



VETERANS SERVING VETERANS

GREENE COUNTY VETERAN SERVICE OFFICE

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<http://www.co.greene.oh.us/Veterans>



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John E. Steele
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The Greene County Veteran Service Commission and Veteran Service Office want to take this opportunity to express our deepest gratitude for all those who served our Great Nation.

We hope you will find the contents of this newsletter very helpful and informative. This newsletter will be published and mailed to all Veterans' Organizations within Greene County on a quarterly basis or as new and updated information is made available.

<http://www.co.greene.oh.us/Veterans/> is the website for the Greene County Veterans' Services. This website consists of a wide array of information ranging from the services that our office provides such as assistance with filing for entitled VA benefits, financial assistance, and transportation to VA medical facilities. This website also provides a list of very helpful website links.

Best Wishes in 2009 !!

This newsletter contains the following articles:

1. VA Disability Compensation – (Widows Cheated)
2. Tomb of the Unknowns (Army Declines Offer)
3. VA Secretary (Eric K. Shinseki)
4. TSGLI (Benefits Expand)
5. VA Secretary Annual Report (Self Assessment)
6. VA Benefits (Informing Veterans)
7. Grace After Fire (Women Veteran Resource)
8. Veteran Web Links (Where To Look)
9. Gulf War Syndrome (IOM Reviews Report)
10. TBI (Blast Exposure Database)

VA DISABILITY COMPENSATION UPDATE 03: The Veterans Affairs Department has been wrongfully recovering money from widows of deceased veterans over the last 12 years by demanding reimbursement for final benefits checks in violation of federal law. Sen. Daniel K. Akaka, (D-HI), the chairman of the Senate Veterans' Affairs Committee, confronted the department last week about the problem, which has resulted in hundreds of thousands of senior citizens losing pension and disability money received during the month of their spouse's death. "This flawed practice has caused serious hardship for many widows," Akaka said. "I suspect that the improper procedures have harmed thousands of widows and widowers over the last 12 years." Congress granted veterans' spouses the right to keep their partner's last month's worth of benefits when it passed the Veterans' Benefits Improvements Act of 1996 (PL 104-275). The law instructed the department to treat disability and pension checks issued during the month of a veteran's death "as being payable to a surviving spouse." But the department never adjusted its systems to follow the law. As a result, the department has routinely either refused to send checks or taken active measures to retrieve money already sent, including collection actions. Akaka brought up the issue in a 5 DEC letter to Secretary James B. Peake, asking him to immediately take steps to identify all the spouses affected, pay them their missing benefits, and fix the system.

Akaka's press secretary, Jesse Broder Van Dyke, said there was no evidence officials intentionally withheld any money. "It was something that slipped through the cracks," he said. "They're using an automated system, so they needed to go and change the program, but they never did." Peake responded 11 DEC with a tentative action plan to fix the benefits problem over the coming months, saying "I agree that this problem must be fixed." A department spokesman did not immediately respond to requests for comment, but a committee aide said solving the problem likely would take some time, partly because the department does not keep track of all spouses. The aide estimated that up to 50,000 spouses could have been affected each year since the law was passed. Each spouse could be entitled to anywhere from a few hundred to a few thousand dollars, depending on their situation. Repayments could cost the government hundreds of millions dollars, the aide said. The department should have enough money in its budget to cover the costs, but "they might have to come back to Congress for some additional money," the staffer said. Akaka became aware of the problem last month when contacted by Ruby Maile Sasaoka, a Hawaii resident whose veteran husband died in 2007. After using her husband's final benefit check for funeral expenses, the Treasury department took an equal amount of money directly from her bank account without her knowledge. As a result, she unwittingly bounced checks and now faces credit issues.

TOMB OF THE UNKNOWNNS UPDATE 03: Despite an economic crisis that has organizations from small-town mom-and-pop shops to local and national governments tightening their belts, the Department of the Army still refuses to accept a donation from a Glenwood Springs CO man that could save it millions of dollars. The donation in question is a 118,000-pound slab" of marble, valued at just over \$31,000, from "the Yule Quarry in

Marble, Colo." Retired Glenwood car dealer John Haines has been trying to donate the marble since 2003. It "would replace the cracked Tomb of the Unknowns at Arlington National Cemetery, but procedure dictates that all government jobs must go through a pricey bidding process, thereby disqualifying Haines' donation.

VA SECRETARY UPDATE 08: President-elect Barack Obama has chosen retired Gen. Eric K. Shinseki to be the next Veterans Affairs secretary, turning to a former Army chief of staff once vilified by the Bush administration for questioning its Iraq war strategy. He will be the first Asian-American to hold the post of Veterans Affairs secretary, adding to the growing diversity of Obama's Cabinet. "I think that General Shinseki is exactly the right person who is going to be able to make sure that we honor our troops when they come home," Obama said in an interview with NBC's "Meet the Press". Shinseki's tenure as Army chief of staff from 1999 to 2003 was marked by constant tensions with Defense Secretary Donald Rumsfeld, which boiled over in 2003 when Shinseki testified to Congress that it might take several hundred thousand U.S. troops to control Iraq after the invasion. Rumsfeld and his deputy, Paul Wolfowitz, belittled the estimate as "wildly off the mark" and the general was marginalized and later retired from the Army. But Shinseki's words proved prophetic after President George W. Bush in early 2007 announced a "surge" of additional troops to Iraq after miscalculating the numbers needed to stem sectarian violence. Obama said he chose Shinseki for the VA post because he "was right" in predicting that the U.S. will need more troops in Iraq than Rumsfeld believed at the time.

Shinseki, 66, is slated to take the helm of the government's second largest agency, which was roundly criticized during the Bush administration for underestimating the amount of funding needed to treat thousands of injured veterans returning from Iraq and Afghanistan. Thousands of veterans currently endure six-month waits for disability benefits, despite promises by current VA Secretary James Peake and his predecessor, Jim Nicholson, to reduce delays. The department also is scrambling to upgrade government technology systems before new legislation providing for millions of dollars in new GI benefits takes effect next August. Sen. Daniel Akaka, D-Hawaii, and chairman of the Senate Veterans Affairs Committee, praised Shinseki as a "great choice" who will make an excellent VA secretary. "I have great respect for General Shinseki's judgment and abilities," Akaka said in a statement. "I am confident that he will use his wisdom and experience to ensure that our veterans receive the respect and care they have earned in defense of our nation. President-elect Obama is selecting a team that reflects our nation's greatest strength, its diversity, and I applaud him." Veterans groups also cheered the decision. "General Shinseki has a record of courage and honesty, and is a bold choice to lead the VA into the future," said Paul Rieckhoff, executive director of the Iraq and Afghanistan Veterans of America. "He is a man that has always put patriotism ahead of politics, and is held in high regard by veterans of Iraq and Afghanistan."

Obama's choice of Shinseki, who grew up in Hawaii, is the latest indication that the president-elect is making good on his pledge to have a diverse Cabinet. In Obama's eight Cabinet announcements so far, white men are the minority with two nominations - Timothy Geithner at Treasury and Robert Gates at Defense. Three are women - Janet Napolitano at Homeland Security, Susan Rice as United Nations ambassador and Hillary Rodham Clinton at State. Eric Holder at the Justice Department is African American, while Bill Richardson at Commerce is Latino. Shinseki is a recipient of two Purple Hearts for life-threatening injuries in Vietnam. Upon leaving his post in June 2003, Shinseki in his farewell speech sternly warned against arrogance in leadership. "You must love those you lead before you can be an effective leader," he said. "You can certainly command without that sense of commitment, but you cannot lead without it. And without leadership, command is a hollow experience, a vacuum often filled with mistrust and arrogance." Shinseki also left with the warning: "Beware a 12-division strategy for a 10-division army."

TSGLI UPDATE 02: Traumatic Servicemembers' Group Life Insurance (TSGLI) is a congressionally mandated program that applies to members of all branches of service and all components - active, Guard or Reserve, who incur a traumatic, physical injury based on an external force of violence. More servicemembers may now qualify for TSGLI, because of newly expanded benefits resulting from a recent review by the Department of Veterans Affairs. TSGLI provides tax-free payments between \$25,000 and \$100,000 per traumatic event, which can be used to help with unseen expenses or provide a financial start on life after recovery. The TSGLI program began 1 DEC 05, as a non-option selection attached to Servicemembers' Group Life Insurance (SGLI). All servicemembers from that point forward who elected SGLI benefits pay \$1 towards this coverage each month. Servicemembers who incurred a qualifying traumatic injury from 7 OCT 01, through 30 NOV 05, while on orders outside the United States in support of Operation Iraqi Freedom and Operation Enduring Freedom, or serving in a Combat Zone Tax Exclusion area, are now also covered by TSGLI, regardless of whether they elected SGLI coverage or not. Expansion of Covered Losses effective on 26 NOV 08 includes:

- . Loss of Sight - Loss of Sight lasting 120 days or more is considered as "permanent", qualifying the service member for the same payment rate as for permanent loss of sight (\$100,000 for both eyes, \$50,000 for one eye).

- . Uniplegia - Uniplegia (complete and total paralysis of one limb) has been added to the schedule of losses with payment at \$50,000.

- . Amputation of the Hand - The definition of amputation of the hand has been expanded to include loss of four fingers (on the same hand) or loss of thumb, with payment remaining at \$50,000 for one affected hand and \$100,000 for both hands.

- . Amputation of the Foot - The definition of amputation of the foot has

been expanded to include loss of all toes, with the payment remaining at \$50,000 for one affected foot and \$100,000 for both feet.

. Loss of Four Toes - A new category has been created for loss of four toes (on the same foot and not including the big toe) with payment at \$25,000 for one affected foot and \$50,000 for both feet.

. Loss of Big Toe - A new category has been created for the loss of the big toe, with payment at \$25,000 for one affected foot and \$50,000 for both feet.

. Limb Salvage - Coverage has been expanded to include limb salvage (multiple surgeries intended to save a limb rather than amputate) with payment equivalent to amputation.

. Burns - The burn standard, currently 3rd degree (full thickness) burns to at least 30% of face or body, has been expanded to include 2nd degree (partial thickness) burns to at least 20% of the face or body.

. Hospitalization as a Proxy for ADL Loss - Continuous 15-day inpatient hospital care is deemed a proxy for the first ADL eligibility period for OTI (Other Traumatic Injury) and TBI (Traumatic Brain Injury) claims.

. Facial Reconstruction - Facial Reconstruction, required as a result of traumatic avulsion of the face or jaw that causes discontinuity defects, has been added to the schedule of losses, with payment levels of \$25,000 to \$75,000, depending upon the severity of the injury.

Service-members that have already submitted a claim in the past do not need to resubmit. The VA and TSGLI offices for each service will conduct a reach-back of previously denied claims to see if they qualify for payment under the new guidance. Notifications will be sent to service-members if an additional award is due. To expedite the process, service members or veterans who believe they could qualify under the new program changes should contact their branch of service TSGLI office to ensure that:

. Their previous claim is being reviewed for a new eligibility determination.

. All the required information is of record; and

. Their current contact and banking information is up to date.

For more information, refer to:

<http://www.vfw.org/index.cfm?fa=news.newsDtl&did=4849>.

VA SECRETARY ANNUAL REPORT: The VA Secretary has forwarded his annual performance and Accountability Report to the President/Congress on VA's self-assessment of their progress towards meeting its performance goals. In 2008, with approximately \$97 billion in obligations and approximately 250,000 employees, VA achieved numerous accomplishments that helped improve the quality of life for America's veterans and their families. Major accomplishments are summarized below

1. Medical Services: Workload has increased significantly over the past 8 years, rising from 3.8 million unique patients in 2000 to more than 5.5 million in 2008. In 2008, VA achieved the following key results to help meet the needs of veterans:

. Patient Access: In 2006, 94% of primary care appointments were scheduled within 30 days of the patient's desired appointment date vs. 98.7% in 2008.

. Quality of Health Care: VA attained scores of 84% and 88% for the Clinical Practice Guidelines and Prevention Index, respectively. These indices are nationally recognized industry standards used to measure quality of health care.

. Rural Health: In rural areas where it is not feasible to establish a medical center or outpatient center, VA established the Rural Mobile Health Care Clinics pilot project to improve access to primary care and mental health services. The project has outfitted four new mobile health clinics to serve veterans in 24 predominately rural counties throughout Colorado, Nebraska, Wyoming, Maine, Washington, and West Virginia.

. Suicide Hotline and Suicide Prevention: Suicide is the 11th most frequent cause of death in America. Vet Centers and VA Medical Centers are ready to help veterans at risk for suicide. VA continued to operate a national suicide prevention hotline to provide veterans in emotional crisis with free, 24/7 access to trained counselors. To operate the hotline, VA partners with the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration.

. Traumatic Brain Injury: VA has developed innovative treatment for combat veterans returning from Iraq and Afghanistan. Recent developments include developing a mandatory TBI training course for all VA health care professionals and instituting a program to screen all patients who served in the OEF/OIF combat theaters for TBI.

. AW2 Advocates: In 2006, VA began hosting Army Wounded Warrior (AW2) Advocates at key VA medical centers. Advocates work closely with Network Polytrauma Sites and OEF/OIF Teams to provide transition assistance and community support to injured/ill soldiers, veterans, and their families. By 31 DEC 08 AW2 Advocates will be in place at 59 VA medical centers.

. Call Center: In MAY 08, VA began contacting nearly 570,000 recent combat veterans to inform them of VA's medical services and other benefits. In the first phase, calls were made to approximately 15,500 veterans who were sick or injured while serving in Iraq or Afghanistan. VA offered to appoint a case manager to ensure that they receive appropriate care and know about their VA benefits. The second phase launched in June is targeting 550,000 OEF/OIF discharged veterans who had not contacted VA for

services.

. VA Nursing Academy: VA's Nursing Academy established six new partnerships with the country's leading nursing schools. Through these partnerships, VA has increased the number of nursing students coming to VA facilities for clinical experiences and the number of baccalaureate degree nursing graduates who are making VA their first choice of employment after graduation.

2. Benefits: VA is providing compensation and pension benefits to nearly 3.8 million veterans and beneficiaries. In 2008, VA processed more than 899,800 claims for disability benefits. Despite greater workload, VA achieved a number of significant positive performance results in the benefits delivery area:

. Increasing Workforce: Hired nearly 2,000 additional employees to process compensation and pension claims to reduce the backlog and improve claims processing timeliness.

. Benefits Adjustments: Adjusted compensation benefits for more than 37,000 veterans entitled to CRSC & CRDP Pay.

. Seamless Transition: Received more than 47,000 pre-discharge claims in 2008 through its Benefits Delivery at Discharge (BDD) program and the newly introduced Quick Start program. Service-members who are within 60-180 days of discharge and who are available for examination prior to discharge can participate in the BDD program. Since VA rates disabilities while the service-members are still in military service, the BDD allows disability benefits to be awarded very soon after discharge. The Quick Start program was introduced so that service-members with fewer than 60 days to discharge or who do not meet the BDD criterion requiring availability for all examinations prior to discharge can submit a claim prior to discharge. In August, VA began processing all BDD claims in a paperless environment.

. Quality: Increased to 92% the national accuracy rate for authorization work for pension claims, compared to 91% in 2007.

. Timeliness: Processed insurance disbursements in an average of 1.6 workdays - significantly better than the industry average of 5.7 workdays.

. Education: Provided education benefits to approximately 539,000 students of which 20% of these received VA education benefits for the first time. The number of students receiving education benefits continues to climb, with claims increasing 10% over the 2007 level to approximately 1.6 million in 2008.

3. Cemeteries: VA honors the service and sacrifices of America's veterans through the construction and maintenance of national cemeteries as national shrines. In 2008, VA maintained more than 2.9 million gravesites

at 158 properties, including 125 national cemeteries and 33 other cemeterial installations. In this context, the Department accomplished the following:

. Cemetery openings: VA funded four new State veterans cemeteries in Glennville GA; Anderson SC; Des Moines IA; and Williamstown KY, VA increasing to 84.2% the proportion of veterans served by a burial option within a reasonable distance (75 miles) of their residence -- up from 83.4% in 2007. Continued progress in establishing six new national cemeteries to serve veterans in the areas of Bakersfield CA; Birmingham AL; Columbia SC; Jacksonville & Sarasota FL; and Philadelphia PA as part of the Department's largest expansion of its system of national cemeteries since the Civil War era. These cemeteries are expected to begin operations in 2009 and will provide service to about 1 million veterans.

. Timeliness: Achieved a 93% threshold of the proportion of graves in national cemeteries marked within 60 days of interment, a compared to the 49% level of 2002.

. Quality: Ninety-eight percent of survey respondents rated national cemetery appearance as "excellent."

The report highlights additional accomplishments in the areas of OEF/OIF, Advisory Committee on Gulf War Veterans, VA/DoD Collaboration, Finance, Data Quality Data, and Security. To review the Secretary's letter and the report itself refer to www.va.gov/budget/report/2008/SecLetter.pdf & www.va.gov/budget/report/2008/index.htm

TRAUMATIC BRAIN INJURY UPDATE 05: The National Guard is developing a method to track soldiers who have been exposed to blasts in Iraq or Afghanistan. The effort will allow soldiers who might develop problems years later to show how many times they were in the vicinity of a mortar round explosion, improvised explosive device detonation or other blast. "A lot of soldiers don't show symptoms right away," said Lt. Col. Maureen Weigl, project officer for the Army Guard program. However, she said, if they show symptoms down the road, there has not been a way to link them to exposure to blasts during their service in the war zones. "Documenting this information ensures quality of care if they develop symptoms," she said. "Having the documentation available to providers will give them the opportunity to treat the issues." Weigl said she was asked by Lt. Gen. Clyde Vaughn, Army Guard director, to visit Iraq and review the current method of recording soldiers who are exposed to a blast. If nothing was available, something was to be created. The database simply records the names of all personnel in the vicinity of a blast-even if they are not injured-and how close they were. Weigl said inclusion in the database should not be interpreted to suggest something is wrong with the soldier. "It merely just links you to a significant activity," she said. The new system debuted in OCT 098 and is now being briefed to surgeons and sergeant majors. It is possible the data included will help with the future research of traumatic brain injuries

and their treatment. For the service member, it could help prove that problems suffered years later are related to service, which could result in benefits that would otherwise go unclaimed.

VA BENEFITS: Too many veterans are unaware of the benefits and services that are available to them. Many of those veterans have health issues and need medical care. Others may be eligible for benefits, but they don't know how to go about getting them. The sad fact is, there are millions of veterans who have little, or no, medical insurance and are paying for care that our Department of Veterans Affairs should be offering them for little or no cost. There are veterans in America today that are suffering from illnesses directly related to their service who are not aware there is help out there. Needless to say, this is a national disgrace. The VA has established a listing of "presumptive illnesses or disabilities" that provide a direct link to where and when a veteran served. The problem is getting that word out. For example, the majority of "in-country" Vietnam veterans who have survived prostate cancer, or have died, had no clue that it was related to their service. The reasons that information like this doesn't get to veterans are as varied as the cancers and other ailments that are now recognized by the VA. The bottom line is, the VA is doing a crappy job of informing veterans of their rights, even though they are required to do so by law!

Veterans dating back to World War II have been identified as being higher risk groups for all forms of leukemia (with the exception of chronic lymphocytic leukemia). Cancers of the thyroid, breast, pharynx, esophagus, stomach, small intestine, pancreas, bile ducts, gall bladder, salivary gland, urinary tract, brain, bone, lung, colon and ovaries are recognized as service-connected. Bronchioloalveola carcinoma, multiple myelomas, lymphomas, and primary liver cancer (with the exception of cirrhosis or hepatitis B is indicated) are also on the list. Veterans who served in the Southwest Asia Theater of Operations during the Gulf War have been showing signs of medically unexplained chronic multi-symptom illnesses defined by a cluster of signs or symptoms that have existed for six months or more. The signs are chronic fatigue syndrome, fibromyalgia, irritable bowel syndrome, and any undiagnosed illness that the secretary of Veterans Affairs determines warrants a presumptive of service connection. All of the mentioned have at least a 10% rating. How many veterans are aware that within one year of their release from active duty, those chronic diseases (such as arthritis, diabetes, or hypertension) can be linked to their time in the military? How many veterans know that if they spent 90 days or more active duty, and were diagnosed with amyotrophic lateral sclerosis (ALS -- Lou Gehrig's disease), they may have it because of time they spent in the military?

When I hear the old refrain from the VA that they do not have the resources to inform our veterans of these options for treatment and help, my blood boils. There is absolutely no reason that the VA can't work more closely with the traditional media such as television, radio, and newspapers to get this important information out to the vast veteran

population in our country. In this new age, all avenues should be explored to get the word out. The VA should work the Web to provide easy-access blogs that give medical updates, and a more friendly service approach than the traditional VA Web site which is like navigating through a maze. I support the good things the VA does, such as the recently implemented Veterans Suicide Hotline. For the record, that hotline was in response to the orders of the federal court to inform veterans of their options and to help them regardless of where they were in the country. Without information, veterans have no hope when they become ill and wonder where to turn. Getting information to them is a matter of life and death. Especially, if a veteran dies and his/her family are left paying crushing private medical bills that should have been handled by the VA.

Despite talk of caring for veterans, the VA is not walking the walk when it comes to informing them of their rights and medical benefits. VA clinics nationally need to step up and have handouts available (where they can be easily seen) for veterans whose lives may depend upon the knowledge in them. By not making more of an effort than it is to get this valuable information out to all veterans, the VA is failing in its mission to us. Men and women who have served their country honorably are now being dishonored by this lack of attention to something so vital. The theme of the 75th anniversary of the VA was to outreach to every living veteran to inform them of what services were available to them. Veterans are still waiting for that grand claim to come true. Let's not make them wait another 75 years before action is actually taken. For further information, contact the Greene County Veterans Service office at 937-562-6020.

GRACE AFTER FIRE: Grace After Fire is a resource solely for women veterans to support their need to connect with each other and share yet remain anonymous. These women can reach out to others who have experienced the same concerns of re-entry, alcoholism, drug addiction or prescription addiction due to chronic pain, Post Traumatic Stress Disorder (PTSD), incidents of service time rape, depression, unwarranted anger, or Traumatic Brain Injury (TBI) due to war time trauma. Grace After Fire was created by women for women veterans returning home from service. It will be available in JAN 09. For more information, contact 1-877-490-5797 or visit their web site at <http://www.graceafterfire.org>. Grace After Fire is a sister-program to The Woman's Heart, whose mission is to provide innovative recovery support services and healthcare resources for all women in recovery from addiction, anywhere, anytime. For more information about The Woman's Heart, refer their web site at <http://www.thewomansheart.org/page.php?39>.

VETERAN WEB LINKS UPDATE 02: Following are web-sites that provide information on Veterans benefits and how to file/ask for them. Accordingly, there are many sites that explain how to obtain books, military/medical records, information and how to appeal a denied claim with the VA. Nearly 100% of this information is without charge and available for all veterans, the only catch is you have to ask for it. You need to know what questions to ask so the right doors open for you -- and

then be ready to have an advocate who is willing to work with and for you, stay in the process, and press for your rights and your best interests:

Appeals http://www.warms.vba.va.gov/admin21/m21_1/mr/part1/ch05.doc

Board of Veteran's Appeals <http://www.va.gov/vbs/bva/>

CARES Commission www.va.gov/vbs/bva/

Center for Minority Veterans <http://www.va.gov/centerforminorityveterans/>

Center for Women Veterans <http://www.va.gov/womenvet/>

Center for Veterans Enterprise www.vetbiz.gov/default2.htm

Changes in GW Vets healthcare

www.gulfwarvets.com/ubb/Forum1/HTML/000016.html

Classified Records - American Gulf War Veterans Association:

www.gulfwarvets.com/ubb/Forum18/HTML/000011.html

Department of Veterans Affairs Home Page www.va.gov/

Electronic Code of Federal Regulations www.gpoaccess.gov/ecfr/

Environmental Agents <http://www.va.gov/environagents/>

Geriatrics and Extended Care www.va.gov/geriatricsshg/

Guide to Gulf War Veterans' Health www.va.gov/gulfwar/docs/VHIGulfwar.pdf

Gulf War Registry

www.va.gov/vhapublications/ViewPublication.asp?pub_ID=1003

Gulf War Subject Index

www.va.gov/GulfWar/page.cfm?pg=7&template=main&letter=A

Homeless Veterans www.va.gov/homeless/

Ionizing Radiation www.va.gov/irad/

Iraqi Freedom/Enduring Freedom Veterans VBA www.vba.va.gov/EFIF/

MS (Multiple Sclerosis) Centers of Excellence www.va.gov/ms/about.asp

My Health e Vet www.myhealth.va.gov/

Project 112 (Including Project SHAD) www.va.gov/shad/

U.S. Court of Appeals for Veterans Claims www.vetapp.gov/

VA Fact Sheet www.va.gov/opa/fact/gwfs.html

VA Health Care Eligibility www.va.gov/healtheligibility/home/hecmain.asp

Veterans Legal and Benefits Information <http://valaw.org/>

VA Loan Lending Limits and Jumbo Loans

http://valoans.com/va_facts_limits.cfm

VA MS Research www.va.gov/ms/about.asp

VA National Hepatitis C Program www.hepatitis.va.gov/

VA Office of Research and Development www.va.gov/resdev/

UPCOMING EVENTS IN GREENE COUNTY:

- SPORTSMAN'S SEMINAR SERIES, Tuesday, January 6, 2009, 7:00 p.m.
- WINTER IN THE WOODS, Saturday, January 24, 2009, 10:00 a.m.
- VALENTINE'S GEOCACHE, Saturday, February 14, 2009, 10:00 a.m.
- SKUNK CABBAGE HIKE, Sunday, March 8, 2009, 2:00 p.m.
- WOODCOCK WALK, Saturday, March 14, 2009, 7:00 p.m.
- FAMILY NATURE HIKE, Sunday, March 15, 2009, 2:00 p.m.
- NATIVE WILDFLOWER GARDENS, Saturday, March 21, 2009, 10:00 a.m.
- SUNRISE IN THE WETLANDS, Sunday, March 22, 2009, 6:30 a.m.
- CYCLE OFF CALORIES, Sunday, April 19, 2009, 2:00 p.m.
- HEALTHY HIKE, Saturday, April 25, 2009, 10:00 a.m.

FOR ADDITIONAL INFORMATION ON EVENTS, PLEASE CALL GREENE COUNTY PARKS AT 937-562-7440 OR VISIT THEIR WEBSITE AT:

<http://www.co.greene.oh.us/parks>

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