth Certificate itself is Marsha Lou Henry Goff. That proof of change of my name seemed obvious to me. Sadly, my bureaucrat didn’t see it that way.

So Ray and I drove all the way home so I could find our marriage license (how many of you have one of those handy?) and bring it back. Two trips there and back adds up to 60 miles just to get a Real ID Driver’s License with a gold star on it. All that and 20 bucks, too. And when I expected to get some sympathy from good friends Betty and Louie by telling them about my horrendous experience, they had even worse stories about their Driver’s License renewals. Seems everyone has had a bad experience there. What’s yours?



Plus Driver’s License and Credit Card statement showing current address

Six documents and two trips totaling 60 miles just to get a gold star on my Driver’s License.

Visit us online at www.jhawkaaa.org



SHORT STACKS FOR A

TALL CAUSE

You're Invited to an Applebee's Flapjack Fundraiser Event to support

Jayhawk Area Agency on Aging

.....
Tickets: \$8.00 Date: 06/20/20 Time: 8 am - 10 am
.....

For Ticket Purchases Contact

Susan Harris
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sharris@jhawkaaa.org

Applebee's Location for Event

5928 SW 17th Street
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