

Obituaries



Daisy Bell Williams
With great sadness, we announce the passing of Daisy Bell Williams of Donalsonville, Georgia on July 22, 2020.
Daisy was always full of joy and dearly loved by everyone she met. She will be immensely missed by her loving family and friends, but her legacy will live forever.
A public viewing will

be held at Moore's Funeral Home, 312 Alexander Avenue, Donalsonville, Georgia on July 31 from 1:00 p.m. to 7:00 p.m.
A graveside funeral service will be held at Live Oak AME Church Cemetery, 402 Baldwin Street, Donalsonville, Georgia on August 1 at 12:00 p.m. Everyone will be required to wear a mask and to practice social distancing during the public viewing and graveside funeral service.
In keeping with the necessary precautions being taken due to COVID-19, the family has chosen not to have a public repass at this time.
In lieu of perishable food donations, we would greatly appreciate nonperishable foods or monetary donations. We are eternally grateful for your understanding and prayers.


Department of Health offers return to work after COVID-19 guidance

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tive tests at least 24 hours apart) after COVID-19 infection for non-healthcare personnel. CDC has reported prolonged PCR positive test results without evidence of infectiousness. In one study, individuals were reported to have positive COVID-19 tests for up to 12 weeks post initial positive.
More information about the science behind the symptom-based return to work can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/community/strategy-discontinue-isolation.html>
Return to work practices and work restrictions
Persons who are not healthcare personnel who complete the above conditions and can return to work should:
• Wear a face covering if social distancing cannot be maintained in the workplace, per current CDC guidelines: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-gettingsick/cloth-face-cover.html>. Note: A facemask, instead of a cloth face covering, should be used by healthcare providers only. Cloth face coverings are appropriate for persons who are not healthcare personnel and are recommended by CDC to help prevent asymptomatic spread of COVID-19 in settings where social distancing cannot be practiced.
• Adhere to hand hygiene, respiratory hygiene, and cough etiquette in CDC's interim infection control guidance (e.g., cover nose and mouth when coughing or sneezing, dispose of tissues in waste receptacles)
• Self-monitor for symptoms and seek re-evaluation from occupational health if respiratory symptoms recur or worsen.
CDC guidance for discontinuation of home isolation for persons with COVID-19 infection not in a healthcare setting can be used in conjunction with this guidance for returning to work and can be found at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>
Note: The studies used to inform this guidance did not clearly define "severe" or "critical" illness. This guidance has taken a conservative approach to define these categories. Although not developed to inform decisions about duration of Transmission-Based Precautions, the definitions in the National Institutes of Health (NIH) COVID-19 Treatment Guidelines are one option for defining severity of illness categories. The highest level of illness severity experienced by the patient at any point in their clinical course should be used when determining the duration of Transmission-Based Precautions.
Mild Illness: Individuals who have any of the various signs and symptoms of COVID-19 (e.g., fever, cough, sore throat, malaise, headache, muscle pain) without shortness of breath, dyspnea, or abnormal chest imaging.
Moderate Illness: Individuals who have evidence of lower respiratory disease by clinical assessment or imaging, and a saturation of oxygen (SpO2) ≥94% on room air at sea level.
Severe Illness: Individuals who have respiratory frequency >30 breaths per minute, SpO2 <94% on room air at

sea level (or, for patients with chronic hypoxemia, a decrease from baseline of >3%), ratio of arterial partial pressure of oxygen to fraction of inspired oxygen (PaO2/FiO2) <300 mmHg, or lung infiltrates >50%.
Critical Illness: Individuals who have respiratory failure, septic shock, and/or multiple organ dysfunction. In pediatric patients, radiographic abnormalities are common and, for the most part, should not be used as the sole criteria to define COVID-19 illness category. Normal values for respiratory rate also vary with age in children, thus hypoxia should be the primary criterion to define severe illness, especially in younger children.
The studies used to inform this guidance did not clearly define "severely immunocompromised." For the purposes of this guidance, CDC used the following definition:
• Some conditions, such as being on chemotherapy for cancer, untreated HIV infection with CD4 T lymphocyte count < 200, combined primary immunodeficiency disorder, and receipt of prednisone >20mg/day for more than 14 days, may cause a higher degree of immunocompromise and inform decisions regarding the duration of Transmission-Based Precautions.
• Other factors, such as advanced age, diabetes mellitus, or end-stage renal disease, may pose a much lower degree of immunocompromise and not clearly affect decisions about duration of Transmission-Based Precautions.
• Ultimately, the degree of immunocompromise for the patient is determined by the treating provider, and preventive actions are tailored to each individual and situation.
Completing a test-based strategy is contingent upon the availability of ample testing supplies, laboratory capacity, and convenient access to testing and requires two samples taken at least 24 hours apart. If a facility requires the test-based strategy for return (which is discouraged by DPH), this should be done by a private physician through a commercial lab. The test-based strategy is not fulfilled by a single test, nor should it be used for screening of all persons returning to work.

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Support the upkeep of your local cemeteries

Cedar Springs Cemetery
Cedar Springs Cemetery is seeking donations for upkeep of the cemetery. Please make your donations payable to Cedar Springs Cemetery and mail to Martin Evans, 1245 Mayhaw Rd., Blakely, Georgia 39823.

Corinth Freewill Baptist Cemetery
Due to the need for year round care of the cemetery, the funds for cemetery maintenance are low and donations are needed now. Anyone with cemetery lots or those who have friends or family buried at Corinth Freewill Baptist Church Cemetery may send your contributions for the upkeep of the cemetery to: Corinth Church; Att.: Herbert Golden, P.O. Box 447, Iron City, Georgia 39859. If you have questions or need more information, please call 254-9893.

Friendship Cemetery
Contributions for the upkeep of the Friendship Cemetery to Friendship Cemetery, P.O. Box 155, Donalsonville, GA 39845. For more information, contact William Bramlett at 229-254-2694.

Olive Grove Cemetery
Olive Grove Primitive Baptist Church (Rock Pond) Cemetery is in need of help with the cemetery funds. We only have a few members left and it is hard to maintain all the upkeep for the church and cemetery.
If you would like to make a donation, you can do so by mailing a check to: Olive Grove Church, c/o Brenda Hunter, 5924 John Emory Trawick Road, Iron City, Georgia 39859. Contributions can also be deposited directly into the church's banking account at the First State Bank of Donalsonville.

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Financial Focus

Keep your life insurance when you retire

Some good reasons to retain it

Do you need a life insurance policy in retirement? One school of thought says no. The kids are grown, and the need to financially insulate the household against the loss of a breadwinner has passed.

If you are thinking about dropping your coverage for either or both of those reasons, you may also want to consider the excellent reasons to retain, obtain, or convert a life insurance policy after you retire. Take these factors into account and consult with your financial professional before making a decision.

Could you make use of your policy's cash value? If you have a whole life policy, you might want to utilize that cash in response to certain retirement needs. If you need extended care, for example, you could explore converting the cash in your whole life policy into a new policy with an extended care rider. This might even be doable without tax consequences. If you need additional income, many insurers will let you surrender a whole life policy you have held for some years and arrange an income contract with the cash value. You can access the money, tax free, as long as the amount that is withdrawn is less than the amount paid into the policy. Remember that withdrawing money or taking a loan against a policy's cash value, naturally reduces the policy's death benefit.¹


Do you receive a "single life" pension? Maybe a pension-like income comes your way each month or quarter, from a former employer or through a private income contract with an insurer. If you are married and there is no joint-and-survivor option on your pension, that income stream will dry up if you die before your spouse dies. If you pass away early in your retirement, this could present your spouse with a serious financial dilemma. If your spouse risks finding themselves in such a situation, think about trying to find a life insurance policy with a monthly premium equivalent to the difference in the amount of income your household would get from a joint-and-survivor pension as opposed to a single life pension.²

Will your estate be taxed? Should the value of your estate end up surpassing federal or state estate tax thresholds, then life insurance proceeds may help pay the resulting taxes and prevent the need for your heirs to liquidate some assets.

Are you carrying a mortgage? If you borrowed to purchase your home or have refinanced and are carrying a mortgage, a life insurance policy may make sense. It could potentially relieve your heirs from shouldering some of or all that debt if you die with the mortgage still outstanding.²

Do you have burial insurance? The death benefit of your life insurance policy could partly or fully pay for the costs linked to your funeral or memorial service. In fact, some people buy small life insurance policies later in life to prepare for this expense.²

Alternatively, you may seek to renew or upgrade your existing term coverage for permanent life insurance. Consult an insurance professional you know and trust for insight.



Provided by Tim Bush,
Bush Retirement & Wealth Strategies

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Citations. 1 - Nasdaq.com, April 30, 2020 ;
2 - Forbes.com, May 19, 2020

Donalsonville News Obituary Policy:

Obituaries published in the *Donalsonville News* are accepted only through established funeral homes, crematories and verifiable out-of-town sources. Death notices,

not to exceed three column inches, are published free of charge. Standard obituaries of no more than 300 words are published along with a one-column photograph for \$30. Expanded obituaries will be charged \$30 plus \$5.50 per

column inch for space used to accommodate additional words over 300.
The *Donalsonville News* is a weekly, Thursday publication. The deadline for submission is 5 p.m. on Monday.