

# THE CENTURION

**DELAWARE COMMISSION OF VETERANS AFFAIRS**  
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## CHAIRMAN'S UPDATE

My Fellow Veterans,

The Commission has been working for years towards having a State Veterans Home and finally we are beginning to see the light at the end of the tunnel. Through the efforts of Delaware legislators, we were able to obtain funding for a Feasibility Study to determine the need of having such a home. Phase I has been completed showing that Delaware could support a home. Phase II, with results forthcoming, will provide us with a cost analysis for operating a home. When completed, the Commission will then work with the newly elected Governor and legislators to provide the State's match to secure Department of Veterans Affairs approval and funds to permit us to establish and operate a veterans home.

Not to be confused with our desired State Veterans Home, the Commission has also been addressing the issue of homelessness among Delaware's veteran population. A 1992-1993 study conducted by the Commission, concluded that Delaware has a substantial number of homeless veterans. We have been interested in establishing a domiciliary/homeless veterans site in Delaware, which will reconnect these veterans with the structure and discipline learned in the military, while simultaneously building a community of veterans who can draw support from each other and develop the skills necessary to becoming contributing members of society.

Since we will not be able to communicate again until January, the Commission would like to wish all veterans and their families a Happy Thanksgiving and Happy "year-end" Holidays. To each Veteran, have a good Veterans Day on November 11<sup>th</sup>. You served your country with honor in war and/or in the troubled years of peace and deserve the respect of your fellow citizens.

Sincerely,

Jim Thompson  
Chairman

## THOUGHT FOR THE QUARTER

*“Nothing stretches quite as far as the campaign promise.”*

### DELAWARE AUTHORS DAY

The Delaware Heritage Commission will celebrate the 5<sup>th</sup> annual Delaware Authors Day on Saturday, November 4, 2000, at the Delaware Agricultural Museum and Village on Route 13 in Dover. Featured at this year's event will be Mr. Ned Kimmel and Captain Edward Lattimer Beach (USN ret.) beginning at 1:30 p.m. The event will begin at 10:00 a.m. and will adjourn between 3:30 and 4:00 p.m. Admission is free to all. Refreshments will be provided. The day will focus on the work of Kimmel and Beach and their research into the bombing of Pearl Harbor on December 7, 1941. Ned Kimmel is a Delaware resident and the son of Admiral Husband E. Kimmel, the commandant of Pearl Harbor at the time of the surprise Japanese attack. The Navy and the U.S. government placed the blame for the dawn assault on Admiral Kimmel, claiming the naval base was unprepared for the attack. The elder Kimmel was found negligent by the Navy and was relieved of duty and the rank of Admiral. Edward L. Beach is a former submarine commander and his father was at the center of an inquiry similar to that of Admiral Kimmel. The elder Beach was in command of the submarine USS *Memphis* when it was sunk by a tsunami while docked at a Caribbean port. The Navy claimed Beach was negligent and compromised his boat by not getting underway. (*Delaware Heritage Commission, August 28, 2000*)

### VETERANS DAY SERVICES

The Delaware Commission of Veterans Affairs and The American Legion will host Veterans Day Services, November 11, 2000. The service will be at the Memorial Bridge Plaza, Delaware Memorial Bridge, New Castle, Delaware, beginning at 10:30 a.m. Following the service, a luncheon will be held at the Hilton Wilmington/Christiana, 100 Continental Drive, Newark, DE. For further information, call 1-800-344-9900 (In state only) or (302) 739-2792.

### MONTGOMERY GI BILL GOES UNUSED BY HALF WHO “BUY”

Can you imagine turning down \$20,000 in education benefits – especially if you paid for it in advance with cold cash and sweat equity? Half of all service members eligible for Montgomery GI Bill benefits regularly do just that, according to Department of Veterans Affairs officials. Service members qualify for the Montgomery GI Bill benefits by contributing a nonrefundable \$100 per month throughout their first year of active service and successfully completing an active-duty “hitch.” Walking away from the benefit is a waste of great investment, VA officials said. At the current \$536 monthly

benefit for 36 months of full-time schooling, the MGIB pays \$16 for every \$1 members must invest, Dennis Douglas, VA deputy director for education services told the American Forces Information Service. He and other VA officials stressed MGIB benefits do not have to be paid back, unlike student loans. Recent changes to the Montgomery GI Bill make it even better, said VA spokesman Terry Jemison. The program, he said, now pays the cost of some preparatory courses for college and graduate school entrance exams. Also, eligibility has been expanded to some officer training school graduates and surviving spouses. Proposals now under consideration before Congress would increase monthly payments, he added. The education benefit provides many military men and women with education opportunities that otherwise might not be available, according to Jemison. “We owe them, I believe,” Douglas said. “It really is an opportunity for us to honor them for what they did for this nation.” The VA maintains a web site offering detailed information, application forms and FAQs covering the Montgomery GI Bill, earlier GI bills and other VA educational programs at <http://www.gibill.va.gov>. (*American Forces Press Service, 8/10/00*)

### VA PROGRAM TO OPEN ONLINE SERVICES TO VETERANS

Veterans will be able to use digital signatures to access a host of online services next year under a contract awarded July 25, 2000. The General Services Administration distributed 100,000 free digital signature certificates to the Veterans Affairs Department to help the agency transfer more of its benefits and programs to the Web. Veterans will be able to apply online for educational, compensation, pension and vocational rehabilitation benefits by next summer. Colleges and universities will be able to verify veterans' enrollment in educational programs on the Web, and veterans using the Montgomery GI Bill will be able to verify their enrollment status monthly online. (*Federal Times, 8/7/00*)

### NED POWELL NAMED ACTING VA DEPUTY SECRETARY

President Clinton has appointed Edward A. (Ned) Powell, Jr., as the Acting Deputy Secretary of the Department of Veterans Affairs (VA). Powell, currently VA's Assistant Secretary for Financial Management, will fill the position held by Hershel W. Gober, who was named Acting VA Secretary. In his new assignment, Powell will become the chief operating officer of the federal government's second largest cabinet department. With an annual budget of \$48 billion, VA employs about 219,000 people at hundreds of VA medical centers, clinics,

benefits offices, and national cemeteries throughout the country. Powell has directed VA's budget, finance and procurement policies and operations since October 1998. In 21 months, he has accumulated a record of success in improving the department's financial management and integrity. He played an instrumental role in the development of the Administration's latest VA budget submission to the Congress, which includes the largest-ever increase in discretionary (primarily health care) spending for veterans. Under his leadership, the FY 2001 budget proposal incorporated the first successful integration of planning, performance and resource information in a single VA document. In another first, Powell led VA to an unqualified audit opinion of its FY 1999 financial statements, which included a retroactive clean opinion of the prior year's statements. Through his advocacy of electronic commerce, Powell increased VA's earnings from rebates to \$10 million in FY 1999. He has initiated a project to integrate more than 40 existing, disparate systems into a departmental, state-of-the-art, core financial and logistics system that will eliminate redundancies and reduce errors. Powell has broad experience in finance, investment banking, strategic marketing and management. He joined the Young Presidents Organization in 1981 at the age of 33. Between 1989 and 1997, he owned and managed Mechanism Design, Inc., a precision machine parts manufacturing firm. Previously, he was First Vice President of Investment Banking of Sovran Bank (now Bank of America), and held a Securities and Exchange Commission broker's license. He is a former professor of business ethics and policy at the University of Richmond, a business planning consultant, and has held a Virginia Real Estate Brokers License. Powell served in the Navy Reserve for six years, two of which were on active duty, including assignments with the Defense Intelligence Agency, for which he received the Distinguished Service Award. Powell earned a B.A. in economics from Washington and Lee University and a master's in business administration from the University of North Carolina. (*Department of Veterans Affairs, Office of Public Affairs, August 10, 2000*)

#### **VA ENCOURAGES VETERANS TO SETTLE DELINQUENT DEBTS**

The Department of Veterans Affairs (VA) is sending letters to about 270,000 veterans to remind them that they owe the federal government and that money can be taken from other federal checks to settle their debts. For the first time, portions of a monthly Social Security check can be withheld by the Department of the Treasury to settle debts that veterans owe to VA. Veterans affected by the withholding will always receive the first \$750 of each month's Social Security payment. Only 15 percent of the amount greater than \$750 can be withheld. Deductions will begin in the spring of 2001. Veterans can avoid any loss of Social Security or other federal payments by voluntarily settling their debts with VA. Federal law says that when veterans owe more than \$25 to VA and the debts are

more than 90 days overdue, VA officials must report the debts to the U.S. Treasury Department. The Treasury Department is responsible for collecting the debts from other income the veterans receive from the federal government, including income tax refunds, federal salary or federal retired pay, military pay or military retired pay, Social Security (but not Supplemental Security Income), Railroad Retirement Board benefits (but not "Tier 2" benefits), Black Lung Program payments (Part B) and other federal payments to individuals. Many of the veterans affected by the mailing have been treated in VA medical facilities for health care conditions not related to their military service. For that care, they are responsible for co-payments. Co-payments range from \$2 for a 30-day supply of a drug to hundreds of dollars as the veteran's share of hospitalization costs. Veterans with service-connected disabilities are exempt from all co-payments, as are low-income veterans. Purple Heart recipients without service-connected disabilities are exempt from all co-payments except pharmacy costs. In VA's mailing on July 14, 2000, each letter listed the amount of the veteran's debt and provided a local contact for the veteran, encouraging him or her to request a hearing or make payment arrangements to avoid further action. Veterans will have several months to make arrangements with their local VA medical centers before the Treasury Department takes further action. Historically, VA has collected debts by withholding money from VA payments such as disability compensation and pension. In the spring of 2001, those offsets will also come from Social Security payments. Veterans with questions about whether they have VA debts should contact the VA medical centers where they received care. (*Office of Public Affairs, July 17, 2000*)

#### **PENTAGON FEARS BILLBOARDS' IMPACT ON RETENTION 'CRISIS'**

Defense Secretary William S. Cohen wants to know why the National Veterans Organization (NVO) has put up highway billboards in Texas blasting this message: "Thinking about a military career? Think again! The government does not honor its promises to veterans!" "It seems that our billboard graphic is turning up as a screen saver on Department of Defense computers all over the world," said NVO director Doug McArthur after a phone call late last week from Col. Curtis Taylor in Cohen's office. Cohen reportedly was concerned that the billboard message could aggravate the military's recruiting and retention problems. Calls to Defense Department and other officials were not returned. McArthur said he "spent over an hour on the phone" with Taylor "addressing all of the major issues that the NVO has in its agenda. I covered health care, claims processing, United States Former Spouse Protection Act, concurrent receipt and several other topics." Taylor "was totally ignorant of the issues that veterans are complaining about," McArthur said. "He mentioned that our signs have hurt the DoD's recruiting efforts and he wanted to know how to encourage veterans to support recruiting efforts instead of discouraging them."

McArthur said Taylor “assured me that he was going to talk to [Deputy Secretary of Veterans Affairs] Hershel Gober as well as the White House that same day.” McArthur added that he told Taylor that recruiting problems would get worse, “if I have anything to do with it, unless I see some real positive efforts by the government to change the way veterans are treated.” “I was polite with him, but very determined to convince him that he ‘ain’t seen nothing yet’ as far as billboards go if we don’t see some positive results soon. He sounded very concerned.” McArthur said “high-ranking local Army officers and the secretary of defense’s office contacted us” after the NVO started posting signs in the Albuquerque, NM, area starting in January 1999. The *Virginian-Pilot* reported recently that military retirees in Virginia Beach, VA, have raised \$5,500 and rented a billboard reading, “Military Retirees Fought for Freedom, Now Congress Denies Earned Healthcare. Show Your Support. Call Your Congressman.” The Virginia Beach veterans, organizing mainly over the Internet, hope to place a billboard ad with similar verbiage in every state by fall. “It wasn’t ambiguous,” said Paul Hamaker, vice president of the Coalition of Retired Military Veterans. “We were clearly promised health care if we served 20 years or more.” When retirees turn 65, they are dropped from the military health care system and must rely on Medicare. While they can seek care at military hospitals, retired veterans are not priority and often get shut out. The defense authorization bill approved July 13, 2000, by the Senate includes an amendment by Sen. John Warner, R-VA, which would allow TRICARE to supplement Medicare coverage. The Senate now must reconcile its version of the bill, including a \$42 billion retiree health care plan, with the House version, which does not include a similar amendment. At a recent roundtable discussion at the Pentagon with Deputy Defense Secretary Rudy de Leon and others, recruiting officials discussed what the DoD calls its five most pressing recruiting issues: access to high schools, spouses’ quality-of-life programs, youth attitudes toward the military, recruiting on college campuses and local versus national media advertising. (*The Stars and Stripes*, July 31-August 13, 2000)

### **SPINA BIFIDA PROGRAM SEEKS MORE BENEFICIARIES**

The Department of Veterans Affairs (VA) is currently providing benefits for about 850 Vietnam veterans’ children with the birth defect spina bifida. When the VA spina bifida program was established in 1997, VA officials estimated that there would be about 2,000 beneficiaries. VA officials are trying to identify additional individuals who may be eligible for benefits provided in this program. Veterans service organizations, individual veterans, and others are encouraged to assist VA in locating these children (and young adults) so that they can get the appropriate assistance. Additional information about the program is provided below. Spina bifida is a neural tube birth defect in which the bones of the

spine fail to close over the spinal cord, often causing neurological impairment in their children.

### **Monetary Allowance**

Public Law 104-204 provides that the monthly monetary allowance for any Vietnam veteran’s child with spina bifida be based on the degree of disability suffered by the child. The law required VA to establish three levels of disability for this allowance, with payments of \$213 monthly for the lowest level, \$743 for the intermediate level, and \$1,272 for the highest level.

### **Where, How to Get Benefits**

Approval of monetary support, health care, and vocational training is based on eligibility determinations made at VA regional benefit offices. Prospective beneficiaries must first complete an application for benefits. They can contact the nearest VA regional office by calling toll-free: 1-800-827-1000. Information on VA benefits is also available on their website at [www.va.gov](http://www.va.gov). Additional information on spina bifida is available from the Spina Bifida Association of America at 4590 MacArthur Blvd., Suite 250, Washington, DC 20007-4226; toll free telephone: 800-621-3141; e-mail address: [spinabifida@aol.com](mailto:spinabifida@aol.com); and web site: [www.sbaa.org](http://www.sbaa.org). Veterans service organizations may provide some information as well. (*VA – Agent Orange Review*, May 2000)

### **AUGUST 1999 VA AGENT ORANGE FACT SHEET SERIES STILL AVAILABLE**

In August 1999, the Environmental Agents Service (EAS) in VA headquarters in Washington, DC, released its updated Agent Orange fact sheet series, known as “Agent Orange Briefs.” The updated fact sheets were recently sent to all VA medical centers and to many other interested parties. The revised “Briefs,” describe a wide range of Agent Orange – related matters. The following twenty-one “Briefs” are currently available:

- A1. Agent Orange – General Information
- A2. Agent Orange Class Action Lawsuit
- B1. Agent Orange Registry
- B2. Agent Orange – Health Care Eligibility
- B3. Agent Orange and VA Disability Compensation
- B4. VA Information Resources on Agent Orange and Related Matters
- C1. Agent Orange – The Problem Encountered in Research
- C2. Agent Orange and Vietnam Related Research – VA Efforts
- C3. Agent Orange and Vietnam Related Research – Non-VA Efforts
- D1. Agent Orange and Birth Defects
- D2. Agent Orange and Chloracne
- D3. Agent Orange and Non-Hodgkin’s Lymphoma
- D4. Agent Orange and Soft Tissue Sarcomas

- D5. Agent Orange and Peripheral Neuropathy
- D6. Agent Orange and Hodgkin's Disease
- D7. Agent Orange and Porphyria Cutanea Tarda
- D8. Agent Orange and Multiple Myeloma
- D9. Agent Orange and Respiratory Cancers
- D10. Agent Orange and Prostate Cancer
- D11. Agent Orange and Spina Bifida
- D12. Agent Orange and Diabetes

For additional information or a copy of some or all of the fact sheets, contact the Agent Orange Registry Coordinator at the nearest VA medical center or write to Agent Orange Briefs, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, NW, Washington, DC 20420. (*VA - Agent Orange Review, May 2000*)

**JAPANESE CORPORATIONS SEEK TO ESCAPE  
CULPABILITY FOR WARTIME ABUSES OF  
AMERICAN POWs; STATE DEPT., DEPT. OF JUSTICE  
ATTEMPT TO DENY RIGHTS**

Fifty years after thousands of Americans were tortured, imprisoned and forced to labor for Japanese corporations, a series of recent legal moves have started the process of attempting to gain compensation for the WWII prisoners-of-war in Japan. Unfortunately, the Department of State and the Department of Justice have weighed in against allowing our citizens from suing the corporations for wartime abuses. Now, for the first time, a key Senate Committee is set to hear testimony on the atrocity and attempt to determine whether the government has given the workers equal treatment. This is the time for all Veterans and ex-POWs to voice their support for those brave men and women. The legal process has gained tremendous momentum in the last several months. Last year, California passed a law, Cal. Code of Civil Procedure § 354.6, which allows ex-POWs to sue in state court to collect for personal injuries and wages owed to them as a result of the time they worked as slave laborers for private companies during World War II. As a result of this law, ex-POWs from around the nation have filed suit in California courts. For the first time, depositions were conducted under the new legislation in *Heimbuch v. Ishihara Sangyo Kaisha, Ltd., et al.* The case was brought forward by the national law firm of *Herman Middleton Casey & Kitchens* in San Diego. Thereafter, the court requested the views of the United States government on whether the victims had the right to sue the corporations. The U.S. Department of Justice responded by issuing a Statement of Interest unfavorable to the POWs by opining that the state legislation was pre-empted by federal law and that a 1951 treaty between the governments of the U.S. and Japan precluded any legal claims against the companies. The corporations include some of the largest Japanese conglomerates, including Mitsubishi, Mitsui and Nippon Steel. Ironically, despite the Department of Justice's position regarding American POWs in Japan, the very same Department chose not to interfere with the rights of American forced labor victims to bring claims against German

corporations. The Department reasoned, in the German cases, that negotiations were ongoing between American ex-POWs and German corporations, so therefore, the U.S. government should not interfere with the discussions. This unequal treatment is unfair to Americans who were forced to labor under unspeakable conditions. Senator Orrin Hatch (R-Utah), Chair of the Senate Judiciary Committee, announced that hearings will be held to investigate the abuses of Americans by Japanese corporations and the apparently random stance taken by the Department of Justice toward the victims. "This is a crucial time in our lives and our fight for recognition of the literal hell we endured at the hands of the Japanese companies," said ex-POW Harold Poole. "We, the veterans of World War II, are dying at the rate of more than 1,000 a day and have already waited too long for justice." If you feel the opinion issued by the U.S. government is flawed or at best biased, you may wish to express your concern immediately by taking one or more of the following courses of action:

1. Write a letter to your U.S. Senator and/or Congressperson to express your concern with the United States' recent position against American ex-POWs. (You may write to your representative at: United States House of Representatives, Washington, DC 20515 or your senator at: United States Senate, Washington, DC 20510)
2. Meet personally with your U.S. Senator and/or Congressperson to discuss this recent development.
3. Notify all organizations in which you are a member – veterans or ex-POW, and share your concern regarding the Department of Justice's position and ask that they join in expressing concern with this recent action.
4. Contact your local newspapers, editors, or featured columnists to inform them of the Justice Department's unequal treatment of American ex-POWs in Japanese.

(*Herman, Middleton, Casey & Kitchens, LLP., June 19, 2000*)

**VETS GET STIFFED AS INSIDERS GET RICH**

Florida is home to 1.7 million veterans, and all of their requests for benefits must be processed through the state's only regional claims office in St. Petersburg. It is the largest center run by the Department of Veterans Affairs – and the most beleaguered. Despite moving last year into a new \$24 million building equipped with new computers, the St. Pete office still has a backlog of more than 20,000 cases, the most in the nation. Veterans and their advocates have reacted with rage and frustration over delays that can last years. Why does it take so long to get responses from St. Pete, and why are we treated so callously, veterans have asked. Now, there are some new answers. And they are not happy ones. It seems the St. Petersburg office is performing so badly because its employees are too busy paying benefits to each other and embezzling money. That is a reasonable conclusion after reading the results of a yearlong investigation of the office by the VA's

own inspector general. The audit, first reported in *The St. Petersburg Times*, uncovered 130 cases of possible fraud, including overpayments of hundreds of thousands of dollars to veterans who auditors believe had been dead for years. Perhaps more disturbing was the absence of controls within the VA office's own ranks. Auditors found 308 cases where current employees, former employees or their relatives had claims that were approved by co-workers. It was as if employees were meeting at the water cooler each Monday morning and deciding how much to pay each other. The service some of these employees received was fantastic. For veterans who aren't VA employees in St. Petersburg, claims typically take months to resolve. For VA employees with inside connections, claims were approved in a matter of days. "In our opinion," the auditors wrote, "this represented preferential treatment." The investigation also found that 143 employees were receiving benefits while having access to their own files. No firewalls existed to prevent employees from accessing the files of friends and relatives, a situation that invites corruption. Cases that were required to have third-person reviews as a safeguard for large, one-time payments did not get them 75 percent of the time. The most notorious example of embezzlement at the office came in January 1999, when a claims investigator was arrested and charged with stealing \$615,451 by creating a fraudulent award to her fiancé, a Persian Gulf War veteran and St. Petersburg police officer. By the time she was caught, she was living large, with two sports cars and two engagement rings, according to court records. Consider that vets who suffered irreversible ear damage from shelling at Iwo Jima and the Battle of the Bulge are routinely denied \$400 hearing aids by the VA. Yet, she was able to approve a new Mazda Miata for herself. Mike Slachta, the VA's assistant inspector general for auditing in Washington, ran the St. Petersburg probe. He calls what he uncovered "unacceptable" and "untenable." "There were guidelines that were not followed," he said, "and in some cases, the guidelines we had did not go far enough. There's a lot that should be done differently." Mr. Slachta said his office has recommended changes at St. Petersburg, and his auditors are planning to dig deeper: "This is an open review," he said. "We have much more work to do." Last month, the Senate Veterans Committee held hearings to examine the bureaucratic horror show that was meant to be a means of fulfilling the promises made to those who served the country in its times of need. Sen. Bob Graham, D-Fla., said he believed the nation was "on the cusp of the next big crisis within the VA." Sen. Graham's words were prophetic, but only for a short while. The audit report of the St. Petersburg office is definitive evidence that the crisis is already here. Veterans have wrestled with the VA's chronic incompetence for years. Must they also now be victims of its corruption? (*Palm Beach (FL) Post*, 8/4/00)

#### NEW WEB SITES

The following is the web site for the National Center for Health Statistics,

<http://www.cdc.gov/nchs/howto/w2w/alphabet.htm#V>. It is an excellent site on where to obtain marriage, birth, death certificates, etc.

New federal government website that provides access to specific information without having to access a specific government agency. This site is located at [www.firstgov.gov](http://www.firstgov.gov).

#### INSURANCE DIVIDENDS

Lost your WWI, WWII or Korean War VA life insurance policies? If you have and have not collected your dividends, you can now check it on-line. Veterans and surviving spouses can go to <http://insurance.va.gov/index.htm> to see if they are due any dividends. (*Still Serving*, July 2000)

#### DELAWARE'S MEDAL OF HONOR RECIPIENTS

There is a "Pyramid of Honors" that can be conferred upon Americans for heroic actions during time of war such as the Silver Star, Distinguished Service Medal and the Navy Cross. Atop this "Pyramid of Honors" is the Medal of Honor, the highest award bestowed upon Americans for heroics during combat. This "Medal of Honor" was instituted in 1862 during the Civil War. Since that time 3,412 Americans have received this highest honor of their country. Of those, only 14 were awarded to Delawareans: nine during the Civil War, one during the Indian Wars out west, one for the insurrection that followed in the Philippines after the war with Spain, and two during World War II. The four veterans listed below are the second in a series honoring Delaware's Medal of Honor Recipients:

##### CIVIL WAR

##### **McCARREN, Bernard**

*Rank and organization:* Private, Company C, 1<sup>st</sup> Delaware Infantry. *Place and date:* At Gettysburg, Pa., 3 July 1863. *Entered service at:* Wilmington, Del. *Birth:* Ireland. *Date of issue:* 1 December 1864. *Citation:* Capture of flag.

##### **SHILLING, John**

*Rank and organization:* First Sergeant, Company H, 3d Delaware Infantry. *Place and date:* At Weldon Railroad, Va., 21 August 1864. *Entered service at:* Felton, Del. *Born:* 15 February 1832, England. *Date of issue:* 6 September 1864. *Citation:* Capture of flag.

##### **DUPONT, Henry A.**

*Rank and organization:* Captain, 5<sup>th</sup> U.S. Artillery. *Place and date:* At Cedar Creek, Va., 19 October 1864. *Entered service at:* Wilmington, Del. *Date of issue:* 2 April 1898. *Citation:* By his distinguished gallantry, and voluntary exposure to the enemy's fire at a critical moment, when the Union line had been broken, encouraged his men to stand to their guns, checked the advance of the enemy, and brought off most of his pieces.

##### **BUCKINGHAM, David E.**

*Rank and organization:* First Lieutenant, Company E, 4th Delaware Infantry. *Place and date:* At Rowanty Creek, Va., 5

February 1865. *Born:* 3 February 1840, Pleasant Hill, Del. *Date of issue:* 13 February 1895. *Citation:* Swam the partly frozen creek, under fire, in the attempt to capture a crossing.

### **UNEXPLAINED CONDITION MISDIAGNOSED BY VA AFFECTS MANY BLACKS**

“The House Armed Services Committee’s call for the Navy and the Department of Veterans Affairs (VA) to reassess the diagnoses of a number of former sailors is a courageous and important step,” said Congressman Lane Evans of Illinois. The assessment program, inserted in the Defense Authorization Bill at the request of Evans and Congressman Sanford Bishop (D-GA), is an outgrowth of their work to determine whether boatswain mates who served in the Navy during the 1960s and 1970s and were assigned the task of grinding non-skid material from the decks of ships may suffer from respiratory illnesses due to dust exposure. Many of these sailors may have been misdiagnosed as having sarcoidosis, a condition of unknown origin that affects African Americans in a disproportionate manner. The bill directs the Secretary of the Navy to coordinate with the Secretary of Veterans Affairs and the director of the Armed Forces Institute of Pathology to “establish and occupational lung disease assessment program to determine if naval personnel with lung disease due to other causes may have been misdiagnosed with sarcoidosis and if the incidence of sarcoidosis or other lung disease could be attributable to service aboard Navy ships.” The committee authorized \$500,000 to fund the assessment. “This authorization will be a start in trying to help these brave veterans,” commented Bishop. “It would be unconscionable for Congress to ignore the likelihood that these sailors were exposed to harmful substances while serving their country.” Evans’ and Bishop’s position was also supported by the Navy Surgeon General, who indicated that – in the report language of the Armed Services Committee, on which Evans also serves – “correlation of the results of the NIOSH (National Institute of Occupational Safety and Health) study with a pathologic review of tissue samples at the Armed Forces Institute of Pathology taken from naval personnel during the 1960s and 1970s, would be relevant to resolving the concerns regarding sarcoidosis.” Evans has been critical of past government efforts to determine if lung diseases in naval personnel were service-connected. He recently wrote the Secretary of Veterans Affairs, Togo D. West, Jr., to express his concern that a clinical project convened at his request to evaluate navy veterans for occupational lung diseases was improperly conducted. The clinical project involved contacting and evaluating 58 veterans who may have occupational lung disease due to dust exposure, and concluded that the results did not support misdiagnosis of pneumoconiosis as sarcoidosis. “However,” Evans wrote to West, “It has been brought to my attention that the study was conducted in a limited manner that impacted its ability to evaluate veterans effectively.” Outreach for the project was lacking, according to Dr. Jerrold L. Abraham and Dr. Elaine Panitz, experts in

occupational/environmental pathology and occupational medicine. Abraham and Panitz concluded that the VA carried out an inadequate review of incomplete summaries of medical records, rather than reviewing medical records in their entirety. Noting that VA failed to use adequate diagnostic methods, the two scientists also said the report’s findings have no scientific basis. “Due to these questions about the integrity of the project,” Evans said, “I asked VA to review the letter from Abraham and Panitz and respond to each of their critiques point by point.” The scientists’ letter also contains recommendations for further research. Having served in the Marine Corps during the Vietnam era, Evans has led the struggle for health care and compensation for Vietnam veterans and their children affected by Agent Orange. “I was the author of the Agent Orange Act of 1991,” he said, “which provides authority to the Department of Veterans Affairs to provide service-connected disability compensation to veterans based on the results of research. I am deeply concerned that the sarcoidosis project may not have been conducted in a manner that would provide clear information on the potential health consequences of these military duties. My experience has made me particularly aware of veterans having environmentally-caused illnesses related to their military service.” Evans hopes that the new Navy/VA/Institute of Pathology program could help answer questions that past government efforts have not truly addressed. “We could be talking about a significant number of Navy veterans,” he said. “How many sailors were grinding decks between 1960 and 1980? It seems that every time VA is asked whether veterans suffer from a service-connected environmental exposure, the initial response is a denial, followed by inadequate investigations. Congress needs to know that this study is being done right.” (*Veterans’ Voice*, July 2000)

### **NEW STUDY FINDS AFRICAN AMERICANS LESS LIKELY TO RECEIVE STROKE-SAVING SURGERY**

African Americans are less likely than Caucasians to undergo an important surgery designed to prevent stroke, according to a study published in this month’s *Stroke: Journal of the American Heart Association*. The study of 803 men hospitalized at four Veterans Affairs hospitals also found that black patients are less likely than whites to receive a diagnostic imaging test that is a crucial first step in determining whether an individual is a candidate for the surgical procedure called carotid endarterectomy. “We rule out financial barriers as an explanation for our study’s findings because patients in the VA system have equal financial access,” says Eugene Oddone, M.D., director of the Center for Health Services Research in Primary Care, VA Medical Center in Durham, NC, and chief/division of general internal medicine, Duke University Medical Center. Oddone was the lead researcher in the study. Carotid endarterectomy surgically removes plaque buildup in an artery of the neck that supplies blood to the brain, thereby reducing the likelihood of a stroke. People who have a blockage in the carotid artery are at high risk for stroke as well

as for transient ischemic attacks (TIAs), or “mini-strokes.” The study examined men 45 years of age and older who were hospitalized for stroke or TIA at one of four VA hospitals between 1991 and 1994. The percentage of blacks and whites in the study was similar, according to Oddone. “We were trying to answer the question of whether or not African-American patients had equal access to this important surgical procedure,” says Oddone. “We found there were clinical differences between the two groups of patients. For example, the black patients on average had a smaller amount of blockage in their carotid artery. However, even after that fact and other clinical factors were taken into account, there were still racial discrepancies. In other words, the clinical factors explained a lot, but they didn’t tell us the whole story.” Oddone adds that the clinical differences do not explain why the African-American patients in the study were also less likely to receive carotid ultrasound or carotid angiography – two important imaging tests to determine whether a patient has substantial plaque obstructions in the carotid artery, making him or her a candidate for carotid endarterectomy. The study found that 67 percent of the blacks in the study received carotid imaging, compared to 79 percent of whites. Although the study uncovered no concrete explanation for the racial inequity in carotid imaging and carotid endarterectomy, researchers speculate that it may be rooted in the physician-patient relationship. “There may be a racial difference in the way treatment options are communicated to patients by their physician. That may lead to differences in a patient’s understanding of what types of treatments are available,” explains Oddone. “This may account for previous studies that found that African Americans tend to be less willing to undergo invasive procedures for preventing stroke.” This latest study also challenges claims of earlier research that found African Americans generally tend to have more blockages in blood vessels in the brain in addition to the carotid artery, which has been shown to increase the risk of carotid endarterectomy. “This finding fails to support a belief of many physicians that African Americans tend to have more plaque in their brain arteries. Physicians are generally less likely to recommend patients with blockages in the upper brain for carotid endarterectomy because it is much riskier for those patients,” says Oddone. The study also found that African American patients were more likely than white patients to have had a stroke (78 percent vs. 55 percent), but less likely to have had a TIA (22 percent vs. 45 percent). “Since stroke happens later in the disease process than a TIA, this statistic may point out the need to look at possible racial differences in the evaluation and treatment of cerebrovascular disease prior to hospitalization,” says Oddone. (*National Black Review, Fall 1999*)

#### **WOMEN VETERAN COORDINATORS ASSIST WOMEN VETERANS**

There are Women Veterans Coordinators (WVC) at every Department of Veterans Affairs (VA) health care facility to help women veterans to get needed services and answers to questions or concerns they may have. The position of WVC, established by law in 1982, includes the following:

- Identifying services available to women veterans and ensuring equal access to care;
- Addressing privacy and safety issues;
- Assisting women veterans with eligibility issues;
- Providing education and sensitivity training to VA staff regarding the unique needs of women;
- Working with administration to identify areas for improvement;
- Publicizing the Women Veteran Health Programs and benefits through speaking engagements, written publications and interviews;
- Providing clinical services to women veterans in women’s health clinics/gynecology clinics.

Women Veterans Coordinators are advocates for women veterans and can assist with a variety of issues and concerns, including those that relate to health problems experienced by women who may have been exposed to Agent Orange during their military service in Vietnam. Any woman veteran wanting information about VA services or programs, or who has concerns about care received at a VA facility, should contact the nearest VA facility and ask to speak to the Women Veterans Coordinator at 1-800-827-1000. Or contact your local State Women Veterans Coordinator at 1-800-344-9900 (in Delaware only) or (302) 739-7447. (*VA - Agent Orange Review, May 2000*)

#### **“NOW HEAR THIS!” PROBLEMS WITH YOUR FEET CAN SIGNAL OTHER HEALTH CONDITIONS**

In the military, whether you were “humping it” in the infantry, standing watch on the steel deck or on the concrete flight line, you quickly learned that if you took good care of your feet, they took care of you. When you have the ability to walk around, especially comfortably and pain-free, taking a stroll and the condition of your feet are usually not an issue. However, the older you get, the greater the chances of developing foot problems. You may not know this, but your feet are the mirror of your general health. For this reason, it is extremely important to check them for any changes as they can signal health problems such as diabetes, circulatory diseases and arthritis. Diabetes is not just a disease affecting your sugar metabolism. It also affects your circulation. When people have diabetes, it means their bodies can’t transport sugar from the blood to the tissues. This condition causes the smaller vessels in the body to thicken. Because some of these vessels supply nerve endings, the areas of the body with the affected nerves become insensitive to pain and temperature. Since the foot has very small vessels, people should not ignore loss of sensation in their feet. Other symptoms can include increased thirst, frequent urination, recent weight loss and

dryness of skin. Circulation disorders can also lead to problems with your feet. Again because the blood vessels are extremely small and the farthest from the heart, they are the first to respond to any disease affecting circulation. Ask yourself the following questions:

- Are your feet often cold?
- Have your toenails become thicker?
- Have you lost the hair on your legs or feet?

If you answered yes, you may have low circulation and you should make a visit to your family physician. Another common condition affecting feet, especially the feet of the older population, is osteoarthritis. This form of arthritis usually affects one particular joint – hips, knees or the big toe – because of overuse. If you experience stiffness and pain in the joint, that is an early sign of this condition. Some other foot problems that result from osteoarthritis include bunions and hammer-toes. Bunions develop when a significant amount of extra bone accumulates at the base of the big toe. This causes a “bump” to form and may cause the big toe to overlap or underlap the second toe. Additionally, it may cause your shoes not to fit well, become painful or gradually destroy the metatarsal joints. Hammertoes affect the small joints of the toes. The toes become claw-like, making them more prone to developing corns. If this is combined with diabetes or poor circulation, it makes it easier for repeated trauma or skin breakdown to the area. It could even result in an infection. Rheumatoid arthritis strikes twice as many women as men. This condition affects the whole body but commonly affects the joints and muscles of the whole foot. If this is the case, the joints become stiff, swollen, painful and warm to the touch. The feet become so sensitive that it may seem as if you are walking on pins and needles. As a physician, I strongly encourage you to follow these tips.

- Wash your feet in warm, soapy water every day. Don’t forget in between the toes.
- Keep the feet warm.
- Exercise in order to improve circulation.
- Wear comfortable, well-fitting shoes.
- Remove hard skin with a pumice stone.
- If the skin is painful, seek medical attention.
- If the skin is dry, use lotion except for in between the toes.
- Trim nails straight across.
- If your feet hurt or have areas where the skin doesn’t appear normal, make a visit to your family physician.

Because your feet support more weight than any other part of your body, it’s no wonder we eventually develop problems. However, with proper foot care, you will be able to maintain health and painless feet. For more information on osteopathic medicine or for referral information, call the American Osteopathic Association at 1-800-621-1773, ext. 8252 or visit its Web site at [www.aoa-net.org](http://www.aoa-net.org). Michael K. Murphy, D.O., retired as a Navy captain, is a board certified osteopathic family physician. Dr. Murphy also serves as executive director of the Appalachian – Osteopathic Postgraduate

Training Institute Consortium at Pikeville (KY) College School of Osteopathic Medicine (PCSOM). In addition to his primary duties, he has been appointed to professor of family medicine and director of medical education at PCSOM. Also, he is the director of the family practice residency program at Pikeville Methodist Hospital. (By Dr. Michael Murphy, *Veterans’ Voice*, July 2000)

### **FEDERAL JOB PROGRAMS FOR VETERANS FALL SHORT, LAWMAKERS TOLD**

Federal programs to help veterans find jobs are outdated and ineffective, lawmakers and officials testified at a July 12, 2000, hearing of the House Veterans Affairs benefits subcommittee. The Department of Labor’s Veterans’ Employment and Training Service (VETS) is not reaching those most in need of assistance, Anthony J. Principi, chairman of the Congressional Commission on Servicemembers and Veterans Transition Assistance, said in prepared testimony. Less than 1 percent of job-seeking veterans receive case management services intended for those with “barriers to employment,” according to Principi. He said only 12 percent of veterans who registered with VETS in 1997 got permanent jobs, according to a Labor Department annual report for that year. And between 1996 and 1998, despite a robust economy, four out of five veterans who went to Job Service offices in New York and California failed to find work, while almost 40 percent in Texas did. A bill introduced June 27 by Reps. Jack Quinn, R-NY, and Bob Filner, D-CA, is designed to resolve such disparities. H.R. 4765, the 21<sup>st</sup> Century Veterans Employment and Training Act, would require “measurable performance outcomes” to create what proponents say would be healthy competition for funding dollars and to hold existing programs accountable. Under the existing system, most disabled veteran outreach programs specialists “operate at the whim and desires of a local manager who may or may not care about the programs established for veterans and disabled veterans,” said Alan Gibson, a DVOPS and Vietnam veteran who served 20 years in the Army. Support for veterans programs varies from state to state, Gibson testified. “When this happens, there is no recourse or appeal. Perhaps most importantly, there are no repercussions for ‘blowing off’ the mission for veterans, as there are no rewards for outstanding performance, nor sanctions for poor performance.” But opponents of H.R. 4765 said they worried that a change to performance-based funding would threaten programs that have no annual funding. “The bill would jeopardize the concept on which the national employment and training delivery system for veterans is based – that veterans benefits are a national issue and not a state issue,” said VETS director James Hartman. Caseworkers who currently serve only veterans would also be permitted to assist non-veterans under the legislation, said Hartman, and it would jeopardize the “individualized service the great majority of those who visit our offices need.” The bill “seems to have removed” transitioning veterans as a priority group, objected Mike

Sheridan, owner of MSC Consulting in Austin, TX. "This segment of the veteran population has historically had the highest rate of unemployment and makes up a large portion of those veterans that seek assistance. The bill is somewhat confusing with regard to which veterans actually do have priority." More than five sections in H.R. 4765 specify which veterans would receive priority, and the specifications vary slightly in each section, Sheridan noted. "We need to consider government's role in providing labor market information job placement services, and job training," said Dr. Carol D'Amico, senior fellow at the Hudson Institute. "These (veteran-specific) programs were initiated in 1945 and were created, obviously, for a different era, economy, and worker. Federal job training programs are rooted in the 1960s and affect such a small percentage of the population. We need to rethink the government's role..." "Veterans are not another special-interest group deserving of a special employment program," said Principi. "Veterans are a diverse group of individuals...and have diverse transitional employment and training needs. As a matter of United States policy, veterans fundamentally deserve more because they have earned more by virtue of their service to the nation – be it three years or 30." (*The Stars and Stripes*, July 31-August 13, 2000)

#### **SNAFU FOUND: MANY MAY GET BIGGER RETIREMENT CHECKS**

Thousands of Marines may be eligible for the bigger retirement checks they deserve now that Corps officials have fixed a record-keeping error. Officials recently discovered that records kept for Marines who transferred from another service, have broken service, or who joined the Corps from service academies or ROTC programs may not reflect the actual year in which they first entered military service. However, the corrected dates may make some Marines ineligible for the \$30,000 bonus in the new "Choice" retirement plan included in the 2000 Defense Authorization Act. One example of the Corps' administrative errors: For some Marines commissioned through the Naval Academy in Annapolis, Md., retirement pay could be erroneously based on the year they were commissioned, not the year they entered the Naval Academy. Another example: Some Marines records might not give them correct credit for ROTC training. The difference in dates could be as much as four years or less than a year, but it could mean a big change in which retirement plan the Marines are eligible for and how much retirement cash they rate. The problem stems from the way officials have been recording the DEAF date, or date of initial entry military service, for many years. Say, for example, that a Marine gunnery sergeant enlisted in the Army in 1978 and then got out two years later and joined the Corps. His record, for retirement purposes, might reflect his DEAF date as 1980, not 1978. The extra two years could mean the Marine is eligible for a better retirement package. If the corrected DEAF date means more retirement money, that can mean \$1,000 to \$2,400 a year more in retirement pay. That gunnery sergeant might

rate \$60 more each month of his retirement. If he lived another 50 years, that could mean more than \$36,000 over the course of his retirement pay. Since interest would be paid on the higher retirement pay, however, it could mean even more money over the course of his retired years. The DEAF date has no effect on a Marine's base pay. That is driven by the pay entry base date, which is not related to the DEAF date. Maj. Karl Hackbarth, a manpower policy analyst, chalked the mistakes up to years of human error. It is likely, he said, that recording rules were not followed consistently by the administrators who enter the Marines' data. After Congress changed the rules governing retirement plans last year, Corps officials began looking more carefully at Marines DEAF dates. When some discrepancies were found, Corps officials decided the existing regulations regarding how the data should be entered needed to be more stringent. "Any time you have a system with human intervention, there is the potential for errors," Hackbarth said, adding that the problem has been fixed. "We're working... to put controls in place to make sure this critical information is current and can be checked for accuracy in the future," he said. The payoff under the 2000 Defense Authorization Act that President Clinton signed into law Oct. 5, service members now choose from three retirement packages. If the Marines' service records are off by a year or more but are corrected, it could make them eligible for a different plan.

- ✓ The premium plan, called "High 1," is for those who entered military service in September 1980 or before. Retirement pay is based on the highest pay the Marine was entitled to during his career. After 20 years of service, the Marine's retirement pay would be 50 percent of that amount.
- ✓ Marines whose DEAF date is between Sept. 8, 1980, and July 31, 1986, enter the plan known as "High 3," which averages the highest base pay from the last 36 months of their careers. If a Marine was promoted within the last three years of his service, the lower pay grade would lower this average, making the High 3 plan less preferable than High 1. Under High 3, the Marine's retirement pay would be 50 percent of this average after 20 years of service.
- ✓ The new Choice plan was created to address inequities in the Redux retirement plan. Under this new plan, Marines whose DEAF date falls after Aug. 1, 1986, can opt for a \$30,000 bonus after 15 years of active service, but they must serve a total of 20 years active service and then they receive a reduced amount of retirement pay.

Hackbarth said he did not know how many Marines records could be wrong, but at the Naval Academy alone, officials have found more than 1,800 Marines whose DEAF dates were entered incorrectly. The Corps is unable to check all Marines records to ensure discrepancies are fixed. Instead, Marines who believe their records could contain a discrepancy need to verify the DEAF date or check with their personnel officer, Hackbarth said. Hackbarth urged Marines to check their

records, either on the World Wide Web at [www.mol.marines.com](http://www.mol.marines.com), or by checking with a personnel officer. (*Idaho State Veterans Services Bulletin, August 2000*)

### **VETERANS LEGAL SERVICES ATTORNEY SCOLDS VA CLAIMS PROCESSORS**

“We have discovered that full and fair adjudication of claims for VA benefits is still not a reality,” the deputy director of the National Veterans Legal Services Program (NVLSP), which recently completed an audit and evaluation of VA claims processing, recently told lawmakers on Capitol Hill. Veterans seeking service-connection, an increase in service-connected benefits or service-connected death benefits have “a greater than 50 percent chance of having [their claims] improperly adjudicated by a VA regional office,” Ronald B. Abrams testified at a hearing of the House Veterans Affairs oversight and investigations subcommittee. “There are far too many premature VA adjudications resulting in adverse decisions,” Abrams said. “Many VA managers were promoted to their current position during an era when timeliness and production were emphasized over quality. VA regional offices are eager to adjudicate claims and thereby obtain credit... As a result, many VA regional offices prematurely deny claims before all necessary evidence has been obtained. Some claims are adjudicated and denied even before the service medical records are received.” Abrams said that some VA managers say they feel pressured to make premature judgments on claims. He said that too many regional offices look for negative evidence, which would allow them to refuse valid claims, even when there is reasonable evidence on file to support a claim. “For example,” he continued, “veterans seeking service-connection for mental conditions, entitlement to individual unemployment benefits, back benefits or compensation based upon secondary service-connection have to jump over a higher bar than other veterans.” “VA notifications often fail to provide an adequate explanation of the reasons and bases for the adverse VA determination. It is a matter of VA policy not to inform veterans what diagnostic code has been assigned to a service-connected disability for rating purposes.” In further testimony, Abrams, who is an attorney, outlined other problems cited in the NVLSP audit, including:

- Erroneously low disability ratings for service-connected mental conditions;
- Erroneous denial of claims for service-connection for mental conditions;
- Inadequate requests for medical opinions;
- Non-responsive VA examination reports;
- Lack of coordinated regional office quality control and a subsequent failure to act on recognized patterns of errors.

Among recommendations offered by Abrams:

- RO quality reviews should always be validated by an independent quality review.

- VA employees who do a good job should be paid a reasonable salary and receive bonuses and promotions.
- VA management should more clearly communicate with its employees what it wants from them. If management focuses on quality as well as efficient work, veterans will be better off.

(*The Stars and Stripes, July 31-August 13, 2000*)

### **HUNTING, TRAPPING AND FISHING LICENSES**

The Delaware Commission of Veterans Affairs (DCVA) in cooperation with the Department of Natural Resources and Environmental Control (DNREC), Division of Fish & Wildlife will be issuing Hunting, Trapping and Fishing ID cards for those Delaware veterans and members of the Armed Forces who meet the exceptions to requirements for licensing under Title 7, Chapter 5, Section 502 of the Delaware Code. For more information, please call (302) 739-2792 or (800) 344-9900.

### **DELAWARE VETERANS HALL OF HEROES**

The Delaware Veterans Hall of Heroes Association has been formed to pay homage to Delaware Veterans, who have received medals of valor (i.e., Medal of Honor, the Service Crosses, Air Medals, Silver Star, Legion of Merit, Bronze Star, Purple Heart, and other Medals of Valor) in the service of their country. The veteran must have been a Delaware resident at the time of award; be honorably discharged; have proof of the award; copy of Certificate of Discharge (DD 214). Veterans or family and friends of inductees living or posthumous, please call Wilson K. Smith (302) 655-4642, Thomas H. Brown (302) 658-2580, or Paul L. Cathell, Jr. (302) 994-2061. We would also appreciate hearing from relatives of the Delaware Medal of Honor Recipients (12) from the earlier conflicts to the Civil War.

### **CERTIFICATE OF APPRECIATION TO DELAWARE VETERANS**

In January 1946, Walter W. Bacon, then elected Governor, authorized a state award to those who served in World War II. To honor this commitment to Delaware Veterans, Governor Thomas R. Carper has announced that the State of Delaware will provide a “Certificate of Appreciation” to all Delaware residents who shall have served honorably in the Armed Forces of the United States during time of peace, conflict or war. To request a “Certificate of Appreciation” the veteran/spouse or next of kin must submit the enclosed application (see page 14) along with a copy of veterans Certificate of Release or Discharge from Active Duty, (DD Form 214). **DO NOT SEND ORIGINAL.** If you are a member of a veteran’s organization we recommend that you

send your requests through them so they may be consolidated. The 8 1/2 X 11 inch certificate, suitable for framing, is printed in black lettering on parchment paper, has a gold border and the Delaware State Seal is depicted in the background. The embossed gold seal of the Commission of Veterans Affairs is attached in the lower right hand corner.

**COLD WAR CERTIFICATE: HOW TO OBTAIN**

As of April 5, 1999, the long-awaited Cold War Certificate is available by sending a copy of your discharge document to: *Cold War Recognition, 4035 Ridge Top Road, Suite 400, Fairfax, VA 22030. FAX (703) 275-6749. Help line: (703) 275-6279.* Anyone who served on active duty – including stateside – between September 1945 and December 1991 is eligible for the certificate. (VFW, May 1999)

**CENTRAL AND SOUTHERN DELAWARE HEALTH SCREENINGS**

Health screenings will be conducted at the following locations from 9:00 AM – 3:00 PM in Kent and Sussex Counties:

OCT 5	Ocean View VFW Post 7234	539-9981
OCT 10	Smyrna American Legion Post 14	378-6329
OCT 12	Riverdale American Legion Post 28	945-7314
NOV 2	Ocean View VFW Post 7234	539-9981
NOV 8	Delaware Commission of Veterans Affairs	739-2792
NOV 30	Riverdale American Legion Post 28	945-7314
DEC 5	Smyrna American Legion Post 14	378-6329
DEC 7	Ocean View VFW Post 7234	539-9981
DEC 21	Riverdale American Legion Post 28	945-7314

For more information contact:

- Clyde Bragg, RN Outreach Health Screening Nurse*  
(302) 633-5332 – Outreach Screening Clinic
- (302) 994-2511 – BEEPER 197 – RN
- (302) 633-5500 – Primary Care/Women’s Health Clinic
- (302) 633-5212 – Eligibility/Registration
- (302) 633-5519 – Health Care Hotline

**VETERAN SERVICE OFFICER REPRESENTATION**

The Delaware Commission of Veterans Affairs Service Officers, Ms. Melanie E. Bronov and Ms. Laurie A. White, provide information and assistance in submitting claims concerning education, disability compensation, hospitalization, rehabilitation and pensions. In addition, Ms. Bronov and Ms. White are also available at the Pyle State Service Center located in Roxanna, DE, on the last Monday of each month between the hours of 10:00 AM and 2:00 PM. Effective October 16, 2000, you may reach Ms. White at the Pyle State Service Center at (302) 732-9560. *For further information, and/or an appointment you may call (302) 739-7447 or toll free at 1-800-344-9900 (In State only).* DCVA also represents members of the following veterans organizations: The Retired

Enlisted Association, Military Order of the Purple Heart, and the Marine Corps League.

**EMPLOYMENT SERVICES**

Roger Pleus (Wilmington).....	302-761-8096
Al Barclift (Wilmington).....	302-761-8093
Desiree Young (Newark).....	302-453-4350 ext. 218
Mike Wolanski (VA Regional Ofc, Elsmere)...	302-633-5492
Steve Flaherty (Dover).....	302-739-5473
Charlene Robinson (Dover AFB).....	302-677-6942
Allan Hopkins (Dover).....	302-739-5473
Bob Dotterer (Georgetown).....	302-856-5230

**OUTREACH SERVICES**

**American Legion**

Darrell Johnson, Sr., Dept. Service Officer, (302) 633-5323, will visit the following posts between 10:00 AM and 2:00 PM on the following dates:

OCT 4	Laurel, Post 19	875-9948
	Seaford, Post 6	
OCT 11	Dover, Post 2	674-3922
OCT 19	Oak Orchard/Riverdale	945-1673
	Post 28	
NOV 1	Laurel, Post 19	875-9948
	Seaford, Post 6	
NOV 8	Dover, Post 2	674-3922
NOV 16	Oak Orchard/Riverdale	945-1673
	Post 28	
DEC 6	Laurel, Post 19	875-9948
	Seaford, Post 6	
DEC 13	Dover, Post 2	674-3922
DEC 21	Oak Orchard/Riverdale	945-1673
	Post 28	

**Disabled American Veterans (DAV)**

Charles Kashner and Justus (Joe) Kehne, Department Service Officers (DAV), Kent County (302) 697-9061 or (302) 697-3335, Sussex County (302) 644-2477 or (302) 644-9445.

Every Wednesday: (Kent)	DAV Headquarters Building 183 South Street Camden, DE 19934
Every Thursday: (Sussex)	Department of Labor Div. Of Emp & Trng Georgetown Professional Park 600 N. DuPont Hwy. Georgetown, DE 19947

**American Veterans (AMVETS)**

Michael Companion, National Service Officer, VA Regional Office, 1601 Kirkwood Hwy, Wilmington, DE 19805, (302) 994-2511 ext. 4366.

**Paralyzed Veterans of America (PVA)**

Dante Profili, National Service Officer, VA Regional Office, 1601 Kirkwood Hwy, Room 26, Wilmington, DE 19805, (302) 633-5325 or (302) 633-5392.

**Retired Navy Activities Affairs Office**

Naval & Marine Corps Reserve Center, 3920 Kirkwood Hwy, Wilmington, DE 19808-5194, (302) 998-3328.

**Veterans of Foreign Wars (VFW)**

James Withrow, Dept. Service Officer, VA Regional Office, 1601 Kirkwood Hwy, Room 21, Wilmington, DE 19805 (800) 461-8262 ext. 5326 or (302) 633-5326.

1 <sup>ST</sup> Thursday	Dover Armory (741-7516)	8:00-11:00 AM
	Milford VFW (422-4412)	1:30-4:00 PM
2 <sup>nd</sup> Thursday	Dover Armory (741-7516)	8:00-11:00 AM
	Milton VFW (684-4975)	1:30-4:00 PM
3 <sup>rd</sup> Thursday	Dover Armory (741-7516)	8:00-11:00 AM
	Rehoboth VFW (227-3469)	1:30-4:00 PM
4 <sup>th</sup> Thursday	Dover Armory (741-7516)	8:00-11:00 AM
	Seaford VFW (629-3092)	1:30-4:00 PM
5 <sup>th</sup> Thursday	Dover Armory (741-7516)	8:00-11:00 AM

NOTE: All persons interested in Outreach Services should first call our office so that some advance information may be obtained to accelerate application process.

**SERVICE ORGANIZATIONS**

American Legion.....	302-633-5323
AMVETS.....	302-994-2511 ext. 4366
Disabled American Veterans.....	302-633-5324
Paralyzed Veterans of America.....	302-633-5325
Veterans of Foreign Wars.....	302-633-5326
Vietnam Veterans of America.....	302-633-5357

**VETERANS ADMINISTRATION**

Claims, Benefits, Veterans Services (Regional Office).....	1-800-827-1000
VA Hospital Scheduling.....	1-800-461-8262/302-944-2511
Veterans Outreach Center (New Castle County).....	302-633-5360
(Kent and Sussex Counties).....	302-422-8011

**DELAWARE COMMISSION OF VETERANS AFFAIRS**

Commissioners may be reached by calling (800) 344-9900.

Jim Thompson (Chairman).....	Marine Corps League
Bob Marcinkowski (Vice Chairman).....	TROA
Bob Barnett.....	Jewish War Veterans
Cornelius "Bill" Carroll.....	Military Order of the Purple Heart
Lee Davis.....	DE/MD PVA
Charles Farrell.....	Korean War Veterans
Charles Kashner.....	Disabled American Veterans
Gary "Mo" Morris.....	American Legion
Roy Newlin.....	Representing WWI
Ben Pernol.....	Veterans of Foreign Wars
Reese Phillips.....	La Societe 40&8
Walter Smock.....	AMVETS
Leon Stajkowski.....	Fleet Reserve Association
John Thomas.....	Delaware Veterans
George Webb.....	Vietnam Veterans of America

**DELAWARE VETERANS MEMORIAL CEMETERY**

New Castle County Section (Bear, DE).....	302-834-8046
Sussex County Section (Georgetown, DE).....	302-934-5653

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**NAME/ORGANIZATION** \_\_\_\_\_  
**STREET** \_\_\_\_\_  
**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_ - \_\_\_\_\_

**MAIL TO:**      **DELAWARE COMMISSION OF VETERANS AFFAIRS**  
**ROBBINS BUILDING**

802 SILVER LAKE BLVD, SUITE 100  
DOVER, DE 19904

DELAWARE COMMISSION OF VETERANS AFFAIRS  
APPLICATION FOR CERTIFICATE OF APPRECIATION

Veterans Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
Street City State Zip

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_

Date Entered Service \_\_\_\_\_ Date Separated \_\_\_\_\_ Branch of Service \_\_\_\_\_

Date of Birth \_\_\_\_\_ Type of Discharge \_\_\_\_\_ Highest Rank Achieved \_\_\_\_\_  
(only required if requesting rank on certificate)

LEGAL RESIDENT OF THE STATE OF DELAWARE

To meet the legal residency requirement (in addition to honorable military service) the veteran must have been:

- a. A legal resident of Delaware when he or she entered the Armed Forces of the United States; or
- b. A legal resident of Delaware at time of death

Please submit this application and a copy of Certificate of Release or Discharge from Active Duty, (DD-214) to:

Delaware Commission of Veterans Affairs  
Robbins Building  
802 Silver Lake Blvd, Suite 100  
Dover, DE 19904  
Phone: (302) 739-2792 or 1-800 344-9900 (In state only)

Signature of Veteran/spouse or next of kin \_\_\_\_\_ Date \_\_\_\_\_

Relationship if not veteran \_\_\_\_\_

**NOTE:** Please anticipate 4 to 6 weeks in receiving your Certificate

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TO BE COMPLETED BY DCVA

\_\_\_ Approved \_\_\_ Pending \_\_\_ Disapproved

Name \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

# STATE OF DELAWARE

"Serving Delaware's Veterans"

**Delaware Commission of Veterans Affairs  
Robbins Building  
802 Silver Lake Blvd, Suite 100  
Dover, Delaware 19904**

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U.S. POSTAGE  
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PERMIT NO 120**

DCVA 20-01-00-10-01