

# LIFESPAN *news*

Volume 46 Number 5

Presenting the Pro-Life Message in Southeastern Michigan Since 1970

July/August 2017

## Pro-Life Luncheon

### October 21, 2017



Registration at 10:30 AM

Program begins at 11:00 AM

O'Kelly Banquet Hall

23663 Park St  
Dearborn, MI 48124

#### Why attend?

**SO MANY REASONS:** You are pro-life. You want to know what to tell someone about adoption as the loving option. You want to be better prepared to answer questions about adoption. You are personally interested in adoption for your family. You want to know about the loving option for unplanned pregnancies. Get legislative updates, too!

Pick a reason, or two, and register today! Call 734.422.6230 for more information!

**Tickets @ \$30 each**  
**(Non-Members,**  
Free One Year Member-  
ship included)

**Tickets @ \$25 each**  
**(Current LIFESPAN**  
Members)

**Tickets @ \$15 each**  
**(Students,**  
21 and younger)

## Words of Wisdom

# Dr. Paul Byrne: From preemies to end-of-life issues, one man has made a difference

By Rob Sample

When five-year-old Lilliana Dennis was born in February 2011 in Indianapolis, doctors informed her mom and dad that she suffered from a rare genetic condition that was “incompatible with life.” As Lilliana approaches her sixth birthday, she continues to defy the odds and prove conventional medical wisdom both wrong and wrongheaded.

Lilliana has Trisomy 18, also known as Edwards syndrome. As with Down syndrome, such babies are born with an extra chromosome, resulting in heart defects, respiratory problems and finger and toe abnormalities. Most die before their first birthday, the doctors said, and there was little the Dennises could do to stop that eventual outcome.

Fortunately, the Dennises did some of their own research, which contradicted what they had been told. In fact, one child graduated from college and lived to the age of 42. The Dennises also befriended Dr. Paul Byrne, a retired neonatologist, longtime pro-life activist, and founder of the Life Guardian Foundation (LifeGuardianFoundation.org). He recommended heart surgery for Lilliana, along with other life-saving measures, and although the road has been difficult, Lilliana’s prognosis continues to improve.

Dr. Byrne is no stranger to death-and-dying issues and the challenges posed by both preemies and babies with congenital illnesses. In 1963, he established the neonatal intensive care unit at Cardinal Glennon Children’s Hospital in St. Louis. Though he no longer makes hospital rounds, he stays very, very busy working on behalf of the preborn, sick newborns, the disabled, the elderly and people with illnesses deemed “terminal.”

“Not only do we have a culture of death in our society—it is a System of Death,” Dr. Byrne says. “We have to work hard to protect life from its beginning until true death. That’s why LifeGuardianFoundation was founded.”

“I retired a few years ago after practicing medicine for 55 years,” Dr. Byrne adds. “Yet, instead of a retirement party, I asked my family to have a ‘redirection party.’ My work has not stopped—in fact, I’m busier than ever! People have a way of finding out that I can help them in the cause for life and in their own difficult situations.”

### Small beginnings

To get a sense of how Dr. Byrne’s passion for saving lives all began, it’s helpful to go back to the very beginning, when he was a young doctor practicing at Cardinal Glennon Children’s Hospital in the mid-1960s. There, Dr. Byrne



established the hospital’s very first special care nursery for at-risk infants.

“Back then, there were no treatments for preemies and low-birthweight babies, the kinds of things we take for granted today,” he recalls. “I went to the administrator at Cardinal Glennon with the idea of creating a center where we could find ways to treat these babies. She said, ‘OK, let’s try it for a year.’”

After that first year, Dr. Byrne’s efforts had saved the lives of 30 babies. “How?” you might ask. For starters, he partnered with engineers working nearby on the space program. They had developed a plastic cuff to fit around the fingers of astronauts, enabling their blood pressure to be monitored during space missions. Together, they developed a spinoff that fit around the arm of a tiny baby: Before this invention, there was no way to monitor a baby’s blood pressure.

Dr. Byrne and his team also pioneered new techniques for feeding these babies intravenously as well as specially designed ventilators to augment their respiratory function. All were instrumental in helping such infants survive. Since preemies are so small, new, highly sensitive measurement protocols were also necessary to track their health.

“For instance, premature infants have very small total quantities of blood,” Dr. Byrne notes. “That required development of micro techniques to analyze blood for indicators of health or disease. These micro-techniques that were developed for sick babies are used for everyone. It was exciting for me to be able to participate in the development of what was then a brand-new field.”

### Signs of life

It was also heartening for him to witness babies who had been deemed hopeless develop into healthy children and

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# Planned Parenthood Annual Report: Abortion Biz Killed 328,348 Babies in Abortions in 2015

By Micaiah Bilger

The abortion chain Planned Parenthood finally released its annual report this week, about four months later than it usually does.

The report shows increases in abortion numbers and taxpayer funding in 2015, alongside decreases in contraception, breast exams and overall patient numbers.

Planned Parenthood continued to maintain its status as the largest abortion provider in the United States. The abortion group performed 328,348 abortions on unborn babies, 4,349 more than the previous year, according to the report.

At the same time, it saw 2.4 million patients, about 100,000 fewer than the previous year and about 500,000 fewer than five years ago. Contraception services, which the abortion chain touts as its primary service, also dropped from 2.94 million to 2.8 million during the past two years.

Meanwhile, the abortion chain received more taxpayer funding. The report shows Planned Parenthood receiving \$554.6 million, up from \$553.7 million the previous year. This increase occurred while pro-abortion President Barack Obama was in power.

This pattern is consistent with its annual reports from the past several years. Abortions and taxpayer funding keep going up, while patient numbers and other services go down.

Townhall's Laretta Brown pointed out one of the ironies in the annual report:

In the "Message from Our Leadership" section of the report, the organization boasts that "thanks to affordable access to effective contraception—we're at the lowest abortion rate since *Roe v. Wade* was decided."

An interesting claim given that the number of abortions the organization provides is up and the number of contraceptive services is down from last year's report.

Abortions are down in the United States as a whole. In 2014, abortion numbers dropped below 1 million for the first time in four decades, according to the Guttmacher Institute. This means Planned Parenthood is performing about one third of all abortions in the U.S.

Yet, Planned Parenthood continues to claim that abortions only make up about 3 percent of its services. Even liberal and mainstream media fact checkers have debunked the claim.

Right to Life of Michigan, which analyzed the latest report, thinks the abortion group may be manipulating its numbers in new ways to maintain its "3 percent" claim.

"Planned Parenthood counts certain parts of a procedure or visit as a service. This enables them to count or not count whatever they want. Looking at their annual reports over the years, frequently new categories of services get added to the report out of thin air. Let's use their most recent annual report as an example," the pro-life group wrote on its blog.



One new category this year is "well women exams," which include a pap test, breast exam and other services, according to the group.

"So, Planned Parenthood is counting the exam itself, the breast exam and the pap test as three services, tripling their numbers," according to RTL of Michigan. "... When Planned Parenthood adds all of the numbers up, they get 9,494,977 [total] services, an increase over the previous year despite a drop of 100,000 clients. Those services are just enough to keep abortion at 3.46 percent of their 'services,' awfully close to that magic 3.5 threshold of having to say '4 percent' instead."

Non-life destroying pregnancy services are extremely low in comparison to abortions. Prenatal care services dropped almost 50 percent in one year, from 17,419 to 9,419, and adoption referrals, while up slightly, remained extremely low at 2,889, according to the report.

Many have speculated that Planned Parenthood did not release its report in January, its usual timeframe, because of the on-going battles to defund it by state and federal lawmakers.

A recent congressional investigation into the abortion business involving its sales of aborted baby parts concluded with lawmakers recommending that Congress defund it. Planned Parenthood also has been caught in numerous scandals involving Medicaid fraud and failures to report suspected sex trafficking and sexual abuse of minors.

Earlier this year, Planned Parenthood leaders refused an offer to receive an increase in taxpayer funding if they stopped doing abortions. CEO Cecile Richards called the offer "obscene and insulting," making it very clear that abortions—not women's health care—are what really are important to Planned Parenthood.

Planned Parenthood claims it is an essential provider of women's health care, but its own annual reports show it continues to center its practices around aborting unborn babies.

—National Right to Life News Today, May 30, 2017

# 21 Abortion Clinics Have Closed in 2017, Planned Parenthood Has Shut Down 20 Since 2010

By Cheryl Sullenger

For the first five months of 2017, abortion clinic closures continue to outpace the opening of new abortion businesses.

This continues a national trend that shows the abortion industry is imploding. So far in 2017, there have been 21 closures of abortion and abortion referral facilities, while only five have been known to open.

Operation Rescue tracks each change in the number of abortion facilities in the U.S. and publishes annual reports on closures.

The 21 closures break down as follows:

- Seven surgical abortion facilities.
- Five medication abortion facilities.
- Nine abortion referral facilities.

"There are multiple factors that are leading to abortion clinic closures," said Operation Rescue President Troy Newman. "Of course, defunding efforts are one of the primary reasons for closures, but another important factor is failure of abortion businesses to comply with the law."

Abortion facilities in Delaware, Kentucky, Maryland, and Virginia, closed due to their own bad behavior.

- Premiere ObGyn in Wilmington, Delaware, and American Women's Services in Fairfax, Virginia, closed after being evicted for non-payment of rent. Both were owned by the notorious Steven Chase Brigham.

- EMW abortion facility in Lexington, Kentucky, was closed by the state for conducting abortions without a license.

- Planned Parenthood MetroDC in Silver Spring, Maryland, was evicted due to pressure from pro-life activists.

Meanwhile, Planned Parenthood organizations are undergoing a rapid reorganization. Four Iowa facilities affiliated with Planned Parenthood Heartland will soon close due to state defunding efforts. This includes three facilities that offered medical abortions. With these closures, Planned Parenthood will have shut down 20 facilities since 2010.

Other Planned Parenthood closures were announced by Planned Parenthood Rocky Mountains. They will close three referral clinics in New Mexico, two in Colorado, and the only Planned Parenthood facility in Wyoming. These closures are attributed to a dramatic reorganization in the face of the likely prospect that the Trump Administration will successfully bar them from profiting from all federal programs.

"Planned Parenthood has grossly overestimated the demand for abortion, which is their most profitable endeavor," said Newman.

"Abortion numbers are decreasing each year, and now with the threat of federal defunding, Planned Parenthood is rushing to reorganize in order to remain financially solvent. We expect to see more of this reorganization trend as the federal government works to redirect tax money to women's clinics that do not conduct abortions."

## Closures outpace new opens

Three of the 21 Texas abortion facilities that closed after the passage of the 2013 abortion safety laws have reopened in Texas as the result of the U.S. Supreme Court ruling in *Whole Women's Health v. Hellerstedt*, which struck down a number of abortion safety requirements that these facilities could not meet.

Those Texas abortion facilities that have reopened this year include:

- Northpark in Dallas, owned by the notorious Houston abortionist Douglas Karpen.

- Audre Rapoport Women's Health Center Planned Parenthood in Waco.

- Whole Women's Health of Austin.

Whole Women's Health shut down their low-volume Las Cruces, New Mexico, facility in January in order to have the staffing to reopen their busier Austin, Texas, location.

Similarly, east coast abortion chain owner Steven Chase Brigham opened the Capital Women's Services in Washington, D.C. earlier this month following the closure of his Wilmington, Delaware, facility that was evicted for non-payment of rent.

Finally, the Carafem abortion chain opened a new office in Augusta, Georgia, in February. While posing as a "trendy" abortion office, it offers third-world style manual aspiration abortions along with the abortion pill.

"So far this year, abortion business closures are outpacing new openings by more than four to one," said Newman. "It is clear that if Planned Parenthood is defunded by the Trump Administration, more abortion facilities and abortion referral centers will continue to close and more lives will be saved."

*Cheryl Sullenger is a leader of Operation Rescue.*

—LifeNews.com, May 24, 2017



## Nonprofits Behaving Badly – II

The entities listed below are linked to Planned Parenthood and/or its agenda. Life Decisions International has released this list, not as a list of boycott targets per se, but to inform pro-lifers about their activities.

### Girls, Inc.

(on record as pro-abortion and/or population control group)

**Contact:** Ms. Melanie Gray, Chm., Girls, Inc., 120 Wall St., New York, NY 10005, Phone: 800-374-4475

### Leukemia & Lymphoma Society

(advocates embryonic stem cell research)

**Contact:** Dr. James H. Davis, Chm., Leukemia & Lymphoma Society, 3 International Dr., Ste. 300, Rye Brook, NY 10573; Phone: 888-557-7177

### March of Dimes

(advocates embryonic stem cell research)

**Contact:** Ms. LaVerne H. Council, Chm., March of Dimes Foundation, 1275 Mamaroneck Ave., White Plains, NY 10605; Phone: 888-663-4637

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## 2017 ANNOUNCED ABORTION/REFERRAL FACILITY CLOSURES

As of May 23, 2017

	NAME	CITY	STATE	TYPE OF SERVICE	CLOSURE DATE	REASON
1	Women's Health Specialists	Sacramento	CA	Surgical, Abortion Pills	4/2017	Financial
2	Bossier City Medical Suite	Bossier City	LA	Surgical, Abortion Pills	3/2017	Financial
3	Planned Parenthood of Metro DC	Silver Spring	MD	Surgical, Abortion Pills	3/2017	Evicted
4	American Women's Services (Brigham)	Fairfax	VA	Surgical, Abortion Injection	1/2017	Unpaid rent
5	Whole Women's Health Las Cruces	Las Cruces	NM	Surgical, Abortion Pills	1/2017	Reorganization
6	Kanawha Surgicenter	Charleston	WV	Surgical, Abortion Pills	1/2017	Abortonist left
7	EMW Lexington	Lexington	KY	Surgical, Abortion Pills	1/2017	No abortion facility license
8	Bettendorf Health Center Planned Parenthood	Bettendorf	IA	Abortion Pills	As soon as it sells	State defunding
9	Burlington Health Center Planned Parenthood	Burlington	IA	Abortion Pills	6/2017	State defunding
10	Sioux City Health Center Planned Parenthood	Sioux City	IA	Abortion Pills	6/2017	State defunding
11	Premiere ObGyn (Brigham)	Wilmington	DE	Abortion Pills	5/2017	Eviction
12	Easton Health Center Planned Parenthood	Easton	PA	Abortion Pills	3/2017	Reorganization, Financial
13	Nob Hill Health Center Planned Parenthood	Albuquerque	NM	Abortion Referral	9/2017	Reorganization, Financial
14	Farmington Planned Parenthood	Farmington	NM	Abortion Referral	9/2017	Reorganization, Financial
15	Rio Rancho Health Center Planned Parenthood	Rio Rancho	NM	Abortion Referral	9/2017	Reorganization, Financial
16	Casper Health Center Planned Parenthood	Casper	WY	Abortion Referral	7/ 2017	Reorganization, Financial
17	Longmont Health Center Planned Parenthood	Longmont	CO	Abortion Referral	Mid-2017	Reorganization, Financial
18	Parker Express Planned Parenthood	Parker	CO	Abortion Referral	Mid-2017	Reorganization, Financial
19	Keokuk Health Center Planned Parenthood	Keokuk	IA	Abortion Referral	6/2017	State defunding
20	Bristol Health Center Planned Parenthood	Bristol	PA	Abortion Referral	3/2017	Reorganization, Financial
21	Circleville Health Center Planned Parenthood	Circleville	OH	Abortion Referral	1/2017	Reorganization, Financial

Chart: [OperationRescue.org](http://OperationRescue.org)

# If You Want Planned Parenthood Defunded, Here's What You Need to Do

By *Brad Mattes*

**A** battle is brewing in the U.S. Senate over funding of Planned Parenthood.

This is the opportunity for pro-life Republican leadership to deliver on past promises to protect unborn babies and women.

Will they?

We need all hands on deck, and here are a few specific things you can do to help.

The Senate is considering whether or not to fund Planned Parenthood with your tax dollars in the reconciliation bill. This legislation requires only a majority vote because it's not subject to a Senate filibuster, but a reconciliation bill limits the Senate's actions to measures related to the budget.

Withholding Medicaid reimbursement for 12 months will make a significant difference to the future of this abortion giant. Their infrastructure would immediately begin to deteriorate. Bills wouldn't be paid and payroll could not be met. Employees would quickly find other jobs and clients would find alternate sources for non-abortion-related services. The legislation passed in the House of Representatives stops for one year Medicaid reimbursement to Planned Parenthood, which accounts for about 85 percent of their tax funding of \$555-million dollars.

Planned Parenthood affiliates that have relied on mortgages to spend millions for mega abortion facilities or other improvements would be in a terrible financial bind.

When an organization relies so heavily on tax funding and its source of income has been largely "terminated," (pun intended) the downward spiral would be steep.

Dawn Laguens, Planned Parenthood Executive Vice President, is trying to frighten women with a Chicken Little impersonation, "People will lose access and women will die." What she isn't telling the media is that women are already dying at the hands of Planned Parenthood abortion facilities.

■ Holly Patterson died on 9/17/03 in San Francisco. Cause of death was clostridium sordellii infection.

■ Hoa Thuy (Vivian) Tran died on 12/29/03 in a hospital emergency room after an abortion in Costa Mesa, Calif.

■ Edrica Goode died on 2/14/07 in Riverside, Calif. Cause of death was toxic shock after a late-term abortion.

■ Tonya Reaves died on 7/20/12 in Chicago. She bled to death.

■ Cree Erwin-Sheppard died days after her abortion in Kalamazoo, Mich. Cree suffered a perforated uterus. She was found dead in her mother's home on 7/4/16.

Scores more women are being injured and maimed, some paying with their fertility because they had abortions or other surgical procedures at Planned Parenthood. Here's a small sample.

■ Linda McCowan in Overland Park, Kansas, was left in a coma after a botched tubal ligation when the oxygen tube was inserted into her stomach instead of her lung. Her injuries were inflicted on 11/2/00.

■ "Jane Roe" in Lincoln, Neb., lost 80% of her blood volume and required an emergency hysterectomy to repair a perforated uterus to save her life. Her injuries were inflicted on 8/17/07.

■ Shantese Butler in Washington, D.C., was left infertile after experiencing severe bleeding after parts of the baby's body were left inside her womb. This teenager also suffered a perforated uterus, torn small bowel and injuries to her vagina and cervix. Her injuries were inflicted on 9/7/08.

■ Shemika in Birmingham, Ala., was first the victim of a failed surgical abortion, after which they gave her the abortion pill. With the onset of complications, Shemika returned to the abortion facility but was refused help. A pro-life sidewalk counselor took her to the emergency room where doctors discovered a dead baby in her womb. Her injuries were inflicted on 6/21/10.

■ Roberta Clark in Birmingham, Ala., was left infertile after an undiagnosed tubal pregnancy and unnecessary suction abortion. Her injuries were inflicted on 8/20/10.

■ Anatheia Griego in Albuquerque, N.M., was seriously injured during a botched tubal ligation. Emergency surgery was required to repair a perforated bowel. Her injuries were inflicted on 8/29/11.

■ Ayanna Byer in Colorado Springs, Colo., required emergency surgery to remove body parts of the baby left behind. Her injuries were inflicted in October of 2012.

■ Melissa Cullen in Boston suffered an extreme loss of blood. Doctors at Massachusetts General Hospital told her "the abortion had been done wrong." Her injuries were inflicted in August of 2012.

As of October 2016, Planned Parenthood's flagship abortion facility in St. Louis had made 61 calls for ambulances since 2009. In spite of this high rate of injuries to women, their CEO Mary Kogut stated that the facility has an "excellent safety record."

The Planned Parenthood in Ann Arbor, Mich., requested two emergency ambulance calls within 60 days in 2015.

These documented deaths and injuries are merely the tip of the iceberg. Undoubtedly there are many more that have gone unnoticed or unreported.

A much, much higher number of women have paid a heavy price for their abortions, which have shattered their emotional peace and wellbeing. The Internet is teaming with women who deeply regret their abortions and are speaking out.

Planned Parenthood claims that their non-abortion related services are irreplaceable. Laguens declares, "There are not enough places for women to go to get this care."

She is lying and she knows it.

Women don't need Planned Parenthood.

There are over 13,000 women healthcare centers that provide low cost services—the ratio is 20 to one—and they far exceed the services Planned Parenthood offers. This quality, affordable healthcare is only a click away. Life Issues Institute is a proud cosponsor of [www.GetYourCare.org](http://www.GetYourCare.org) where women can easily find the center nearest them.

You and I must do everything we can to get our senators to support the reconciliation bill. I am encouraged by what Sen. John Cornyn, the number two Republican in the Senate, said, "We have a strong pro-life majority in the Senate, and so it's (defunding of Planned Parenthood) going to be in there.

However, pro-life Sen. Marco Rubio's comments greatly concern me. "...my focus right now is on the broader health care marketplace, getting it fixed. Whether I condition my vote on it (Planned Parenthood funding) is not something I'm prepared to say."

We must persuade senators that defending the lives of millions of innocent preborn children is paramount to other issues.

Dead babies don't need insurance.

If pro-life senators fail to act on our highest legislative priority, they will impose a self-inflicted wound on the prospects of their re-election and maintaining a majority in the House and Senate.

Contact your senators. Regardless of where they stand on funding Planned Parenthood, they need to hear from you. We've made it easy for you to help defend the babies.

During the election, pro-life politicians said, "Elect us and we'll be there for the babies!" We've elected them, now it's their turn to act.

Make sure they do.

*Bradley Mattes is the executive director of Life Issues Institute.  
—Life Issues Institute, June 15, 2017*

## Non-Profits Behaving Badly II

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### Multiple Sclerosis Society

(advocates embryonic stem cell research)

Contact: Mr. Peter A. Galligan, Chm., Nat'l Multiple Sclerosis Society, 733 3<sup>rd</sup> Fl., New York, NY 10017; Phone: 800-344-4867

### Salvation Army

(has work with and/or funded Planned Parenthood)

Contact: Cmr. David Jeffrey, Nat'l Cmd. Salvation Army USA, 615 Slaters Ln., Alexandria, VA 22313; Phone: 703-684-5500

*Remember: It is important that you stop doing business with boycott targets. This is the first step. The second step is to contact these organizations and tell them why you are no longer supporting them. We have included the contact person for each company.*

## PLANNED PARENTHOOD 2015-16 ANNUAL REPORT

COMPARED TO 2014-15 REPORT

### CANCER SCREENINGS



Decreased by  
16,947

### ABORTIONS



Increased  
by 4,349

### PAP TESTS & BREAST EXAMS



Decreased by  
19,843

### GOVERNMENT FUNDING



Increased by  
\$900,000

### CLIENTS SERVED



Decreased by  
100,000

### PRENATAL SERVICES



Decreased  
by 8,000

## WE DONT NEED PLANNED PARENTHOOD

Federally Qualified Healthcare Centers outnumber Planned Parenthoods nearly 20-to-1 and provide substantially more services than they do, excluding abortion. Planned Parenthood federal funding should go to these FQHCs, who truly help women and their families.

[www.wedontneedpp.com](http://www.wedontneedpp.com)





# LIFESPAN Chapter News

Oakland/Macomb Counties

## Batter Up!!

Who likes baseball? Lots of people do—so if you want to join us, you had better get your tickets quickly! We have a limited number of tickets for a fun evening at Jimmy John’s Field in Utica where we will see the Westside Woolly Mammoths v. the Birmingham Bloomfield Beavers on August 17<sup>th</sup>. You say you have never heard of them? Don’t worry—there are players on both those teams who will one day make a name for themselves and you can say you saw them when they were not well known.

Jimmy John’s provides quality baseball in a very family-friendly atmosphere—lots of good “baseball” food—hot dogs, popcorn, peanuts and ice cream. Younger children will enjoy the antics of the team mascots and may even catch a t-shirt that they toss into the crowd.

There is not a “bad seat in the house,” and it all provides a fun evening for LIFESPAN families and friends. Tickets are \$15 and there is ample parking for your vehicle. The game begins at 7:05 pm on Thursday, August 17<sup>th</sup>. Come early and visit. Call the LIFESPAN office, 248-816-1546, for details and tickets. Play Ball!!!

## Candy Bars

Thanks to all who offered candy bars to the dads at their parishes on Father’s Day. It seems that our dads

sometimes take a back seat on their day as compared to Mother’s Day and the candy bars are our way of telling them that we appreciate all they do. Remember, they give us their names, they give us roots and wings, and they offer their strong shoulders when we need support.

## Book Sale

Elsewhere in this newsletter you will see notice of our book sale. It is different from the ones we have held in past years, but the books are still bargains! Angels, Saints and Stuff is a bit of a drive from the Oakland/Macomb area, but the store not only has our books on offer, but beautiful antiques, jewelry and religious articles. Well worth the trip!

## Entertainment Books

Speaking of books, we have a limited supply of 2017 Entertainment Books in the office. Purchase a 2018 book (due in the office in early August) now and you will receive a 2017 book, good until December, for free. Call the office for details.

1637 W. Big Beaver Rd., Suite G, Troy, MI 48084-3540

Phone: 248-816-1546

e-mail: oakmac@rtl-lifespan.org

Office Hours: Monday-Friday 9-3

Diane Trombley, Director/Ofc. Mgr.

Lynn Gura, Ofc. Staff & Youth Director

Wayne County

## SAVE AND SUPPORT!



It’s time to SAVE! We are taking pre-orders for the 2018 Entertainment Books at the Wayne County Chapter, NOW!

As a special bonus, when you pay your \$30, you will also receive the 2017 Entertainment Book which is good until December 30, 2017. That is TWO books for the price of one! Supplies of the 2017 Books are **extremely** limited and are given out with pre-order on a first-come-first-served basis.



Activate the card that comes in the book and use the “Entertainment Book app” on a smartphone to really get amazing savings!

Don’t have a smartphone? You still can use the paper coupons that are in the E-Book! You could also pass the card on to a son/daughter, grandchild or friend who has a smartphone so that you both benefit!

Last year, I saved over \$175 dollars before I stopped tracking. It’s a great way to save money and support LIFESPAN!



The Wayne County Office will be closed from July 3rd-July 17th. Anne Marie is headed out for a mission trip to Ecuador, and Eileen is taking time to be with her family. Summer hours will resume on Tuesday, July 18th, from 9 am-12 pm. Appointments can be made outside of summer hours.

As we have an historically tight budget due to lowered donations during the summer months, this will also be a cost-saving measure for our chapter.



Remember, as of January 1, 2017, the Wayne County Chapter is a 501 c (3), which means that your **donations are tax-deductible!** Make your donation really count and support the cause of LIFE, by **supporting the Wayne County Chapter of Right to Life – LIFESPAN!**

32540 Schoolcraft Rd., Ste. 210, Livonia, MI 48150-4305

Phone 734-422-6230 • Fax 734-422-8116

e-mail: wcdr@rtl-lifespan.org

Office Hours: MW 10:30-4; TTh: 9-2:30; Friday Closed

Eileen Brandt, Director

Anne Marie Morin, Office Manager



## Wee Care

Dear Friends,  
When you and I pray generically for all the moms and their babies, most of the time we never know how those prayers help make a difference in their lives.

But, I am sure that your prayers did make a difference in one teeny, precious life. Angel arrived early—very early! She weighed just over 1 lb! At 2 lbs., her mom's social worker called—the prognosis was good. Against all odds, it looked like this tiny fighter was going to make it!

Her mom had nothing for her and was spending every day at the hospital—telling her how much she was loved and begging her to keep fighting.

At the glorious weight of 3 lbs., I began to put together a layette filled with tiny sleepers, onesies, receiving blankets, sheets, towels and the smallest diapers I could find. (I have a small supply of preemie clothes and found the tiniest outfits that could fit a babydoll. To say I was having fun putting this package together is an understatement!)

Yesterday, I received the call—at 3lbs. 10oz., she was going home! The social worker came over and picked up her package, and on top was a pink preemie sleeper that said "I am Loved" and a white, soft blanket that said "God bless this child." (I think, thanks to your prayers, He already has!)

Please keep Angel in your prayers and all my babies! And, thank you for providing all of the beautiful gifts I was able to give her! God bless you! *Love, Karen*

*"A person's a person,  
no matter how small."  
~ Horton Hears a Who ~*



**A Program of Right to Life - LIFESPAN Educational Fund**  
32540 Schoolcraft Rd., Ste. 100, Livonia, MI 48150-4305  
Phone: 734-524-0165 • Fax: 734-524-0166

**Office Hours: By appointment; Karen Patrosso, Director**  
*All material and monetary donations to Wee Care are tax-deductible. Checks must be made payable to Right to Life - LIFESPAN Educational Fund.*

## Michigan Nurses For Life

### 2017 Conference

### End of Life Decisions: Who Will Make Yours?

Saturday, October 7, 2017 • 8:00 am—12:30 pm  
St. Joseph Mercy Oakland Hospital • Pontiac, Michigan

#### Death, Doctors and Dilemmas: A Nurse's Experience



Nancy Valko, RN, an Advanced Legal Nurse Consultant has over forty years of nursing experience. She has served on medical ethics committees, appeared on many radio and television shows and has written on these topics. She is a spokesperson for the National Association of Pro-life Nurses.

#### Advance Directives: Protecting Yourself and Your Loved Ones



Jason Negri, JD, Assistant Director of the Patients Rights Council speaks nationally on the practical and ethical aspects of end-of-life issues and provides training to those seeking to improve their ability to effectively communicate these issues. He has written articles and authored the booklet *Twenty Answers on End-of-Life Issues*.

Phone: 248.816.8489 ♦ Email: [info@mnfl.org](mailto:info@mnfl.org)

Web: [www.mnfl.org](http://www.mnfl.org) ♦ Register at: [endoflifedecisions.eventbrite.com](http://endoflifedecisions.eventbrite.com).

Presented by:

**Michigan Nurses for Life** in cooperation with **Educational Center for Life**

*A certificate of attendance will be awarded for nurses. The public is welcome.*

# Latest Gallup numbers very encouraging for pro-lifers

By Dave Andrusko

If memory serves me right, it is usually around the beginning of May that Gallup conducts its annual Values and Beliefs survey. The results trickle out over the next couple of months.

An analysis of the 1,011 adults queried by Gallup to various dimensions of the abortion issue appeared June 9. What does the latest survey tell us? Let's start at the end with what the author Lydia Saad calls the "Bottom Line" and work backwards:

**There is no consensus among the American public for making abortion completely legal or illegal. Rather, the largest segment falls in the middle, saying it should be legal but with restrictions. Nearly half of U.S. adults also consider abortion morally wrong.**

**This helps explain how the states have been able to pass a vast array of laws limiting when, where and how abortions can be performed. It also sheds light on how citizens can shift from electing a staunchly pro-choice president in Barack Obama to electing an avowed pro-life one in Donald Trump. For most Americans, the issue involves shades of gray, not black and white.**

Four facts:

#1. We have long lauded Gallup for changing the way it asks a key question about abortion to give a nuanced and far more accurate portrait of public opinion. They first ask, "Do you think abortions should be legal under any circumstances, legal only under certain circumstances, or illegal in all circumstances?"

We learn 29% say "legal under any circumstances," 18% say "illegal in all circumstances" and 50% say "legal only under certain circumstances." That's where most polling companies stop.

But Gallup then asked the middle group—those who responded "legal only under certain circumstances"—"whether those should be most circumstances or only a few, and, by nearly a 3-to-1 ratio, they choose only a few, 36% vs. 13%," according to Saad. "Thus, the slight majority of Americans (54%) favor curtailing abortion rights—saying abortion should be illegal or legal in only

a few circumstances. Slightly fewer, 42%, want access to abortion to be unrestricted or legal in most circumstances."

(The 54% is comprised of the 18% who say "illegal in all circumstances" and the 36% who said legal "in only a few circumstances.")

Gallup is correct: that is why pro-life legislation passes and passes and passes. It is in tune with the electorate.

#2. Saad writes, "Slightly more U.S. adults today believe the procedure is morally wrong (49%) than morally acceptable (43%). This has also been the case in most readings since Gallup started tracking this annually in 2001."

I would remind readers of an important point made last month when we discussed what Pew found when it asked about abortion and morality.

"More than four-in-ten Americans (44%) say having an abortion is morally wrong, while 19% think it is morally acceptable and 34% say it is not a moral issue," Michael Lipka and John Gramlich of Pew tell us.

What explains the huge difference? One is the question. Gallup's is more abstract: is abortion "morally wrong" or "morally acceptable"?

Pew asks is **having** an abortion morally wrong or morally acceptable. Almost two and one-half times as many people say having an abortion is morally wrong as say it is morally acceptable

#3. "In terms of the two abortion labels, 49% of U.S. adults consider themselves pro-choice on the abortion issue, while 46% consider themselves pro-life," according to Saad.

"Again, this represents almost no change compared with a year ago and is consistent with the close division seen over the past decade. By contrast, in the earliest years Gallup asked this, in 1995 and 1996, there was greater attachment to the pro-choice label, with 56% and 53%, respectively, identifying as such.

Americans continued to prefer the pro-choice label over the pro-life label by a slight margin in most years through 2009, but the two have since been about tied."

In spite of 59 million abortions and the passage of over 44 years and a constant pro-abortion media drumbeat, the large advantage "pro-choice" enjoyed back in the 1990s has vanished.

## WHAT DO WE DO NOW?

In January, the front page of our newsletter asked the question, *What Do We Do Now?* With the new administration in Washington, D.C. promising to protect human life, we will be offering ideas for action by you. It will change with each newsletter, and, hopefully, will raise awareness for the need to protect human life at all its stages.

### JULY/AUGUST 2017

This month, email your two Michigan Senators and ask that they give impartial attention to the proposed health care bill. Obamacare was passed late at night with few, if any, legislators familiar with its contents. That must not happen again. A new and better bill can be passed but only with a careful reading and full understanding of its contents. Go to the following websites for contact prompts:

[www.peters.senate.gov/](http://www.peters.senate.gov/)  
[www.stabenow.senate.gov/](http://www.stabenow.senate.gov/)

Finally, #4. Not surprisingly, self-identified Democrats are more pro-abortion than ever. Saad writes, “[T]he largest segment of Democrats say abortion should be legal in all circumstances, while solid majorities consider abortion morally acceptable and call themselves pro-choice.” This is tragic and a repudiation of the genuinely liberal values that the party once stood for.

Likewise, we are not surprised that “The majority of Republicans think abortion should be legal in only certain circumstances, and solid majorities call it morally wrong and consider themselves pro-life.” And, then we read, “Political independents fall between the two major parties on these measures, although they come a bit closer to Republicans than to Democrats in their choice of abortion labels.”

Really? As the graph from Gallup shows, Independents are not “a bit closer” to Republicans “on their choice of labels” than to Democrats but **much** closer.

Likewise, it is to seriously minimize how much closer Independents are to Republicans than to Democrats on the important questions of when abortion should be legal and its morality when Saad simply says they “fall between the two major parties on these measures.”

All in all, pro-lifers should be very encouraged by the latest numbers from Gallup.

—*National Right to Life News Today, June 12, 2017*

## Dr. Paul Byrne

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adults. The birth of Joseph in 1975—at a mere 24 weeks’ gestation—was one such miracle.

“He had a flat electroencephalogram or EEG—in other words, no brainwaves,” Dr. Byrne recalls.

The EEG is a common method of measuring brain activity at any age. The flat EEG of Joseph was interpreted as “consistent with cerebral death.” “Nonetheless, Joseph went on to be a straight-A student in school, build a brilliant career, and he’s now married and the father of three kids.”

While considered breakthroughs in their day, many of these developments are now commonplace in both neonatal intensive care units and medical care as a whole. Plastic cuffs are routinely used to measure blood pressure of patients.

“My medical philosophy is that the best doctors are the ones who work the hardest on the people who are the sickest,” he says. “What you try to accomplish for those sickest people first will ultimately have a beneficial impact on the rest of humanity.”

## Darker trends

**D**uring the early 1970s, Dr. Byrne witnessed a trend he found troubling: the increased acceptance of brain-wave cessation as a legally acceptable marker of death. This occurred even before abortion became legally available in most states, and it owed in part to new ways to artificially resuscitate patients to keep a person’s heart beating with circulation and respiration. It also followed the world’s

first heart transplant in 1967, after which organ transplants became common practice in a short amount of time.

“The push to accept ‘brain death’ has a lot to do with the concurrent push for viable organs for transplants,” says Dr. Byrne. He noted that, following that first heart transplant, the medical community began lobbying elected officials for new laws that first codified “brain death” in the US.

This had practical reasons. Dr. Byrne points out that to transplant a heart or a liver, the donor’s heart, circulation and respiratory processes must be kept functioning for healthy vital organs to be removed. Organs from a cadaver are useless, he notes, because organs begin to decompose immediately after those functions cease.

“Now, when someone suffers a head injury or is deeply unconscious, there is a shift of emphasis from helping that patient to harvesting his or her organs for transplantation,” he says. The fact that viable organs are very valuable to the organ transplant industry can add a monetary incentive to the push to declare patients legally dead.

Forty-seven US states have passed the Uniform Anatomical Gift Act (UAGA) that presumes everyone is an organ donor. This is in addition to those who have willingly registered as organ donors on their drivers’ licenses. This often creates a conflict, when the same individuals have also filed advance DNR (do not resuscitate) directives. In such situations, that previous DNR order will be overruled and the patient will be resuscitated in order for their vital organs to be usable for transplantation.

## It could happen...to anyone

**T**his isn’t all just academic. In 2007, 19-year-old Gregory Jacobs sustained a severe head injury while skiing and died at a Pennsylvania hospital less than a week later. In a lawsuit, his parents maintained that their son “experienced neither a cessation of cardiac activity nor a cessation of brain activities when surgeons began the procedures for removing his vital organs.”

The Jacobs case was the subject of a *CBS News* report, and the elder Jacobses ultimately won a \$1.2 million settlement in 2012. More recent is the case of the now-16-year-old Jahi McMath, who had severe sleep apnea and on which Dr. Byrne is a medical advisor.

Jahi underwent a tonsillectomy at a California hospital, which aimed to improve her ability to sleep at night. She later hemorrhaged and went into cardiac arrest. Physicians declared her to be “brain dead” and ordered the removal of life-support systems.

Jahi’s mom, Latasha Winkfield, disagreed and filed a lawsuit seeking to keep her on life support. A death certificate was issued for Jahi in California before she could be moved to a New Jersey hospital. She later was moved to an apartment with her mom, where she continues to live on life support.

Incidentally, Dr. Byrne was instrumental in getting a new law passed in that state, which gives parents or caregivers the ability to object conscientiously to such orders from a physician or hospital. A similar regulation, though not as strong, now exists in neighboring New York.

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## Dr. Paul Byrne

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"Jahi McMath is very much alive... but a death certificate was issued in California!" exclaims Dr. Byrne. "She has had three birthdays since being declared legally dead."

### A broadened focus

Dr. Byrne is a steadfast pro-life advocate and supporter of American Life League (ALL). His knowledge and guidance shaped ALL's policy on euthanasia and brain death; he is the author of its materials on the subject. Most recently, he played an important role in the development of a study guide on euthanasia for ALL's Culture of Life Studies Program. In addition to supporting ALL and other organizations, Dr. Byrne saw a need for another organization focusing attention on end-of-life issues. That led to the founding of the Life Guardian Foundation in 2007.

The organization's website offers a rich repository of resources that helps people understand the controversies that now surround the end of life. Besides the moral and ethical implications, there's a lot of practical value as well. Many of us now must deal with the treatment of elderly parents, and the use of feeding tubes is often taken to mean that their lives are at the end. Not necessarily so, says Dr. Byrne.

"People on a feeding tube don't always have to remain on a feeding tube," Dr. Byrne says. Noting that it's not always easy, there are ways to treat such patients that can improve their outlook and lead to a time where a feeding tube can be removed. Similarly, severe head injury often leads to a grim prognosis—yet treating the patient with thyroid medications can greatly improve patient prognosis.

Poke around a bit more on the website and you'll uncover other fascinating information. There are more than 30 disparate sets of criteria. You can be declared "brain dead" by one but be alive by others. The Uniform Declaration of Death Act (UDDA) now on the books in all 50 states mandates that the determination be "in accordance with acceptable medical standards." The patient who is declared "brain dead," whichever criteria are used, always has a beating heart with circulation and respiration, albeit on a ventilator.

The procedure of an apnea test (not a test for sleep apnea) is part of every set of "brain death" criteria. The patient is taken off the ventilator for 10 minutes. Carbon dioxide and acids accumulate. This makes the brain swelling worse. Everyone must learn to instruct No! to the apnea test. It can only cause the patient to get worse.

"If you end up unconscious and on a ventilator, the doctors at the hospital treating you will declare that your death is imminent, and by law, they have to notify the Organ Procurement Organization (OPO)," says Dr. Byrne. If you don't want that to happen, Dr. Byrne strongly urges you to explicitly document your refusal in writing.

The foundation website offers three key directives that can help you accomplish that objective: a healthcare power of attorney directive, a directive to protect and preserve life for a dependent minor or mentally incapacitated person,

and an organ donation opt-out form that can be carried in your wallet or purse.

"Very often I work with parents of students who go away to college, get into a car accident, and end up at the mercies of a medical system that wants their organs for a transplant patient," he notes. Since few people have taken the time to study the issue, and since parents are often bewildered and grief-stricken at such times, it can become a complex battle to receive any form of life-extending care for such patients.

### A modest hero

Upon being reached by phone for an hour-long interview, Dr. Byrne was quick to shift the emphasis away from himself and to his large family. He's the father of 12 children. He also has 33 grandchildren and five great-grandchildren. He's proud that he has reared a pro-life family.

He's especially proud of the pro-life poems that his son, Mark, wrote from his heart in the eighth grade—and as Providence would have it—his granddaughter Kaitlyn, Mark's daughter, recently wrote from her heart in the eighth grade as well.

More critically, he pointed out the clarity by which young people often view the world around them, and the crystal-clear viewpoints they often form on issues that bedevil their elders, provides a lesson for the rest of us. Both pieces speak right to the heart, he says.

"If you read Mark's and Kaitlyn's poems, you can see how they recognize just what is at stake: that we must value life," Dr. Byrne says. "Most importantly, they show us what we need to do to think correctly about life."

—Celebrate Life Magazine, May 25, 2017

To read the poems mentioned, go to: <http://www.clmagazine.org/article/dr-paul-byrne-from-preemies-to-end-of-life-issues-one-man-has-made-a-difference/>

### SAVE THESE DATES! PRO-LIFE EVENTS - 2017

Used Book Sale: July 27-29

National Day of Remembrance: Saturday, Sept. 9

Walk for Life: Sunday, Sept. 10

LIFE CHAIN: Sunday, Oct. 1

End of Life Decisions/MI Nurses for Life Conf. - Oct. 7

Pro-Life Luncheon - Oct. 21

"Movement in Motion" Bus Registration: Sept. 5 - Oct. 31

Lights for Life Campaign: Starts in October

LIFESPAN Christmas Cards: Sales start in October

### LIFESPAN News

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# Insurance Companies Denied Patients Life-Saving Treatments But Would Pay for Assisted Suicide

By Micaiah Bilger

**A** Nevada doctor recently decided to go public after learning insurance companies denied two of his patients life-saving medical treatment coverage and offered to pay for them to commit suicide instead.

In a new video by the Patients Rights Action Fund, Dr. Brian Callister, a physician and professor at the University of Nevada Medical School, explained what happened when he requested coverage for two patients' medical care.

On two separate occasions, Callister said he was treating patients who both needed life-saving treatments, but his hospital did not perform the treatments. He said he made several phone calls to request transfers to hospitals in the patients' home states of Oregon and California. Doctor-prescribed suicide is legal in both states.

When he called the patients' insurance companies, Callister said both refused to cover the patients' treatments. He said neither patient was terminally ill, but without the treatment, they could have become so.

What happened during those phone calls left Callister shocked.

After denying the coverage, he said both insurance reps suggested that the patients consider doctor-prescribed suicide instead. He said the insurance reps offered the deadly option unprompted.

"Quite frankly, I was stunned," Callister said. "It's a lot cheaper to grab a couple drugs, kill you, than it is to provide you life-sustaining therapy. It's as simple as that."

Doctor-prescribed suicide is legal in Oregon and California, as well as Washington state, Vermont, Colorado and, most recently, Washington, D.C. This is not the first time patient have reported being denied health care and offered assisted suicide instead.

Anne Sommers of the disability rights group Not Dead Yet, told the Washington Times that many people with disabilities are concerned about the profit-driven motives of insurance companies coupled with assisted suicide laws. She said when doctor-prescribed suicide is the cheapest option, people may be pressured to kill themselves rather than provided with the treatments they deserve.

Compassion & Choices, a euthanasia advocacy group that is pushing states to legalize assisted suicide, expressed skepticism about Callister's experiences.

The Washington Times reports Kat West, a spokeswoman for the group, attacked the video because it does not name the insurance companies.

"I'm not a HIPAA lawyer, but that sounds really — it sounds like someone who does not want to share information," West said. "That's what it sounds like to me."

The Patients Rights Action Fund said its lawyers recommended not naming the insurance companies because of potential HIPAA violations. And Callister said the insurance companies' reps made the suggestions over the phone.

"Now was this in writing? Of course not," Callister said.

"This was on the phone. They're too smart to put that in writing."



There are other confirmed stories of patients being denied medical insurance coverage and offered drugs to kill themselves instead.

Stephanie Packer, a young, terminally ill mother of four, is one of them. The California mother said her state Medicare plan initially refused to pay for her medical treatment but offered to pay for assisted suicide drugs instead.

In separate incidents, Oregon cancer patients Barbara Wagner and Randy Stroup also were denied treatment in their state health insurance plans and offered doctor-prescribed suicide instead.

Family members also have witnessed their loved ones being pressured to consider killing themselves, rather than continue treatment. Oregon resident Kathryn Judson said doctors tried to pitch assisted suicide to her sick husband while she was out of the room one day. Judson said they switched doctors, and her husband lived for five more years.

—LifeNews.com, May 31, 2017



**Right to Life -  
LIFESPAN's**

**Used  
Book  
Sale**



**Thursday, July 27th**  
10:00 - 8:00 (10:00 - 12:00: Presale 50% Markup)

**Friday, July 28th**  
10:00 - 8:00

**Saturday, July 29th**  
10:00 - 8:00 (3:00 - 8:00: Brown Bag - \$5.00)

**LIFESPAN Book Depot (attached to Angels, Saints & Stuff)**  
Northwest corner of Merriman & Seven Mile Rds.  
**19223 Merriman Road, Livonia, MI 48152**

Want to volunteer for the Sale? Call the Main Office: 734.524.0162





miLIFESPAN.org

# LIFESPAN Family Baseball Outing

## You are Invited!

LIFESPAN invites you to attend a baseball game and help support a pro-life organization at the same time! Take your family, friends, nieces, nephews, grandchildren or godchildren to this event for a time of fun and excitement! And it's for a good cause!

### The Teams:

The Birmingham-Bloomfield Beavers vs. The Westside Woolly Mammoths

### Where:

Jimmy John's Field - 7171 Auburn Rd., Utica, MI 48317

### When:

Thursday, August 17th (Game starts at 7:05 pm!)

### Cost:

Tickets are \$15 through Right to Life - LIFESPAN

### Contact:

Contact Persons: Diane or Lynn  
Office: 248-816-1546  
Email: oakmac@rtl-lifespan.org



*The Jimmy John's Field will have ample parking available. Contact the RTL-LIFESPAN office to order tickets today! We will need your name and address to send them to you. Hurry! Seating is Limited!*

## Donations have been made—

### In Memory of:

*Joseph A. Sosnowski*

Given by: Yvonne Speer  
Dawn Soave  
Manse Tian

Frank and Rosalie Tislerics  
Jerry and Diane Fagelman  
Eric and Eileen Brandt

Wayne County LIFESPAN Board Members

*Gerry Milosch*

*Tom Tharp*

*Virginia Mendenhall*

Given by: Jerry and Diane Fagelman

Donations may be made in memory of loved ones who have died; a memorial card will be sent by Lifespan in your name to the family of the deceased. Donations may also be made to honor someone special, and near and dear to you, for a particular occasion, or just because... Send donations to your local LIFESPAN office.

You can live on after death by helping those whose lives are threatened by abortion, euthanasia or infanticide. A bequest in your will to Right to Life - LIFESPAN will be used to save the lives of many through our efforts.

*To Honor the Gravesites of our Unborn Brothers and Sisters*

## Join us for the Annual National Day of Remembrance for Aborted Children

**Saturday, Sept. 9, 2017 ♦ 1:00 p.m.**  
**White Chapel Cemetery, Troy**

On Saturday, Sept. 9th, LIFESPAN will join other pro-life Americans across the country to honor the memory of the more than 59 million pre-born victims of abortion.

For more info, see [MiLIFESPAN.org](http://MiLIFESPAN.org) or call 734-524-0162

### Right to Life - LIFESPAN Membership Form

Right to Life - LIFESPAN believes that human life has value in all stages of development from conception until natural death, and is committed to speaking on behalf of those who-cannot speak for themselves — the unborn, the aged, the incapacitated. Won't you please help in our struggle to preserve respect for human life? A contribution brings you the monthly newsletter as well as educational materials and special mailings.

\_\_\_\_\_ Annual Membership      \$ 30.00      \_\_\_\_\_ Other  
\_\_\_\_\_ Student/Senior Member      \$ 20.00

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_

Please complete this form and return with your donation to: **Right to Life - LIFESPAN, 32540 Schoolcraft Rd., Ste. 100, Livonia, MI 48150-4305.** For more information, call 734-524-0162.

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# Walk For Life



WHEN: **Sunday, September 10, 2017**

TIME: **1:30 – 3:00 PM**

WHERE: **Sumac Pointe Pavilion**

**37401 Hines Drive  
Edward Hines Park  
Livonia**

**\*\*\*SEE PAGE 15 for PLEDGE FORM\*\*\***

The **Walk for Life** is an easy way for people of all ages to get involved by actively demonstrating support for the **Sanctity of Human Life across the lifespan** and a desire to make a difference in the lives of women and their babies.

It will take less than 90 minutes of your time, but its effect could literally last a lifetime!

Put your feet to your pro-life convictions and **Walk for Life**; you will directly **help LIFESPAN** advance its mission to impact and transform people with the love of life from conception until natural death.

Start collecting pledges of support from friends and family NOW!

Pledge form is included in this newsletter issue and at [www.miLIFESPAN.org](http://www.miLIFESPAN.org).

We are a 501(c)3 organization and all donations are tax deductible!

- T-shirts included with registration; **PRE-REGISTRATION REQUIRED \*\***  
**\$20/adults, \$10/youth (13-17 years), \$5/child (under 13 years)**
- Additional pledges may be sent in after the **Walk for Life**.

**Keep collecting pledges!**

- A **Walk for Life** pin to walkers who bring in \$100 or more in pledges.
- Two Tickets to LIFESPAN's Fall Sign Painting Party to each of the first two walkers who collect the most pledges (above \$150), received by LIFESPAN by **October 2, 2017.**

**\*\*Registration fee guarantees your shirt, in your selected size, for registrations received by 9/1/2017. Limited selection of shirts/sizes will be available for those who are not pre-registered.**

