

Jeffrey McAdams

18p



**Department of
Veterans Affairs**

2012 January24 Jeffery McAdams to veteran

45 January 24, 2012

**3333 N CENTRAL AVE
PHOENIX AZ 85012**

In Reply Refer To:

ANTHONY M OCONNELL
439 S VISTA DEL RIO
GREEN VALLEY AZ 85614

File Number:
25-163-990
PAYEE NO 00
A M OCONN

We have received your application for benefits. It is our sincere desire to decide your case promptly. However, as we have a great number of claims, action on yours may be delayed. We are now in the process of deciding whether additional evidence or information is needed. If we need anything else from you, we will contact you, so there is no need to contact us in the meantime. If you do write us, be sure to show YOUR file number and full name, or have it at hand if you call.

If your mailing address is different than that shown above, please advise us of your new mailing address. You should notify us immediately of any changes in your mailing address.

Enclosed is additional information about VA benefits and services. If you reside in the Continental United States, Alaska, Hawaii, Guam, the Northern Marianas, or Puerto Rico, you may contact VA with questions and receive free help by calling our toll-free number 1-800-827-1000 (for hearing impaired TDD 1-800-829-4833). From American Samoa you may dial toll free 684-699-3730. You can send us an e-mail through our web site www.va.gov by clicking "Contact Us".

Note: TDD phone number 1-800-829-4833 does not work for callers residing in Guam and the Northern Marianas.

J. MCADAMS

VETERANS SERVICE CENTER MANAGER

Enclosures: 21-0760

DEPARTMENT OF VETERANS AFFAIRS

Regional Office

P.O. Box 34790

Phoenix AZ 85067-4790



2012 January24 Jeffery McAdams to veteran, 10p

January 24, 2012

MR. ANTHONY M OCONNELL
439 S VISTA DEL RIO
GREEN VALLEY AZ 85614-2415

In reply, refer to:
345/PD2/GW
File Number: 25 163 990
Anthony M. O'Connell

IMPORTANT -- reply needed

Dear Mr. Oconnell:

We are working on your claim for:

- skin cancer
- NSC Pension

This letter tells you what we will do with your claim and what you can do to help us. Please read the enclosure to this letter entitled, "Veteran Claims Assistance Act (VCAA)." The enclosure explains how we obtain evidence related to your claim and the legal requirements for supporting your claim.

What Do We Still Need from You?

We need additional evidence from you. *Please put your VA file number on the first page of every document you send us.*

- On your application, you indicated that you received treatment from UVA Hospital.

Complete and return an enclosed VA Form 21-4142, Authorization and Consent to Release Information, for each health care provider so that we can obtain treatment information. You may want to obtain and send us the information yourself.

- We need evidence showing that the following condition(s) existed from military service to the present time:

skin cancer

- Send any treatment records pertinent to your claimed condition(s), especially those which are recent (within the last 12 months). This includes reports or statements from doctors, hospitals, laboratories, medical facilities, mental health clinics, x-rays, physical therapy records, surgical reports, etc. These should include the dates of treatment, findings, and diagnoses.

File Number: 25 163 990

Anthony M. Oconnell

- We are requesting your service treatment records from the service department. You do not need to contact the service department yourself. If you have your service treatment records already in your possession, please submit them. Original records are preferable to copies.
- Additional information concerning your expenses is needed. Please fill out Sections I through V of the enclosed VA Form 21-8049, Request for Details of Expenses, and return the form to the address at the top of this letter.
- You reported that you paid some medical expenses during the past year. These medical expenses could increase the amount of your VA check. However, more information is needed before we are able to adjust your award.
Please complete and return the enclosed VA Form 21-8416, Medical Expense Report. You should check to be sure you include all your past year's medical expenses.
- In support of your claim for pension, we need (1) evidence showing that you have qualifying active duty service (at least 90 days of active duty, one of which was during a period of war), (2) evidence showing you have qualifying income and net worth, and (3) medical evidence showing that you are unable to work because of your disabilities.
- Please provide medical evidence of your permanent inability to obtain or maintain substantially gainful employment due to disability.
- If you served aboard a US Navy or Coast Guard ship on the offshore "blue waters" of Vietnam, VA will presume Agent Orange exposure if your service included duty or visitation within the country of Vietnam itself, or on its inland waterways, between January 9, 1962, and May 7, 1975. We need evidence that your ship entered Vietnam's inland waterways while you were aboard or that you went ashore while the ship was docked or at anchorage. Please provide us with the name of your ship and the approximate dates, to the best of your recollection, when your ship entered the inland waterways, docked, or otherwise sent you ashore. If your ship docked, you must state whether or not you went ashore. If you went ashore from a ship at anchorage, you must explain the circumstances. Agent Orange exposure will not be presumed if your ship just anchored temporarily in an open deep-water harbor such as Da Nang, Cam Ranh Bay, or Vung Tau, and you remained on the ship.

Some Veterans served on smaller, shallow draft vessels operating primarily on the inland waterways or "brown waters" of Vietnam's rivers, canals, estuaries, and delta areas, where herbicide exposure is presumed to have occurred. Please tell us if you are one of these Veterans and provide the name of your vessel and dates of service in Vietnam.

File Number: 25 163 990
Anthony M. Oconnell

- In order for VA to acknowledge that you were exposed to Agent Orange, please send evidence that: (1) you physically served within or visited the country of Vietnam, or its inland waterways, between January 9, 1962 and May 7, 1975. If you were stationed aboard a ship, we need the ship's name and evidence that it entered Vietnam's inland waterways or that you went ashore; (2) you served in a unit stationed along the Korean demilitarized zone between April 1, 1968 and August 31, 1971; or (3) you were exposed to Agent Orange in some other manner, with an explanation of when, where, and how you were exposed. You may include statements of persons who know of your exposure. Any person making a statement should provide as much description of the exposure as possible, and include his or her name, service number (or social security number), unit assignment, and dates of service.
- Send us medical evidence that shows the diagnosis and earliest symptoms for each disability below that resulted from your exposure to herbicides (Agent Orange):

skin cancer

If you are claiming a skin condition, we need medical evidence that shows your skin condition was present during the first year after your last service in Vietnam.

- If you have had a herbicide examination or have been treated for herbicide exposure at a VA health-care facility, send us a copy of the medical report with exposure history. If you do not have a copy, tell us the name of the VA facility serving you and the date of VA examination or treatment so we can obtain a copy for you.
- Send us any treatment records related to your claimed condition(s). This includes reports or statements from doctors, hospitals, laboratories, medical facilities, mental health clinics, x-rays, physical therapy records, surgical reports, etc. These should include the dates of treatment, findings, and diagnoses. If you want us to try to obtain any doctor, hospital or medical reports on your behalf, please complete and return the attached *VA Form 21-4142, Authorization and Consent to Release Information*.
- If you have received treatment at a Department of Veterans Affairs (VA) facility or treatment authorized by VA, please tell us the dates and places of treatment. We will then get the necessary records if you give us enough information to locate them.
- You may also send us your own statement, or statements from people who have witnessed how your claimed disabilities affect you. All statements submitted on your behalf should conclude with the following certification: "I hereby certify that the information I have given is true to the best of my knowledge and belief."
- **We have enclosed a "VCAA Notice Response." We encourage you to return this document, as it may expedite a decision on your claim.**

File Number: 25 163 990
Anthony M. Oconnell

Where Should You Send What We Need?

Please send what we need to this address:

Department of Veterans Affairs
Regional Office
P.O. Box 34790
Phoenix AZ 85067-4790

How Soon Should You Send What We Need?

We strongly encourage you to send any information or evidence as soon as you can. If we do not hear from you, we may make a decision on your claim after 30 days. However, you have up to one year from the date of this letter to submit the information and evidence necessary to support your claim. If we decide your claim before one year from the date of this letter, you will still have the remainder of the one-year period to submit additional information or evidence necessary to support your claim.

What Have We Received?

- Your claim for benefits, which we received on January 20, 2012.

What Have We Done?

- Requested service treatment records.
- Requested dates of service in the country of Vietnam.

Important Information

VA provides free examinations for veterans who may have been exposed to herbicides (Agent Orange) while in Vietnam.

If you have not had a herbicide examination, you should contact the nearest VA health-care facility for more information.

If you have had a herbicide examination or have been treated for herbicide exposure at a VA health-care facility, send us a copy of the medical report with exposure history. If you do not have a copy, tell us the name of the VA facility serving you and the date of VA examination or treatment so we can obtain a copy for you.

How Can You Contact Us?

If you are looking for general information about benefits and eligibility, you should visit our web site at <http://www.va.gov>. Otherwise, you can contact us in several ways. Please give us your VA file number, **25 163 990**, when you do contact us.

Page 5

File Number: 25 163 990
Anthony M. Oconnell

- Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the number is 1-800-829-4833.
- Send us an inquiry using the Internet at <https://iris.va.gov>.
- Write to us at the address at the top of this letter.

We look forward to resolving your claim in a fair and timely manner.

Sincerely yours,

Jeffrey McAdams

Jeffrey McAdams
Veterans Service Center Manager

Enclosures: VA Form 21-8049
VA Form 21-8416
VA Form 21-4142 (3)
VA Form 21-4138
Veterans Claims Assistance Act (VCAA)
What the Evidence Must Show - NSC Live Pension
What the Evidence Must Show - Service connected comp
VA Form 21-527
VCAA Notice Response

cc: ARIZONA DEPARTMENT OF VETERANS' SERVICES

File Number: 25 163 990

Anthony M. Oconnell

Veterans Claims Assistance Act (VCAA)

What the Evidence Must Show for Nonservice-Connected Pension Benefits

To support your claim for nonservice-connected pension, the evidence must show:

1. You met certain minimum requirements regarding active military service during a period of war. Generally, those requirements involve:

- 90 days of consecutive service, at least one day of which was during a period of war; **OR**
- 90 days of combined service during at least one period of war;

(Note: If your service began after September 7, 1980, additional length-of-service requirements may apply, typically requiring two years of continuous service or completion of active-duty obligation.)

- **OR** any length of active military service with a discharge due to a service-connected disability.

2. You are age 65 or older or are permanently and totally disabled. You are considered permanently and totally disabled if medical evidence shows you are:

- A patient in a nursing home for long-term care; **OR**
- Receiving Social Security disability benefits; **OR**
- Unemployable due to a disability reasonably certain to continue throughout your lifetime; **OR**
- Suffering from a permanent disability that would make it impossible for an average person to follow a substantially gainful occupation; **OR**
- Suffering from a disease or disorder that VA determines causes persons who have that disease or disorder to be permanently and totally disabled.

3. Your net worth and income do not exceed certain requirements.

File Number: 25 163 990
Anthony M. Oconnell

What the Evidence Must Show for Service Connection

To support your claim for service-connection, the evidence must show:

1. You had an injury in military service, or a disease that began in or was made permanently worse during military service, or there was an event in service that caused an injury or disease; **AND**
2. You have a current physical or mental disability. This may be shown by medical evidence or by lay evidence of persistent and recurrent symptoms of disability that are visible or observable; **AND**
3. A relationship exists between your current disability and an injury, disease, or event in military service. Medical records or medical opinions are generally required to establish this relationship. However, under certain circumstances, VA may presume that certain current disabilities were caused by service, even if there is no specific evidence proving this in your particular claim. The cause of a disability is presumed for the following veterans who have certain diseases:
 - Former prisoners of war;
 - Veterans who have certain chronic or tropical diseases that become evident within a specific period of time after discharge from service;
 - Veterans who were exposed to ionizing radiation, mustard gas, or Lewisite while in service;
 - Veterans who were exposed to certain herbicides, such as by serving in Vietnam; or
 - Veterans who served in the Southwest Asia theater of operations during the Gulf War.

VA is Responsible for Getting the Following Evidence:

- Relevant records that you adequately identify and authorize VA to obtain from any Federal agency. These may include records from the military, VA medical centers (including private facilities where VA authorized treatment), or the Social Security Administration.
- VA will provide a medical examination for you, or get a medical opinion, if we determine it is necessary to decide your compensation claim.

On Your Behalf, VA Will Make Reasonable Efforts to Get the Following Evidence:

Relevant records not held by a Federal agency that you adequately identify and authorize VA to obtain. These may include records from State or local governments, private doctors and hospitals, or current or former employers.

File Number: 25 163 990
Anthony M. Oconnell

How Can You Help: If you have any information or evidence that you have not previously told us about or given to us, please tell us or give us that evidence now. If the evidence is not in your possession, you must give us enough information about the evidence so that we can request it from the person or agency that has it. If the holder of the evidence declines to give it to us, asks for a fee to provide it, or VA otherwise cannot get the evidence, we will notify you. *It is your responsibility to make sure we receive all requested records that are not in the possession of a Federal department or agency.*

How VA Determines the Disability Rating: When we find disabilities to be service connected, we assign a disability rating. That rating can be changed if there are changes in your condition. Depending on the disability involved, we will assign a rating from 0 percent to as much as 100 percent. VA uses a schedule for evaluating disabilities that is published as title 38, Code of Federal Regulations, Part 4. In rare cases, we can assign a disability level other than the levels found in the schedule for a specific condition if your impairment is not adequately covered by the schedule.

Higher levels of nonservice-connected pension may be assigned for disabilities that affect your ability to perform certain activities of daily living or the ability to leave your home.

We consider evidence of the following in determining the disability rating:

- Nature and symptoms of the condition;
- Severity and duration of the symptoms; and
- Impact of the condition and symptoms on employment.

File Number: 25 163 990
Anthony M. Oconnell

Examples of evidence that you should tell us about or give to us that may affect how we assign a disability evaluation include the following:

- Information about on-going treatment records, including VA or other Federal treatment records, you have not previously told us about;
- Recent Social Security determinations;
- Statements from employers as to job performance, lost time, or other information regarding how your condition(s) affect your ability to work; or
- Statements discussing your disability symptoms from people who have witnessed how they affect you.

How VA Determines the Effective Date: If we grant your claim, the beginning date of your entitlement or increased entitlement to benefits will generally be based on the following factors:

- When we received your claim; or
- When the evidence shows a level of disability that supports a certain rating under the rating schedule; or
- When medical evidence first shows entitlement to a higher level of pension.

If VA received your claim within one year of your separation from the military, entitlement will be from the day following the date of your separation.

Examples of evidence that are relevant to determining the effective date of any benefits we award include the following:

- Information about continuous treatment or when treatment began;
- Service treatment records in your possession that you may not have sent us; or
- Reports of treatment for your condition while attending training in the Guard or Reserve.

File Number: 25 163 990
Anthony M. Oconnell

VCAA NOTICE RESPONSE

Date of Claim: January 20, 2012

We provided a notice to you about the evidence and information VA needs to support your claim for benefits. At this time, you may choose to indicate whether you intend to submit additional information or evidence that would help support your claim.

Your signed response will let us know whether to decide your claim without waiting 30 days, or whether we should give you the full 30 days from the date of the letter sent with this notice response before deciding your claim.

Your signature on this response will not affect:

- Whether or not you are entitled to VA benefits;
- The amount of benefits to which you may be entitled;
- The assistance VA will provide you in obtaining evidence to support your claim; or
- The date any benefits will begin if your claim is granted.

RESPONSE

I elect *one* of the following: (Whichever box you check, you have one year from the date of the notice to give VA any other information or evidence you think will support your claim.)

I have enclosed all the remaining information or evidence that will support my claim, or I have no other information or evidence to give VA to support my claim. Please decide my claim as soon as possible.

I will send more information or evidence to VA to support my claim. VA will wait the full 30 days from the date of the letter sent with this notice response before deciding my claim.

Claimant/Representative Signature

Date

**3333 N CENTRAL AVE
PHOENIX AZ 85012**

In Reply Refer To:

March20 (regular mail) Jeffrey McAdams to Veteran

ANTHONY M OCONNELL
439 S VISTA DEL RIO
GREEN VALLEY AZ 85614

File Number:
25 - 163 - 990
PAYEE NO 00
A M OCONN



We are still processing your application for COMPENSATION. We apologize for the delay. You will be notified upon completion of processing. If you need to contact us, be sure to show the file number and full name of the veteran.

If your mailing address is different than that shown above, please advise us of your new mailing address. You should notify us immediately of any changes in your mailing address.

If you reside in the Continental United States, Alaska, Hawaii, Guam, the Northern Marianas, or Puerto Rico, you may contact VA with questions and receive free help by calling our toll-free number 1-800-827-1000 (for hearing impaired TDD 1-800-829-4833). From American Samoa you may dial toll free 684-699-3730.

Note: TDD phone number 1-800-829-4833 does not work for callers residing in Guam and the Northern Marianas.

J. MCADAMS

VETERANS SERVICE CENTER MANAGER

DEPARTMENT OF VETERANS AFFAIRS

Regional Office
P.O. Box 34790
Phoenix AZ 85067-4790



May10 (regular mail, mailed May11) Jeffery McAdams to Veteran

May 10, 2012

ANTHONY M OCONNELL
439 S VISTA DEL RIO
GREEN VALLEY AZ 85614-2415

In reply, refer to:
345/PD2/TAS
File Number: 25 163 990
Anthony M. Oconnell

IMPORTANT -- reply needed

Dear Mr. Oconnell:

Important Information

We have received your typed statement on February 7, 2012 stating that you wish to withdraw your claim for:

- **Skin cancer**

We have withdrawn your pending claim at this time. No further action will be taken on your claim.

If you decide to reopen your claim, just state so on the enclosed VA Form 21-4138. If we do not receive this form in the Department of Veterans Affairs within one year from the date of this letter, benefits, if entitlement is established, may not be paid prior to the date of its receipt.

The Pension Management Center will address your claim for Non-Service Connected Pension.

How Can You Contact Us?

If you are looking for general information about benefits and eligibility, you should visit our web site at <http://www.va.gov>. Otherwise, you can contact us in several ways. Please give us your VA file number, **25 163 990**, when you do contact us.

- Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the number is 1-800-829-4833.
- Send us an inquiry using the Internet at <https://iris.va.gov>.
- Write to us at the address at the top of this letter.

Page 2

File Number: 25 163 990
Anthony M. Oconnell

We look forward to resolving your claim in a fair and timely manner.

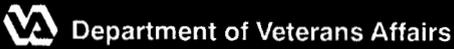
Sincerely yours,

Jeffrey McAdams

Jeffrey McAdams
Veterans Service Center Manager

Enclosures: VA Form 21-4138

cc: ARIZONA DEPARTMENT OF VETERANS' SERVICES



STATEMENT IN SUPPORT OF CLAIM

PRIVACY ACT INFORMATION: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA Programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. VA uses your SSN to identify your claim file. Providing your SSN will help ensure that your records are properly associated with your claim file. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine maximum benefits under the law. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: We need this information to obtain evidence in support of your claim for benefits (38 U.S.C. 501(a) and (b)). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

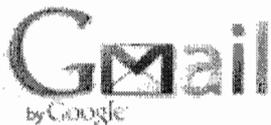
FIRST NAME - MIDDLE NAME - LAST NAME OF VETERAN (<i>Type or print</i>) Anthony M Oconnell	SOCIAL SECURITY NO.	VA FILE NO. C/CSS - 25 163 990
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The following statement is made in connection with a claim for benefits in the case of the above-named veteran:

VA Form 21-4138 "Statement in support of claim"

I CERTIFY THAT the statements on this form are true and correct to the best of my knowledge and belief.		
SIGNATURE	DATE SIGNED	
ADDRESS	TELEPHONE NUMBERS (<i>Include Area Code</i>)	
	DAYTIME	EVENING

PENALTY: The law provides severe penalties which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact, knowing it to be false.



Anthony OConnell <anthonymineroconnell@gmail.com>

Application of January 24, 2012, for economic pension

2 images

Anthony OConnell <anthonymineroconnell@gmail.com>
To: Jeffrey McAdams <jeffrey.mcadams@va.gov>
Bcc: Anthony OConnell <anthonymineroconnell@gmail.com>

Wed, May 16, 2012 at 6:13 AM

Jeffrey Mcadams
Veterans Service Center Manager
Department of Veterans Affairs
Regional Office
3333 North Central Avenue
Phoenix, Arizona 85012

Dear Mr. McAdams,

This is not a complaint but a request for information.

I received your letter of May 10, 2012, with it's enclosure VA Form 21- 4138, but I don't understand it. Perhaps there is a misunderstanding; perhaps the information you have in your file is different from the information I have. Would you please send me copies of what you have in your file, and any other information you have concerning this?

Thank you.

Anthony O'Connell 7637
439 South Vista Del Rio
Green Valley, Arizona 85614
anthonymineroconnell@gmail.com
(No telephone)

345 PD2/GW
VA File number 25 163 990

McAdams, Jeffrey I., VBAPHNX <Jeffrey.McAdams@va.gov>
To: Anthony OConnell <anthonymineroconnell@gmail.com>
Cc: "RAMSEY, CHRISTINA, VBAPHNX" <christina.ramsey1@va.gov>

Sun, Jun 10, 2012 at 9:48 PM

Mr. O'Connell,

June10 (9:48pm) Jeffrey McAdams to Veteran

I don't know if you forwarded your request to anybody else, but I will be out of the office for one more week.

Please let Ms. Ramsey know.

Thank you,

Jeff

From: Anthony OConnell [mailto:anthonymineroconnell@gmail.com]
Sent: Wednesday, May 16, 2012 6:13 AM
To: McAdams, Jeffrey I., VBAPHNX
Subject: Application of January 24, 2012, for economic pension

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