

No. 19-2211

**In the United States Court of Appeals
for the Federal Circuit**

BRUCE R. TAYLOR, CLAIMANT-APPELLANT,

v.

DENIS MCDONOUGH, SECRETARY OF VETERANS AFFAIRS,
RESPONDENT-APPELLEE.

*Appeal from the United States Court of Appeals for Veterans Claims in
Vet. App. No. 17-2390, Judge William S. Greenberg, Judge Amanda L. Mer-
edith, and Judge Joseph L. Falvey, Jr.*

SUPPLEMENTAL BRIEF OF CLAIMANT-APPELLANT

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INTRODUCTION

As the Supreme Court emphasized in *Arellano*, “[t]he United States offers benefits to any veteran who suffers a service-connected disability.” *Arellano v. McDonough*, 143 S. Ct. 543, 546 (2023) (citing 38 U.S.C. §§ 1110, 1131). Mr. Taylor and his fellow Edgewood survivors deserve better than the myriad thinly-reasoned roadblocks the government has thrown in the way of that mandate, including the government’s present effort to contort *Arellano* into a further reason to deny Mr. Taylor what he has long been due. *Arellano* does not support the government’s case. It supports Mr. Taylor’s.

ARGUMENT

I. *Arellano* Further Supports Estopping the Government.

The government is wrong that *Arellano* provides it yet another reason to deny Mr. Taylor relief. *See* Notice (Feb. 17, 2023), ECF No. 93. To the contrary, it all but disposes of the Secretary’s principal argument on estoppel—namely, that *Office of Personnel Management v. Richmond*, 496 U.S. 414, 432 (1990), precludes this Court from estopping the government when public monies are at stake.

Joined by veterans’ groups and another Edgewood veteran, Mr. Taylor filed an amicus brief with the Supreme Court in *Arellano*, in which he argued

in favor of equitable tolling, and also noted that this Court had before it both the constitutional right of access to the courts and equitable estoppel issues that remain pending. Brief of Edgewood Veterans et al. as Amici Curiae Supporting Pet'r 11, *Arellano v. McDonough*, No. 21-432 (U.S. May 20, 2022). With that brief before it, Edgewood veterans were discussed during the *Arellano* oral argument. See Tr. Oral Arg. 28:18–30:23, *Arellano v. McDonough*, No. 21-432 (U.S. Oct. 4, 2022). Thus, with Edgewood veterans like Mr. Taylor fresh in the Court's conscience, it expressly left open "the applicability of other equitable doctrines, such as waiver, forfeiture, and estoppel." *Arellano v. McDonough*, 143 S. Ct. 543, 552 n.3 (2023).

This is significant, because the government had argued in *Arellano*, as it does here, that *Richmond* prohibited any effort to "displace substantive statutory limitations on the amount of benefits to which veterans are entitled." See Resp't's Br. 36–37, *Arellano v. McDonough*, No. 21-432 (U.S. July 18, 2022). Thus, in clarifying that equitable estoppel remains open after its ruling in *Arellano*, the Court had before it the same precedent the government uses here to argue against equitable estoppel.

It is not hard to discern why the Supreme Court left open other equitable doctrines even as it closed the door on equitable tolling: Doctrines like

estoppel bar litigants from taking advantage of time limits like those found in § 5110(b)(1) when a litigant “takes active steps to prevent the plaintiff from suing in time”—just as the government did to Mr. Taylor for decades. *See, e.g., Cada v. Baxter Healthcare Corp.*, 920 F.2d 446, 450 (7th Cir. 1990). That contrasts with equitable tolling, which affords litigants extra time to file suit even if their adversary played no part in the failure to timely file. *See id.* at 451; *see also Klehr v. A.O. Smith Corp.*, 521 U.S. 179, 192 (1997).

As it considered equitable tolling, the Supreme Court also emphasized the importance of Congress’s choice to design § 5110(b)(1) as it did. *Arellano*, 143 S. Ct. at 550. Allowing a veteran equitable tolling, the Supreme Court explained, would “disrupt” that design. *Id.* at 551. But because equitable estoppel focuses not on the litigant but rather on the wrongful acts of the government, the converse is true here: By barring the Executive Branch from using threats of criminal prosecution to disrupt Congress’s carefully designed veterans’ benefits scheme, equitable estoppel prevents the *Executive Branch* from disrupting Congress’s design, thereby vindicating the principle that the Supreme Court enunciated in *Arellano*.

In short, far from providing “a basis for this Court to affirm,” as the government asserts, *Arellano* in fact supports Mr. Taylor’s position.¹ This Court should reverse.

II. The Government Radically Undermined and Violated Congress’s Mandates.

More is at stake in this case than just the design of Section 5110. Allowing the government to use threats of criminal prosecution as they did against Edgewood veterans like Mr. Taylor would thwart Congress’s entire statutory scheme for veterans’ benefits, from the very outset of that process.

Shortly before Mr. Taylor left active service, Congress “charg[ed] the Veterans’ Administration with the affirmative duty of seeking out eligible veterans” and providing them with congressionally appropriated benefits and services. 38 U.S.C. § 240 (1970). This statutory duty included that the agency “shall provide” outreach services advising each veteran at discharge about available benefits and services and aiding and assisting the presentation of the

¹ The Supreme Court did not address constitutional right of access at all, leaving that additional basis for relief untouched. Mr. Taylor stands on his en banc opening and reply briefs on this doctrine. Appellant’s En Banc Br. 49–65, ECF No. 41; En Banc Reply Br. 18–32, ECF No. 80.

veteran's claim. 38 U.S.C. § 241(1)–(3) (1970), *recodified as amended at* 38 U.S.C. § 6303 (2021).²

To be sure, “the manner in which those services are to be provided has been left to the discretion of the agency,” *Younger v. Turnage*, 677 F. Supp. 16, 22 (D.D.C. 1988), and Mr. Taylor is not asking this Court or any other to impose its own view on precisely how the agency does so. *See Rodriguez v. West*, 189 F.3d 1351, 1355 (Fed. Cir. 1999). There is no dispute that the VA's ordinary negligence in failing to provide a form or reach an individual veteran with notice of the availability of benefits as provided in § 241 and its successor statutes does not extend the effective-date provision of 38 U.S.C. § 5110(b)(1). *Andrews v. Principi*, 351 F.3d 1134, 1137 (Fed. Cir. 2003); *Rodriguez*, 189 F.3d at 1355.

But Mr. Taylor suffered the effects of far more than ordinary negligence. In 1969, Mr. Taylor swore under penalty of criminal prosecution to “not divulge or make available *any information* related to U.S. Army Intelligence Center interest *or participation in* the . . . Army Medical Research Volunteer Program to any individual, nation, organization, business, association, or other

² Exhibit A contains the text of 38 U.S.C. §§ 240 and 241 (1970), which were the versions of the statute in effect at the time of Mr. Taylor's discharge.

group or entity, not officially authorized to receive such information.” Appellant’s En Banc Br. 8–9, ECF No. 41 (emphases added) (quoting S. Rep. No. 94-755, at 418 (1976)). Mr. Taylor did not apply for veterans benefits as a consequence of this oath. Appx077.

In the years that followed, the government was fully aware of the plight of veterans from Edgewood and similar programs but took no action to remedy the situation. For example, in 1979, the General Counsel for the Army acknowledged “the legal necessity for a notification program” for Edgewood participants still suffering from their experiences. *Viet. Veterans of Am. v. CIA*, No. C 09–0037 CW, 2013 WL 6092031, at *3 (N.D. Cal. Nov. 19, 2013) (citation omitted) (subsequent history omitted). Through the 1980s, the Army developed multiple recordkeeping systems so that the Army could “contact individuals who participated in research . . . in order to provide them with newly acquired information, which may have an impact on their health.” *Id.* at 4 (citation omitted). This continued into the 1990s, when “several reviews of military human subject research programs . . . noted the common practice of research volunteers signing ‘secrecy oaths’ to preclude disclosure of research information,” which “reportedly inhibited veterans from discussing

health concerns with their doctors or seeking compensation from the Department of Veterans Affairs for potential service-related disabilities.” *Id.* at *6 (citation omitted) (quoting 2011 Department of Defense memorandum). Yet, even as the government acknowledged its own malfeasance for decades, it took until 2006 for it to partially relieve Edgewood veterans like Mr. Taylor from criminal jeopardy by finally allowing them to provide to the VA the minimum details required to seek health care and apply for benefits, to include the very existence of the Edgewood program. Appellant’s En Banc Br. 15 n.5 (quoting Appx032).

These actions unmistakably violate Congress’s instructions in sections 240 and 241, a point Mr. Taylor made to the Veterans Court more than a decade ago. *See* Appx112, Appellant’s Br., U.S. Court of Appeals for Veterans Claims (2012) (“This entire ‘process’ of forced silence and failure to release records . . . was allowed by the VA who is the sole provider of the [Disability Compensation Benefits] program.”). Thus, Mr. Taylor does not ask the Court to redesign the agency’s discretionary program: It asks the Court to prevent the government from doing the *exact opposite* of what Congress mandated in those statutes. *See Kelly v. United States*, 826 F.2d 1049, 1052 (Fed. Cir. 1987); *see also* Appellant’s En Banc Br. 20–49 (citing additional cases).

Conversely, the government's arguments would stand *Richmond*—a separation of powers case—“on its head” by allowing the government to take advantage of its brazen encroachment on Congress's powers to design the veterans' benefits system. *Brush v. Off. of Pers. Mgmt.*, 982 F.2d 1554, 1563–64 (Fed. Cir. 1992). As explained in Mr. Taylor's en banc brief, “when the executive misuses its power to thwart Congress's clear dictates, the injury to separation of powers is different not only in degree, but in kind to that which occurred in *Richmond*.” Appellant's En Banc Br. 36; *see also* En Banc Reply 13–16. Simply put, *Richmond* is not a sword that can be used “when an agency fails to carry out a statutory duty at a detriment to the other party and a benefit to itself.” *Brush*, 982 F.2d at 1563–64; *see also* *Dachniwskyj v. Off. of Pers. Mgmt.*, 713 F.3d 99, 102 (Fed. Cir. 2013).

The first concurrence with the Court's March 1, 2023 Order suggests that cases like *Rodriguez* and *Andrews* may be “in tension” with cases like *Brush*. Concurrence to Order (Dyk, J.) 5–6 (Mar. 1, 2023), ECF No. 95. However, the Court need not address this potential tension as to veterans' benefits as a whole, as *Brush*, *Rodriguez*, *Andrews*, and *Arellano* all fit comfortably with the unique facts of this case. That is, whatever the government's affirmative duties may be to veterans in the ordinary course under §§ 240 and 241

and their successor statutes—a question not before this Court—it is clear that these and other statutes and regulations do impose upon the government an affirmative duty not to punish veterans for failing to follow an undisclosed, unwritten “minimal claims” procedure the government has suggested existed in 1971. Gov’t En Banc Br. 48–49, ECF No. 74.

Of course, when pressed by the Court to produce any evidence that this “minimal claim” procedure was recorded in VA publications or manuals before 2006, the government came up empty. Gov’t Letter, ECF No. 90 (“VA has undertaken this search and has been unable to locate any manual or other publication that addresses” a pre-2006 “policy that was clarified in 38 C.F.R. § 3.156(c) (2006)”); *see also* En Banc Oral Arg. 1:2:24–1:3:9. But even taking the government at its word that such a procedure was available, it failed to meet its obligation to make this procedure known to veterans like Mr. Taylor.

The government effectively concedes this point, explaining that it did not “communicat[e] to Mr. Taylor that he could file a minimal claim” because to contact him “would have required DOD to provide his name . . . to VA while the program was classified.” Gov’t En Banc Br. 10; *see id.* at 53–54. The government’s silence plainly did not comply with its “affirmative duty of seeking out eligible veterans . . . and providing them with” benefits, 28 U.S.C. § 240

(1970), and of “advis[ing] each veteran . . . of all benefits . . . for which the veteran may be eligible,” *id.* § 241(1).

In fact, the government went beyond mere silence. In addition to the strictures imposed by the secrecy oath, the VA’s forms at the time of Mr. Taylor’s discharge further communicated that a minimal claim was *not* then available. In order to file a claim for benefits, Mr. Taylor would have had to disclose the very facts as to which the government swore him to secrecy. Ex. B (VA Form 21-528 (1971)) §§ 23, 25A–D, 27A–D. In fact, the 1971 VA Form 21-528 required applicants to “certify” that all “statements are true *and complete* to the best of [the applicant’s] knowledge and belief,” subject to “severe penalties which include fine or imprisonment, or both.” Ex. B at 6 (emphasis added). Thus, rather than suggesting that a “minimal claim” in 1971 was available, the government effectively told him the opposite.

Without the light of judicial scrutiny shining upon it, the government has repeatedly acknowledged that, until 2006, secrecy oaths blocked veterans like Mr. Taylor from accessing health care and benefits to which the law entitled them. *See, e.g., Viet. Veterans of Am.*, 2013 WL 6092031, at *6 (2011 Department of Defense memorandum discussing 1990s reviews of military human

subject research programs). It is undisputed that the Veterans Benefits Administration's June 30, 2006 letter was the first notification letter that informed Edgewood "veterans of benefits to which they may be entitled." Appx034.

This merits estoppel. The government has long understood that secrecy oaths instruct veterans that they may *not* file claims for benefits related to classified programs, and the government admittedly lifted this barrier in 2006 for the first time. Hence, the government violated even the minimum statutory duties in 38 U.S.C. §§ 240 and 241 because it swore veterans like Mr. Taylor to oaths of secrecy that barred them from applying for benefits and failed to inform any of them that they could file a minimal claim.

As this Court has held, "There is no indication that the holding in *Richmond* was meant to apply when an agency fails to carry out a statutory duty at a detriment to the other party and a benefit to itself." *Brush*, 982 F.2d at 1564. The government should be estopped from denying benefits to Mr. Taylor during the period in which it instructed Mr. Taylor that he was not permitted to access veterans benefits and simultaneously enforced his silence.

CONCLUSION

More than 50 years have passed since Mr. Taylor's honorable discharge from the Army. Sixteen of those years have been spent litigating this case. Mr. Taylor is now 72 years old. He has battled cancer three times, including his current battle with service-connected liver and lung cancers. Whether viewed through the lens of equitable estoppel or as a violation of Mr. Taylor's constitutional right of access, or both, the government's conduct was active, knowing, and wrong. As Mr. Taylor outlined during oral argument and in his en banc briefing, and as further elaborated here, this case should be resolved without delay in Mr. Taylor's favor.

Dated: March 15, 2023

Respectfully submitted,

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CERTIFICATE OF SERVICE

I, Liam J. Montgomery, counsel for Appellant and a member of the Bar of this Court, certify that, on March 15, 2023, a copy of the attached Supplemental Brief of Claimant–Appellant was filed with the Clerk and served on the parties through the Court’s electronic filing system.

MARCH 15, 2023

/s/ *Liam J. Montgomery*

LIAM J. MONTGOMERY

Exhibit A
38 U.S.C. §§ 240, 241 (1970)

§ 233. Employees' apparel; school transportation; recreational equipment; visual exhibits; personal property; emergency transportation of employees.

(a) The Administrator, subject to such limitations as he may prescribe, may—

(1) furnish and launder such wearing apparel as may be prescribed for employees in the performance of their official duties;

(2) transport children of Veterans' Administration employees located at isolated stations to and from school in available Government-owned automotive equipment;

(3) provide recreational facilities, supplies, and equipment for the use of patients in hospitals, and employees in isolated installations;

(4) provide for the preparation, shipment, installation, and display of exhibits, photographic displays, moving pictures and other visual educational information and descriptive material; and

(5) reimburse employees for the cost of repairing or replacing their personal property damaged or destroyed by patients or domiciliary members while such employees are engaged in the performance of their official duties.

For the purposes of subparagraph (4), the Administrator may purchase or rent equipment.

(b) The Administrator, when he determines that an emergency situation exists and that such action is necessary for the effective conduct of the affairs of the Veterans' Administration, may utilize Government-owned, or leased, vehicles to transport employees to and from their place of employment and the nearest adequate public transportation, or, if such public transportation is either unavailable or not feasible to use, to and from their place of employment and their home. The Administrator shall establish reasonable rates to cover the cost of the service rendered, and all proceeds collected therefrom shall be applied to the applicable appropriation. (Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1116; Pub. L. 87-574, § 1(1), Aug. 6, 1962, 76 Stat. 308; Pub. L. 89-785, title III, § 303(a), (b), Nov. 7, 1966, 80 Stat. 1376, 1377.)

AMENDMENTS

1966—Pub. L. 89-785 inserted "; emergency transportation of employees" in the catchline, designated existing provisions of section as subsec. (a), and added subsec. (b).

1962—Pub. L. 87-574 inserted "; personal property" in section catchline, and added subpar. (5).

§ 234. Telephone service for medical officers.

The Administrator may pay for official telephone service and rental in the field whenever incurred in case of official telephones for medical officers of the Veterans' Administration where such telephones are installed in private residences or private apartments or quarters, when authorized under regulations established by the Administrator. (Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1117.)

§ 235. Benefits to employees at overseas offices who are United States citizens.

The Administrator may, under such rules and regulations as may be prescribed by the President or his designee, provide to personnel of the Veterans' Administration who are United States citizens and are assigned by the Administrator to the Vet-

erans' Administration offices in the Republic of the Philippines or to the Veterans' Administration office in Europe, established pursuant to section 230(c) of this title, allowances and benefits similar to those provided by the following provisions of law:

(1) Section 1131 of title 22 (relating to allowances to provide for the proper representation of the United States).

(2) Section 1136 (1), (2), (3), (4), (5), and (7) of title 22 (relating to travel expenses).

(3) Section 1138 of title 22 (relating to transportation of automobiles).

(4) Section 1148 of title 22 (relating to the return of personnel to the United States on leave of absence).

(5) Section 1156 of title 22 (relating to payments by the United States of expenses for treating illness or injury of officers or employees and dependents requiring hospitalization).

The foregoing authority supplements, but is not in lieu of, other allowances and benefits for overseas employees of the Veterans' Administration provided by titles 5 and 22. (Added Pub. L. 86-116, § 1, July 28, 1959, 73 Stat. 265, and amended Pub. L. 87-815, § 6, Oct. 15, 1962, 76 Stat. 927; Pub. L. 89-300, § 1(c), Oct. 28, 1965, 79 Stat. 1110.)

AMENDMENTS

1965—Pub. L. 89-300 redesignated former subsec. (a) as entire section, deleted obsolete references to repealed or superseded sections of the Foreign Service Act of 1946, restated the current applicable references in terms of United States Code citations, added the sentence providing that the foregoing authority supplements, but is not in lieu of, other allowances and benefits for overseas employees of the Veterans' Administration provided by Titles 5 and 22, and omitted former subsec. (b) which permitted overseas employees of the Veterans' Administration to be granted leaves of absence in the United States similar to that provided by section 203(f) of the Annual and Sick Leave Act of 1951.

1962—Pub. L. 87-815 inserted "or to the Veterans' Administration office established in Europe pursuant to section 230(c) of this title" in two places, and substituted "at overseas offices" for "in the Republic of the Philippines" in the section catchline.

SAVINGS CLAUSE

Section 1(d) of Pub. L. 89-300 provided that: "All delegations of authority, orders, regulations, directives, or other official actions, with respect to the benefits and allowances provided by such section 235 of title 38, United States Code, shall continue in full force and effect until modified, amended, superseded, or revoked."

§ 236. Administrative settlement of tort claims arising in foreign countries.

The Administrator may pay tort claims, in the manner authorized in the first paragraph of section 2672 of title 28, when such claims arise in foreign countries in connection with Veterans' Administration operations abroad. A claim may not be allowed under this section unless it is presented in writing to the Administrator or his designee within two years after the claim accrues. (Added Pub. L. 89-300, § 1(a), Oct. 28, 1965, 79 Stat. 1110.)

Subchapter IV.—Veterans Outreach Services Program

§ 240. Purpose; definitions.

(a) The Congress declares that the outreach services program authorized by this subchapter is for

the purpose of insuring that all veterans, especially those who have been recently discharged or released from active military, naval, or air service and those who are eligible for readjustment or other benefits and services under laws administered by the Veterans' Administration are provided timely and appropriate assistance to aid them in applying for and obtaining such benefits and services in order that they may achieve a rapid social and economic readjustment to civilian life and obtain a higher standard of living for themselves and their dependents. The Congress further declares that the outreach services program authorized by this subchapter is for the purpose of charging the Veterans' Administration with the affirmative duty of seeking out eligible veterans and eligible dependents and providing them with such services.

(b) For the purposes of this subchapter, (1) the term "other governmental programs" shall include all programs under State or local laws as well as all programs under Federal law other than those authorized by this title, and (2) the term "eligible dependent" means an "eligible person" as defined in section 1701(a) (1) of this title. (Added Pub. L. 91-219, title II, § 214(a), Mar. 26, 1970, 84 Stat. 84.)

§ 241. Outreach services.

The Administrator shall provide the following outreach services:

(1) by letter advise each veteran at the time of his discharge or release from active military, naval, or air service, or as soon as possible thereafter, of all benefits and services under laws administered by the Veterans' Administration for which the veteran may be eligible and, in carrying out this paragraph, the Administrator shall give priority to so advising those veterans who, on the basis of their military service records, do not have a high school education or equivalent at the time of discharge or release;

(2) distribute full information regarding all benefits and services to which they may be entitled under laws administered by the Veterans' Administration and may, to the extent feasible, distribute information on other governmental programs (including manpower and training programs) which he determines would be beneficial to veterans; and

(3) provide, to the maximum extent possible, aid and assistance (including personal interviews) to members of the Armed Forces, veterans, and eligible dependents in respect to clauses (1) and (2) above and in the preparation and presentation of claims under laws administered by the Veterans' Administration.

(Added Pub. L. 91-219, title II, § 214(a), Mar. 26, 1970, 84 Stat. 84.)

§ 242. Veterans assistance offices.

(a) The Administrator shall establish and maintain veterans assistance offices at such places throughout the United States and its territories and possessions, and the Commonwealth of Puerto Rico, as he determines to be necessary to carry out the purposes of this subchapter, with due regard for the geographical distribution of veterans recently

discharged or released from active military, naval, or air service, the special needs of educationally disadvantaged veterans (including their need for accessibility of outreach services), and the necessity of providing appropriate outreach services in less populated areas.

(b) The Administrator may implement such special telephone service as may be necessary to make the outreach services provided for under this subchapter as widely available as possible. (Added Pub. L. 91-219, title II, § 214(a), Mar. 26, 1970, 84 Stat. 85.)

§ 243. Utilization of other agencies.

In carrying out the purposes of this subchapter, the Administrator may—

(1) arrange with the Secretary of Labor for the State employment service to match the particular qualifications of an eligible veteran or eligible dependent with an appropriate job or job training opportunity, to include where possible, arrangements for outstationing the State employment personnel who provide such assistance at appropriate facilities of the Veterans' Administration;

(2) cooperate with and use the services of any Federal department or agency or any State or local governmental agency or recognized national or other organization;

(3) where appropriate, make referrals to any Federal department or agency or State or local governmental unit or recognized national or other organization;

(4) at his discretion, furnish available space and office facilities for the use of authorized representatives of such governmental unit or other organization providing services; and

(5) conduct studies in consultation with appropriate Federal departments and agencies to determine the most effective program design to carry out the purposes of this subchapter.

(Added Pub. L. 91-219, title II, § 214(a), Mar. 26, 1970, 84 Stat. 85.)

§ 244. Report to Congress.

The Administrator shall include in the annual report to the Congress required by section 214 of this title a report on the activities carried out under this subchapter, each report to include an appraisal of the effectiveness of the programs authorized herein and recommendations for the improvement or more effective administration of such programs. (Added Pub. L. 91-219, title II, § 214(a), Mar. 26, 1970, 84 Stat. 85.)

PART II.—GENERAL BENEFITS

Chap.	Sec.
11. Compensation for Service-Connected Disability or Death.....	301
13. Dependency and Indemnity Compensation for Service-Connected Deaths.....	401
15. Pension for Non-Service-Connected Disability or Death or for Service.....	501
17. Hospital, Domiciliary, and Medical Care.....	601
19. Insurance	701
21. Specially Adapted Housing for Disabled Veterans.....	801
23. Burial Benefits.....	901

Exhibit B
VA Form 21-526 (1971/1972)

(Detach and retain Instructions)

INSTRUCTIONS FOR FILLING OUT THIS APPLICATION (VA FORM 21-526)

NOTE: PLEASE READ VERY CAREFULLY

*OFFICIAL HISTORY FILE COPY
DO NOT REMOVE*

A. GENERAL INSTRUCTIONS

Disability compensation is paid for disability resulting from service in the armed forces. Disability pension is paid for disability not resulting from service in the armed forces, and the disability must be permanent and total. Pension is paid only to veterans of wartime service, or, of service on or after June 27, 1950, and prior to February 1, 1955, or, during the period between August 5, 1964, and a date to be determined by the President or Congress.

B. ORGANIZATIONS AND ATTORNEYS

You may be represented, without charge, by an accredited representative of any organization recognized by the Administrator of Veterans Affairs. While a claimant may also employ an attorney or claims agent recognized by the Veterans Administration to assist him in prosecuting his claim, it is not necessary that he do so. Any attorney or agent so employed may not legally charge any fee other than that allowed and paid by the Veterans Administration, and which is deducted from benefits otherwise payable to the claimant. If you need information about the meaning of any question, write the Veterans Administration Regional Office. If additional space is needed for any item use "Remarks," Item 37, page 4.

INCOME LIMITS AND RATES OF PENSION FOR
DISABILITY NOT RESULTING FROM SERVICE
EFFECTIVE JAN. 1, 1971

ANNUAL INCOME MORE THAN - BUT	EQUAL TO OR LESS THAN	VETERAN NO DEPEND- ENTS	ONE DEPEND- ENT	TWO DEPEND- ENTS	THREE OR MORE DEPEND- ENTS
\$300	\$300	\$121	\$132	\$137	\$142
400	400	119	132	137	142
500	500	117	132	137	142
600	600	115	130	135	140
700	700	112	128	133	138
800	800	108	126	131	136
900	900	104	124	129	134
1,000	1,000	100	122	127	132
1,100	1,100	96	119	119	119
1,200	1,200	92	116	116	116
1,300	1,300	88	113	113	113
1,400	1,400	84	110	110	110
1,500	1,500	79	107	107	107
1,600	1,600	75	104	104	104
1,700	1,700	69	101	101	101
1,800	1,800	63	99	99	99
1,900	1,900	57	96	96	96
2,000	2,000	51	93	93	93
2,100	2,100	45	90	90	90
2,200	2,200	37	87	87	87
2,300	2,300	29	84	84	84
2,400	2,400	NONE	81	81	81
2,500	2,500		78	78	78
2,600	2,600		75	75	75
2,700	2,700		72	72	72
2,800	2,800		69	69	69
2,900	2,900		66	66	66
3,000	3,000		62	62	62
3,100	3,100		58	58	58
3,200	3,200		54	54	54
3,300	3,300		50	50	50
3,400	3,400		42	42	42
3,500	3,500		34	34	34
			NONE	NONE	NONE

NOTE: \$110 additional is payable each month to those rated as being in need of regular aid and attendance or a patient in a nursing home and \$44 additional is payable each month to those permanently housebound but not in need of regular aid and attendance.

C. EVIDENCE—GENERAL

If you have not previously filed claim, attach a photostatic or certified true copy of all separation forms or discharges you received from the armed forces. If you are a pension applicant, 65 years of age or older, no medical evidence is necessary. However, if you claim additional pension because of the need for regular aid and attendance (unless you are a patient in a nursing home), or, because you are housebound, a detailed medical statement should accompany your application. Submission of proof of birth will expedite processing of your claim.

OCT 1971 41-245

IMPORTANT

THE TOTAL AMOUNT AND SOURCE OF ALL INCOME RECEIVED SHOULD BE REPORTED IN ITEM 34, LINES 1 TO 10, INCLUSIVE, AND WE WILL COMPUTE THE AMOUNT THAT DOES NOT COUNT.

INCOME EXCLUSIONS PROVIDED BY LAW

1. Your wife's earned income or \$1,200 of her total income, whichever is greater.
2. Ten percent of payments to an individual under public or private retirement, annuity, endowment or similar plans or programs.
3. Six months' death gratuity paid by the Armed Forces.
4. Donations from public or private relief or welfare organizations.
5. Compensation, pension, dependency and indemnity compensation, and educational assistance or special training allowance for sons or daughters of veterans paid by the United States Government under laws administered by the Veterans Administration.
6. Payments under policies of Servicemen's Group Life Insurance, United States Government Life Insurance or National Service Life Insurance and payments of Servicemen's Indemnity.
7. Lump sum death payments made by the Social Security Administration.
8. Bonus or similar cash gratuity paid by a State based on service in the Armed Forces of the United States.
9. Proceeds of fire insurance policies.
10. Payments received for discharge of jury duty or witness fees.
11. Profit from sale of real or personal property other than in the course of a business. However, total net proceeds should be reported as NET WORTH.
12. Amounts equal to amounts paid for the last illness and burial of a spouse or child.
13. Amounts equal to prepayments on real property mortgages on the principal residence of a veteran and spouse made after death of spouse during the year of death and the following year.
14. Bequests, devises and inheritances of property (not money). Proceeds should be reported as NET WORTH.
15. Amounts in joint accounts in banks and similar institutions acquired by reason of death of the other joint owner. Proceeds should be reported as NET WORTH.
16. Employer's contributions or reimbursement for Supplementary Medicare or private health insurance plan.
17. Retired Serviceman's Family Protection Plan annuities.

THE ABOVE EXCLUSIONS ARE LISTED FOR INFORMATION ONLY. AS STATED ABOVE, ALL OF YOUR INCOME SHOULD BE REPORTED AND WE WILL COMPUTE THE AMOUNT THAT DOES NOT COUNT.

NET WORTH is the market value of your interest or rights in any kind of property except ordinary personal effects necessary for daily living such as an automobile, clothing or furniture and the dwelling (single family unit) used as your principal residence.

SPECIFIC INSTRUCTIONS

IMPORTANT: These instructions are numbered to correspond with the items on the application.

Items 17A to 19D inclusive — Marital Information — Complete information concerning all marriages entered into by either you or your spouse and the termination of such marriages must be furnished. Specific details as to the date, place and manner of dissolution of each marriage must be included.

Columns 30C and 31C — Months Worked — The time actually worked should be stated. For example: If you worked full time for 2, 4, 6, 8, or 10 months, you should so state. If you did not work full time each month you should state the months or parts of months you actually worked. For example: 2 months, 1 week, 2 days.

Item 34, lines 1 to 10, inclusive — You should report under this item your expected total income for the periods covered. You must report total income of yourself and your wife from all sources. When reporting income, report the total amount to which you are entitled before any deductions, not the amount you actually receive. Include as income all amounts received or expected as severance pay or accrued payments of any kind or from any source. If you have applied for social security, unemployment or workmen's compensation, or any disability benefit, show the expected payment in the appropriate column. If the amount is not yet determined, enter the word, "unknown". If you and your wife receive income from dividends,

interest, rents, investments or operation of a business, profession or farm, which you own jointly, report one-half of the income as yours and one-half as your wife's.

Item 35A — Include market value of stocks, checking accounts, bank deposits, savings accounts and cash. Include 1/2 of the total value of those held jointly by you and your wife.

Item 35B — Do not include the value of the single dwelling unit or that portion of real property used solely as your principal residence. On all other Real Estate reduce the market value by amount of the indebtedness thereon and further report only 1/2 of the net value where the real estate is held jointly between husband and wife.

Item 35C — Report the total market value of your rights and interest in all other property not included in items 35A and 35B. Do not include value of ordinary personal effects necessary for your daily living such as an automobile, clothing and furniture. Include gifts, bequests and inheritances of all property other than cash.

Item 35D — Report all debts except mortgage(s) on real estate.

Item 35E — Report the total of items 35A through 35C less 35D. This should be your NET WORTH.

Form approved
OMB No. 36-0000

VETERANS ADMINISTRATION				(DO NOT WRITE IN THIS SPACE) VA DATE STAMP	
VETERAN'S APPLICATION FOR COMPENSATION OR PENSION					
IMPORTANT: Read attached General and Specific Instructions before filling in this form. Type, print or write plainly.					
1A. FIRST NAME - MIDDLE NAME - LAST NAME OF VETERAN			1B. TELEPHONE NO.		
2. MAILING ADDRESS OF VETERAN (Number and street or rural route, city or P.O., State and ZIP Code)			3. SOCIAL SECURITY NO.		
4. DATE OF BIRTH			5. PLACE OF BIRTH		6. SEX
7. RAILROAD RETIREMENT NO.			8. HAVE YOU EVER FILED A CLAIM FOR COMPENSATION FROM THE U.S. BUREAU OF EMPLOYEES COMPENSATION? (Formerly the U.S. Employees Compensation Commission)		
<input type="checkbox"/> YES <input type="checkbox"/> NO			9B. FILE NUMBER		
9A. HAVE YOU PREVIOUSLY FILED A CLAIM FOR ANY BENEFIT WITH THE VETERANS ADMINISTRATION?			9C. VA OFFICE HAVING YOUR RECORDS (If known)		
<input type="checkbox"/> NONE <input type="checkbox"/> HOSPITALIZATION OR MEDICAL CARE <input type="checkbox"/> WAIVER OF MULTIPLE PREMIUMS <input type="checkbox"/> DISABILITY COMPENSATION OR PENSION			<input type="checkbox"/> VOCATIONAL REHABILITATION (Chapter 32) <input type="checkbox"/> VETERANS EDUCATIONAL ASSISTANCE (Chapter 33 or 34) <input type="checkbox"/> WAR ORPHANS OR DEPENDENTS EDUCATIONAL ASSIST. (Chap. 39)		
<input type="checkbox"/> DENTAL OR OUTPATIENT TREATMENT <input type="checkbox"/> OTHER (Specify)					
SERVICE INFORMATION					
NOTE: Enter complete information for each period of active duty including Reservist or National Guard status. Attach Form DD 214 or other separation papers for all periods of active duty since January 31, 1955, to expedite processing of your claim. If you do NOT have your DD 214 or other separation papers check (✓) here <input type="checkbox"/>					
10A. ENTERED ACTIVE SERVICE		10B. SERVICE NO.		10C. SEPARATED FROM ACTIVE SERVICE	
DATE	PLACE			DATE	PLACE
10E. HAVE YOU BEEN A PRISONER OF WAR?		10F. NAME OF COUNTRY		10G. DATES OF CONFINEMENT	
<input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete Items 10F and 10G)					
11. IF YOU SERVED UNDER ANOTHER NAME, GIVE NAME AND PERIOD DURING WHICH YOU SERVED AND SERVICE NO.			12. IF RESERVIST OR NATIONAL GUARDSMAN, GIVE BRANCH OF SERVICE AND PERIOD OF ACTIVE OR INACTIVE TRAINING DUTY DURING WHICH DISABILITY OCCURRED		
13A. ARE YOU NOW A MEMBER OF THE RESERVE FORCES OF THE ARMY, NAVY, AIR FORCE, MARINE CORPS, COAST GUARD OR NATIONAL GUARD?			13B. BRANCH OF SERVICE		13C. RESERVE STATUS
<input type="checkbox"/> YES <input type="checkbox"/> NO					<input type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE <input type="checkbox"/> RESERVE OBLIGATION
14A. ARE YOU NOW RECEIVING OR WILL YOU RECEIVE RETIREMENT OR RETAINER PAY FROM THE ARMED FORCES?					
<input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete 14B, 14C and 14D)					
14B. BRANCH OF SERVICE		14C. MONTHLY AMOUNT		14D. RETIRED STATUS	
		\$		<input type="checkbox"/> PERMANENT <input type="checkbox"/> TEMPORARY DISABILITY RETIRED LIST	
15A. HAVE YOU EVER APPLIED FOR OR RECEIVED DISABILITY SEVERANCE PAY FROM THE ARMED FORCES?				15B. AMOUNT	
<input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete 15B)				\$	
15A. HAVE YOU RECEIVED LUMP SUM READJUSTMENT PAY FROM THE ARMED FORCES?				15B. AMOUNT	
<input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete 15B)				\$	

VA FORM 21-526
OCT 1971SUPERSEDES VA FORM 21-526, JAN 1969,
WHICH WILL NOT BE USED.

MARITAL AND DEPENDENCY INFORMATION			
17A. MARITAL STATUS (Check one) <input type="checkbox"/> NEVER MARRIED (If so, do not complete 27B through 30D) <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED		17B. NUMBER OF TIMES YOU HAVE BEEN MARRIED	
17C. NUMBER OF TIMES YOUR PRESENT SPOUSE HAS BEEN MARRIED			
FURNISH THE FOLLOWING INFORMATION ABOUT EACH OF YOUR MARRIAGES			
18A. DATE AND PLACE OF MARRIAGE	18B. TO WHOM MARRIED	18C. HOW MARRIAGE TERMINATED (Death, Divorce)	18D. DATE AND PLACE TERMINATED
FURNISH THE FOLLOWING INFORMATION ABOUT EACH PREVIOUS MARRIAGE OF YOUR PRESENT SPOUSE			
19A. DATE AND PLACE OF MARRIAGE	19B. TO WHOM MARRIED	19C. HOW MARRIAGE TERMINATED (Death, Divorce)	19D. DATE AND PLACE TERMINATED
20A. DO YOU LIVE TOGETHER? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "No," fill in 20B and 20C)	20B. REASON FOR SEPARATION	20C. AMOUNT YOU CONTRIBUTE TO YOUR WIFE'S SUPPORT MONTHLY \$	20D. PRESENT ADDRESS OF SPOUSE
LIST EACH OF YOUR LIVING UNMARRIED CHILDREN WHO IS: (A) UNDER 18 YEARS OLD OR (B) OVER 18 AND UNDER 21 YEARS AND ATTENDING SCHOOL, OR (C) CHILD OF ANY AGE WHO BECAME PERMANENTLY INCAPABLE OF SELF-SUPPORT DUE TO PHYSICAL OR MENTAL ILLNESS BEFORE AGE 18.			
21A. FULL NAME OF CHILD	21B. DATE OF BIRTH (Month, day, year)	21C. PLACE OF BIRTH	21D. NAME AND ADDRESS OF PERSON HAVING CUSTODY OF CHILD
NOTE - If any child above is over 18 years old, identify in Item 37 "Remarks," and indicate whether attending school or permanently incapable of self-support.			
22A. IS YOUR FATHER DEPENDENT UPON YOU FOR SUPPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," fill in 22B)	22B. NAME AND ADDRESS OF DEPENDENT FATHER		22C. IS YOUR MOTHER DEPENDENT UPON YOU FOR SUPPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," fill in 22D)
22D. NAME AND ADDRESS OF DEPENDENT MOTHER	22E. NAME AND ADDRESS OF NEAREST RELATIVE		22F. RELATIONSHIP OF NEAREST RELATIVE
23. NATURE OF SICKNESS, DISEASE OR INJURIES FOR WHICH THIS CLAIM IS MADE AND DATE EACH BEGAN			
24A. ARE YOU NOW OR HAVE YOU BEEN HOSPITALIZED OR FURNISHED DOMICILIARY CARE WITHIN THE PAST THREE MONTHS? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete 24B and 24C)	24B. DATES OF HOSPITALIZATION OR DOMICILIARY CARE	24C. NAME AND ADDRESS OF INSTITUTION	

NOTE: Items 25, 26, and 27 need NOT be completed unless you are now claiming compensation for a disability incurred in service.

IF YOU RECEIVED ANY TREATMENT WHILE IN SERVICE, FILL IN THE FOLLOWING INFORMATION

25A. NATURE OF SICKNESS, DISEASE OR INJURY	25B. DATES OF TREATMENT	25C. NAME, NUMBER OR LOCATION OF HOSPITAL, FIRST-AID STATION, DRESSING STATION, OR INFIRMARY	25D. ORGANIZATION AT TIME SICKNESS, DISEASE, OR INJURY WAS INCURRED

LIST CIVILIAN PHYSICIANS AND HOSPITALS WHERE YOU WERE TREATED FOR ANY SICKNESS, INJURY OR DISEASE SHOWN IN ITEM 25A ABOVE BEFORE, DURING, OR SINCE YOUR SERVICE, AND ANY (MILITARY) HOSPITALS SINCE YOUR LAST DISCHARGE.

26A. NAME	26B. PRESENT ADDRESS	26C. DISABILITY	26D. DATE

LIST PERSONS OTHER THAN PHYSICIANS WHO KNOW ANY FACTS ABOUT ANY SICKNESS, DISEASE OR INJURY SHOWN IN ITEM 25A ABOVE WHICH YOU HAD BEFORE, DURING, OR SINCE YOUR SERVICE.

27A. NAME	27B. PRESENT ADDRESS	27C. DISABILITY	27D. DATE

IF YOU CLAIM TO BE TOTALLY DISABLED (Complete items 28A thru 32E)

28A. ARE YOU NOW EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO	28B. DATE YOU LAST WORKED	28C. IF YOU WERE SELF-EMPLOYED BEFORE BECOMING TOTALLY DISABLED, JUST WHAT PART OF THE WORK DID YOU DO?
28D. IF YOU ARE STILL SELF-EMPLOYED, WHAT PART OF THE WORK DO YOU DO NOW?		28E. WHAT IS THE MOST YOU EVER EARNED IN ANY ONE YEAR? \$
28F. WHAT YEAR?		

29A. EDUCATION (Circle highest year completed) 1 2 3 4 5 6 7 8 1 2 3 4 1 2 3 4 (GRADE SCHOOL) (HIGH SCHOOL) (COLLEGE)	29B. NATURE OF AND TIME SPENT IN OTHER EDUCATION AND TRAINING
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LIST ALL YOUR EMPLOYMENT, INCLUDING SELF-EMPLOYMENT, FOR 1 YEAR BEFORE YOU BECAME TOTALLY DISABLED

30A. NAME AND ADDRESS OF EMPLOYER	30B. KIND OF WORK	30C. MONTHS WORKED	30D. TIME LOST FROM ILLNESS	30E. TOTAL EARNINGS

LIST ALL YOUR EMPLOYMENT, INCLUDING SELF-EMPLOYMENT, SINCE YOU BECAME TOTALLY DISABLED

31A. NAME AND ADDRESS OF EMPLOYER	31B. KIND OF WORK	31C. MONTHS WORKED	31D. TIME LOST FROM ILLNESS	31E. TOTAL EARNINGS

32. INCOME RECEIVED AND EXPECTED FROM ALL SOURCES							
<p>NOTE. — Items 32A through 32C should be completed only if you are applying for nonservice-connected pension. (Veterans of Indian Wars, Spanish American War, Boxer Rebellion, or Philippine Insurrection need not complete these items.)</p>							
<p>32A. HAVE YOU APPLIED FOR OR ARE YOU RECEIVING OR ENTITLED TO RECEIVE ANY BENEFITS FROM THE SOCIAL SECURITY ADMINISTRATION OR RAILROAD RETIREMENT?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete items 32b thru 32d)</p>		<p>32B. MONTHLY AMOUNT</p> <p>\$</p>		<p>32C. BEGINNING DATE</p> <p></p>		<p>32D. RAILROAD RETIREMENT CLAIM NO.</p> <p></p>	
<p>33A. HAVE YOU APPLIED FOR OR ARE YOU RECEIVING OR ENTITLED TO RECEIVE ANNUITY OR RETIREMENT BENEFITS OR ENDOWMENT INSURANCE FROM ANY OTHER SOURCE?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete items 33B thru 33D)</p>		<p>33B. MONTHLY AMOUNT</p> <p>\$</p>		<p>33C. BEGINNING DATE</p> <p></p>		<p>33D. NAME AND ADDRESS OF SOURCE</p> <p></p>	
34. INCOME AND NET WORTH							
LINE NO.	SOURCE (34A)	AMOUNT RECEIVED FROM JAN. 1 TO DATE YOU SIGN THIS STATEMENT		AMOUNT EXPECTED FROM DATE YOU SIGN THIS STATEMENT TO END OF THIS CALENDAR YEAR		AMOUNT EXPECTED FOR THE NEXT CALENDAR YEAR	
		VETERAN (34B)	SPOUSE (34C)	VETERAN (34D)	SPOUSE (34E)	VETERAN (34F)	SPOUSE (34G)
1	TOTAL WAGES (Report total income and not "take home pay")						
2	SOCIAL SECURITY						
3	OTHER ANNUITIES OR RETIREMENT BENEFITS						
4	DIVIDENDS AND INTEREST						
5	UNEMPLOYMENT COMPENSATION						
6	NET INCOME FROM RENTAL(S)						
7	NET PROFIT FROM SELF-EMPLOYMENT (BUSINESS OR FARM)						
8	INSURANCE						
9	OTHER INCOME						
10	TOTAL INCOME (Total of lines 1 thru 9)						
11	GROSS RENTAL(S) (Before any deductions)						
<p>LIST YOUR TOTAL ASSETS (Read Instructions for Items 35A to 35E before you answer the following.)</p>							
35A. STOCKS, BONDS, BANK DEPOSITS, ETC.		35B. REAL ESTATE		35C. OTHER PROPERTY		35D. TOTAL DEBTS	
\$		\$		\$		\$	
GROSS INCOME FROM SELF-EMPLOYMENT ON FARM OR BUSINESS OPERATION							
<p>NOTE: If you are self-employed or operate a farm or business complete items 36A thru 36C and give detailed explanation under "Remarks".</p>							
36A. TOTAL INCOME LAST YEAR		36B. TOTAL INCOME SO FAR THIS YEAR			36C. EXPECTED INCOME FOR REMAINDER OF YEAR		
\$		\$			\$		
<p>37. REMARKS (Identify your statements by their applicable item numbers. If additional space is required, attach separate sheet and identify your statements by their item numbers.)</p> <p></p>							
<p>CERTIFICATION AND AUTHORIZATION FOR RELEASE OF INFORMATION — I certify that the foregoing statements are true and complete to the best of my knowledge and belief. I CONSENT that any physician, surgeon, dentist or hospital that has treated or examined me for any purpose, or that I have consulted professionally, may furnish to the Veterans Administration any information about myself and I waive any privilege which renders such information confidential.</p>							
38. DATE SIGNED		39. SIGNATURE OF CLAIMANT					
		SIGN HERE					
WITNESSES TO SIGNATURE OF CLAIMANT IF MADE BY "X" MARK							
<p>NOTE. — Signatures made by mark must be witnessed by two persons to whom the person making the statement is personally known, and the signatures and addresses of such witnesses must be shown below.</p>							
40A. SIGNATURE OF WITNESS				40B. ADDRESS OF WITNESS			
40A. SIGNATURE OF WITNESS				40B. ADDRESS OF WITNESS			
<p>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, or for the fraudulent acceptance of any payment to which you are not entitled.</p>							

Form approved
OMB No. 16-80007

VETERANS ADMINISTRATION					(DO NOT WRITE IN THIS SPACE) VA DATE STAMP	
VETERAN'S APPLICATION FOR COMPENSATION OR PENSION						
IMPORTANT: Read attached General and Specific Instructions before filling in this form. Typewrite, print or write plainly.						
1A. FIRST NAME - MIDDLE NAME - LAST NAME OF VETERAN				1B. TELEPHONE NO.		
2. MAILING ADDRESS OF VETERAN (Number and street or rural route, city or P.O., State and ZIP Code)				3. SOCIAL SECURITY NO.		
4. DATE OF BIRTH				5. PLACE OF BIRTH		6. SEX
7. RAILROAD RETIREMENT NO.				8. HAVE YOU EVER FILED A CLAIM FOR COMPENSATION FROM THE U. S. BUREAU OF EMPLOYEES COMPENSATION? (Formerly the U. S. Employees Compensation Commission)		
<input type="checkbox"/> YES <input type="checkbox"/> NO				9B. FILE NUMBER		
9A. HAVE YOU PREVIOUSLY FILED A CLAIM FOR ANY BENEFIT WITH THE VETERANS ADMINISTRATION?				9C. VA OFFICE HAVING YOUR RECORDS (If known)		
<input type="checkbox"/> NONE <input type="checkbox"/> HOSPITALIZATION OR MEDICAL CARE <input type="checkbox"/> WAIVER OF NSLI PREMIUMS <input type="checkbox"/> DISABILITY COMPENSATION OR PENSION				<input type="checkbox"/> VOCATIONAL REHABILITATION (Chapter 31) <input type="checkbox"/> VETERANS EDUCATIONAL ASSISTANCE (Chapter 33 or 34) <input type="checkbox"/> WAR ORPHANS OR DEPENDENTS EDUCATIONAL ASSIST. (Chap. 33) <input type="checkbox"/> DENTAL OR OUTPATIENT TREATMENT <input type="checkbox"/> OTHER (Specify)		
SERVICE INFORMATION						
NOTE: Enter complete information for each period of active duty including Reservist or National Guard status. Attach Form DD 214 or other separation papers for all periods of active duty since January 31, 1955, to expedite processing of your claim. If you do NOT have your DD 214 or other separation papers check (✓) here <input type="checkbox"/> .						
10A. ENTERED ACTIVE SERVICE		10B. SERVICE NO.		10C. SEPARATED FROM ACTIVE SERVICE		10D. GRADE, RANK OR RATING, ORGANIZATION AND BRANCH OF SERVICE
DATE	PLACE			DATE	PLACE	
10E. HAVE YOU BEEN A PRISONER OF WAR?		10F. NAME OF COUNTRY		10G. DATES OF CONFINEMENT		
<input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete items 10F and 10G)						
11. IF YOU SERVED UNDER ANOTHER NAME, GIVE NAME AND PERIOD DURING WHICH YOU SERVED AND SERVICE NO.				12. IF RESERVIST OR NATIONAL GUARDSMAN, GIVE BRANCH OF SERVICE AND PERIOD OF ACTIVE OR INACTIVE TRAINING DUTY DURING WHICH DISABILITY OCCURRED		
13A. ARE YOU NOW A MEMBER OF THE RESERVE FORCES OF THE ARMY, NAVY, AIR FORCE, MARINE CORPS, COAST GUARD OR NATIONAL GUARD?				13B. BRANCH OF SERVICE		13C. RESERVE STATUS
<input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE <input type="checkbox"/> RESERVE OBLIGATION
14A. ARE YOU NOW RECEIVING OR WILL YOU RECEIVE RETIREMENT OR RETAINER PAY FROM THE ARMED FORCES?						
<input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete 14B, 14C and 14D)						
14B. BRANCH OF SERVICE		14C. MONTHLY AMOUNT			14D. RETIRED STATUS	
		\$			<input type="checkbox"/> PERMANENT <input type="checkbox"/> TEMPORARY DISABILITY RETIRED LIST	
15A. HAVE YOU EVER APPLIED FOR OR RECEIVED DISABILITY SEVERANCE PAY FROM THE ARMED FORCES?					15B. AMOUNT	
<input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete 15B)					\$	
16A. HAVE YOU RECEIVED LUMP SUM READJUSTMENT PAY FROM THE ARMED FORCES?					16B. AMOUNT	
<input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete 16B)					\$	

MARITAL AND DEPENDENCY INFORMATION			
17A. MARITAL STATUS (Check one) <input type="checkbox"/> NEVER MARRIED (If so, do not complete 17B through 20D) <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED		17B. NUMBER OF TIMES YOU HAVE BEEN MARRIED	17C. NUMBER OF TIMES YOUR PRESENT SPOUSE HAS BEEN MARRIED
NOTE – Furnish the following information about each of your marriages. A certified copy of the public or church record of your CURRENT marriage is required if you or your spouse had a prior marriage.			
18A. DATE AND PLACE OF MARRIAGE	18B. TO WHOM MARRIED	18C. TERMINATED (Death, divorce)	18D. DATE AND PLACE TERMINATED
19. CHECK (X) WHETHER YOUR CURRENT MARRIAGE WAS PERFORMED: <input type="checkbox"/> CLERGYMAN OR AUTHORIZED PUBLIC OFFICIAL <input type="checkbox"/> OTHER (Explain)			
FURNISH THE FOLLOWING INFORMATION ABOUT EACH PREVIOUS MARRIAGE OF YOUR PRESENT SPOUSE			
20A. DATE AND PLACE OF MARRIAGE	20B. TO WHOM MARRIED	20C. HOW MARRIAGE TERMINATED (Death, divorce)	20D. DATE AND PLACE TERMINATED
21A. DO YOU LIVE TOGETHER? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "No," fill in 21B)	21B. REASON FOR SEPARATION	21C. AMOUNT YOU CONTRIBUTE TO YOUR WIFE'S SUPPORT - MONTHLY \$	21D. PRESENT ADDRESS OF SPOUSE
22. HAVE YOU ANY CHILD OR CHILDREN (Check) <input type="checkbox"/> UNDER 18 YEARS OF AGE AND UNMARRIED <input type="checkbox"/> OVER 18 AND UNDER 28, UNMARRIED AND ATTENDING SCHOOL <input type="checkbox"/> OF ANY AGE PERMANENTLY HELPLESS FOR MENTAL OR PHYSICAL REASONS			
NOTE – If any block in Item 22 is checked, furnish the following information for each child. A certified copy of the public or church record of birth or court record of adoption is required if the child is adopted, a stepchild or illegitimate child			
23A. FULL NAME OF CHILD	23B. DATE OF BIRTH (Month, day, year)	23C. PLACE OF BIRTH	23D. NAME AND ADDRESS OF PERSON HAVING CUSTODY OF CHILD
24A. IS YOUR FATHER DEPENDENT UPON YOU FOR SUPPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," fill in 24B)	24B. NAME AND ADDRESS OF DEPENDENT FATHER		24C. IS YOUR MOTHER DEPENDENT UPON YOU FOR SUPPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," fill in 24D)
24D. NAME AND ADDRESS OF DEPENDENT MOTHER		24E. NAME AND ADDRESS OF NEAREST RELATIVE	
25. NATURE OF SICKNESS, DISEASE OR INJURIES FOR WHICH THIS CLAIM IS MADE AND DATE EACH BEGAN			
26A. ARE YOU NOW OR HAVE YOU BEEN HOSPITALIZED OR FURNISHED DOMICILIARY CARE WITHIN THE PAST THREE MONTHS? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete 26B and 26C)	26B. DATES OF HOSPITALIZATION OR DOMICILIARY CARE	26C. NAME AND ADDRESS OF INSTITUTION	

NOTE: Items 27, 28, and 29 need NOT be completed unless you are now claiming compensation for a disability incurred in service.				
IF YOU RECEIVED ANY TREATMENT WHILE IN SERVICE, FILL IN THE FOLLOWING INFORMATION				
27A. NATURE OF SICKNESS, DISEASE OR INJURY	27B. DATES OF TREATMENT	27C. NAME, NUMBER OR LOCATION OF HOSPITAL, FIRST-AID STATION, DRESSING STATION, OR INFIRMARY	27D. ORGANIZATION AT TIME SICKNESS, DISEASE, OR INJURY WAS INCURRED	
LIST CIVILIAN PHYSICIANS AND HOSPITALS WHERE YOU WERE TREATED FOR ANY SICKNESS, INJURY OR DISEASE SHOWN IN ITEM 27A ABOVE BEFORE, DURING, OR SINCE YOUR SERVICE, AND ANY (MILITARY) HOSPITALS SINCE YOUR LAST DISCHARGE.				
28A. NAME	28B. PRESENT ADDRESS	28C. DISABILITY	28D. DATE	
LIST PERSONS OTHER THAN PHYSICIANS WHO KNOW ANY FACTS ABOUT ANY SICKNESS, DISEASE OR INJURY SHOWN IN ITEM 27A ABOVE WHICH YOU HAD BEFORE, DURING, OR SINCE YOUR SERVICE.				
29A. NAME	29B. PRESENT ADDRESS	29C. DISABILITY	29D. DATE	
IF YOU CLAIM TO BE TOTALLY DISABLED (Complete items 30A thru 33E) Note: Items 30A thru 33E need not be completed if you are age 65 or over and only claiming pension)				
30A. ARE YOU NOW EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO	30B. DATE YOU LAST WORKED	30C. IF YOU WERE SELF-EMPLOYED BEFORE BECOMING TOTALLY DISABLED, JUST WHAT PART OF THE WORK DID YOU DO?		
30D. IF YOU ARE STILL SELF-EMPLOYED, WHAT PART OF THE WORK DO YOU DO NOW?	30E. WHAT IS THE MOST YOU EVER EARNED IN ANY ONE YEAR? \$		30F. WHAT YEAR?	
31A. EDUCATION (Circle highest year completed) 1 2 3 4 5 6 7 8 1 2 3 4 1 2 3 4 1 GRADE SCHOOL 1 HIGH SCHOOL 1 COLLEGE		31B. NATURE OF AND TIME SPENT IN OTHER EDUCATION AND TRAINING		
LIST ALL YOUR EMPLOYMENT, INCLUDING SELF-EMPLOYMENT, FOR 1 YEAR BEFORE YOU BECAME TOTALLY DISABLED				
32A. NAME AND ADDRESS OF EMPLOYER	32B. KIND OF WORK	32C. MONTHS WORKED	32D. TIME LOST FROM ILLNESS	32E. TOTAL EARNINGS
LIST ALL YOUR EMPLOYMENT, INCLUDING SELF-EMPLOYMENT, SINCE YOU BECAME TOTALLY DISABLED				
33A. NAME AND ADDRESS OF EMPLOYER	33B. KIND OF WORK	33C. MONTHS WORKED	33D. TIME LOST FROM ILLNESS	33E. TOTAL EARNINGS

34. INCOME RECEIVED AND EXPECTED FROM ALL SOURCES

NOTE: — Items 34A through 38C should be completed only if you are applying for nonservice-connected pension. (Veterans of Indian Wars, Spanish American War, Boxer Rebellion, or Philippine Insurrection need not complete these items.)

34A. HAVE YOU APPLIED FOR OR ARE YOU RECEIVING OR ENTITLED TO RECEIVE ANY BENEFITS FROM THE SOCIAL SECURITY ADMINISTRATION OR RAILROAD RETIREMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete items 34B thru 34D)	34B. MONTHLY AMOUNT \$	34C. BEGINNING DATE	34D. RAILROAD RETIREMENT CLAIM NO.
35A. HAVE YOU APPLIED FOR OR ARE YOU RECEIVING OR ENTITLED TO RECEIVE ANNUITY OR RETIREMENT BENEFITS OR ENDOWMENT INSURANCE FROM ANY OTHER SOURCE? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete items 35B thru 35D)	35B. MONTHLY AMOUNT \$	35C. BEGINNING DATE	35D. NAME AND ADDRESS OF SOURCE

35. INCOME AND NET WORTH

LINE NO.	SOURCE (35A)	AMOUNT RECEIVED FROM JAN. 1 TO DATE YOU SIGN THIS STATEMENT		AMOUNT EXPECTED FROM DATE YOU SIGN THIS STATEMENT TO END OF THIS CALENDAR YEAR		AMOUNT EXPECTED FOR THE NEXT CALENDAR YEAR	
		VETERAN (35B)	SPOUSE (35C)	VETERAN (35D)	SPOUSE (35E)	VETERAN (35F)	SPOUSE (35G)
1	TOTAL WAGES (Report total income and not "take home pay")						
2	SOCIAL SECURITY						
3	OTHER ANNUITIES OR RETIREMENT BENEFITS						
4	DIVIDENDS AND INTEREST						
5	UNEMPLOYMENT COMPENSATION						
6	NET INCOME FROM RENTALS						
7	NET PROFIT FROM SELF-EMPLOYMENT (BUSINESS OR FARM)						
8	INSURANCE						
9	OTHER INCOME						
10	TOTAL INCOME (Total of lines 1 thru 9)						
11	GROSS RENTALS (Before any deductions)						

LIST YOUR TOTAL ASSETS (Read instructions for items 37A to 37E before you answer the following.)

37A. STOCKS, BONDS, BANK DEPOSITS, ETC. \$	37B. REAL ESTATE \$	37C. OTHER PROPERTY \$	37D. TOTAL DEBTS \$	37E. NET WORTH \$
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GROSS INCOME FROM SELF-EMPLOYMENT ON FARM OR BUSINESS OPERATION

NOTE: If you are self-employed or operate a farm or business complete items 38A thru 38C and give detailed explanation under "Remarks".

38A. TOTAL INCOME LAST YEAR \$	38B. TOTAL INCOME SO FAR THIS YEAR \$	38C. EXPECTED INCOME FOR REMAINDER OF YEAR \$
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38. REMARKS (Identify your statements by their applicable item numbers. If additional space is required, attach separate sheet and identify your statements by their item numbers.)

CERTIFICATION AND AUTHORIZATION FOR RELEASE OF INFORMATION — I certify that the foregoing statements are true and complete to the best of my knowledge and belief. I CONSENT that any physician, surgeon, dentist or hospital that has treated or examined me for any purpose, or that I have consulted professionally, may furnish to the Veterans Administration any information about myself and I waive any privilege which renders such information confidential.

40. DATE SIGNED	41. SIGNATURE OF CLAIMANT SIGN HERE
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WITNESSES TO SIGNATURE OF CLAIMANT IF MADE BY "X" MARK

NOTE — Signature made by mark must be witnessed by two persons to whom the person making the statement is personally known, and the signatures and addresses of such witnesses must be shown below.

42A. SIGNATURE OF WITNESS	42B. ADDRESS OF WITNESS
43A. SIGNATURE OF WITNESS	43B. ADDRESS OF WITNESS

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, or for the fraudulent acceptance of any payment to which you are not entitled.

(Detach and retain Instructions)

INSTRUCTIONS FOR FILLING OUT THIS APPLICATION (VA FORM 21-526)

NOTE: PLEASE READ VERY CAREFULLY

A. GENERAL INSTRUCTIONS

Disability compensation is paid for disability resulting from service in the armed forces.

Disability pension is paid for disability not resulting from service in the armed forces, and the disability must be permanent and total. Pension is paid only to veterans of wartime service, or, of service on or after June 27, 1950, and prior to February 1, 1955, or, during the period between August 5, 1964, and a date to be determined by the President or Congress.

INCOME LIMITS FOR PENSION FOR
DISABILITY NOT RESULTING FROM SERVICE
EFFECTIVE JAN. 1, 1972

INCOME LIMITS AND RATES OF PENSION. A veteran cannot receive a pension if his annual income is more than \$2600 if he has no dependent, or \$3800 if he has a dependent. The rate of pension paid to a veteran depends upon the amount of his income and the number of dependents, according to a formula provided by law.

If there is more than one dependent, the monthly payment will be increased by \$5 for each additional dependent up to a total of 3.

NOTE: \$110 additional is payable each month to those rated as being in need of regular aid and attendance or a patient in a nursing home and \$44 additional is payable each month to those permanently housebound but not in need of regular aid and attendance.

B. ORGANIZATIONS AND ATTORNEYS

You may be represented, without charge, by an accredited representative of any organization recognized by the Administrator of Veterans Affairs. While a claimant may also employ an attorney or claims agent recognized by the Veterans Administration to assist him in prosecuting his claim, it is not necessary that he do so. Any attorney or agent so employed may not legally charge any fee other than that allowed and paid by the Veterans Administration, and which is deducted from benefits otherwise payable to the claimant. If you need information about the meaning of any question, write the Veterans Administration Regional Office. If additional space is needed for any item use "Remarks," Item 39, page 4.

C. EVIDENCE - GENERAL

If you have not previously filed claim, attach a photostatic or certified true copy of all separation forms or discharges you received from the armed forces. If you are a pension applicant, 65 years of age or older, no medical evidence is necessary. However, if you claim additional pension because of the need for regular aid and attendance (unless you are a patient in a nursing home), or, because you are housebound, a detailed medical statement should accompany your application. Submission of proof of birth will expedite processing of your claim.

D. REPORTING INCOME AND EXCLUSIONS-NET WORTH FOR PENSION CLAIM

The total amount and source of all income received should be reported in Item 36, lines 1 to 10 inclusive, and we will compute the amount that does not count.

VA FORM
AUG 1972 21-526

SUPERSEDES VA FORM 21-526, OCT 1971,
WHICH WILL NOT BE USED.

INCOME EXCLUSIONS PROVIDED BY LAW

1. Your wife's earned income or \$1,200 of her total income, whichever is greater.
2. Ten percent of payments to an individual under public or private retirement, annuity, endowment or similar plans or programs.
3. Six months' death gratuity paid by the Armed Forces.
4. Donations from public or private relief or welfare organizations.
5. Compensation, pension, dependency and indemnity compensation, and educational assistance or special training allowance for sons or daughters of veterans paid by the United States Government under laws administered by the Veterans Administration.
6. Payments under policies of Servicemen's Group Life Insurance, United States Government Life Insurance or National Service Life Insurance and payments of Servicemen's Indemnity.
7. Lump sum death payments made by the Social Security Administration.
8. Bonus or similar cash gratuity paid by a State based on service in the Armed Forces of the United States.
9. Proceeds of fire insurance policies.
10. Payments received for discharge of jury duty or witness fees.
11. Profit from sale of real or personal property other than in the course of a business. However, total net proceeds should be reported as NET WORTH.
12. Amounts equal to amounts paid for the last illness and burial of spouse or child.
13. Amounts equal to prepayments on real property mortgages on the principal residence of a veteran and spouse made after death of spouse during the year of death and the following year.
14. Bequests, devises and inheritances of property (not money). Proceeds should be reported as NET WORTH.
15. Amounts in joint accounts in banks and similar institutions acquired by reason of death of the other joint owner. Proceeds should be reported as NET WORTH.
16. Employer's contributions or reimbursement for Supplementary Medicare or private health insurance plan.
17. Retired Serviceman's Family Protection Plan annuities.

THE ABOVE EXCLUSIONS ARE LISTED FOR INFORMATION ONLY. AS STATED ABOVE, ALL OF YOUR INCOME SHOULD BE REPORTED AND WE WILL COMPUTE THE AMOUNT THAT DOES NOT COUNT.

FAMILY UNUSUAL MEDICAL EXPENSES are amounts actually paid by you during the calendar year for unusual medical expenses for which you are not reimbursed by insurance or otherwise. You should report the total unreimbursed amount you paid for Medical expenses for yourself or for relatives you are under an obligation to support. You may include premiums paid for health, sickness or hospitalization insurance. In computing your income for pension purposes, the VA will deduct the amount you paid for medical expenses which exceeds 5% of your reportable annual income.

NET WORTH is the market value of your interest or rights in any kind of property except ordinary personal effects necessary for daily living such as an automobile, clothing or furniture and the dwelling (single family unit) used as your principal residence.

SPECIFIC INSTRUCTIONS

IMPORTANT: These instructions are numbered to correspond with the items on the application.

Items 17A to 21D inclusive — Marital Information — Complete information concerning all marriages entered into by either you or your spouse and the termination of such marriages must be furnished. Specific details as to the date, place and manner of dissolution of each marriage must be included.

Columns 32C and 33C — Months Worked — The time actually worked should be stated. For example: If you worked full time for 2, 4, 6, 8, or 10 months, you should so state. If you did not work full time each month you should state the months or parts of months you actually worked. For example: 2 months, 1 week, 2 days.

Item 36, lines 1 to 10, inclusive — You should report under this item your expected total income for the periods covered. You must report total income of yourself and your wife from all sources. When reporting income, report the total amount to which you are entitled before any deductions, not the amount you actually receive. Include as income all amounts received or expected as severance pay or accrued payments of any kind or from any source. If you have applied for social security, unemployment or workmen's compensation, or any disability benefit, show the expected payment in the appropriate column. If the amount is not yet determined, enter the word, "unknown". If you and your wife receive income from dividends,

interest, rents, investments or operation of a business, profession or farm, which you own jointly, report one-half of the income as yours and one-half as your wife's.

Item 37A — Include market value of stocks, checking accounts, bank deposits, savings accounts and cash. Include 1/2 of the total value of those held jointly by you and your wife.

Item 37B — Do not include the value of the single dwelling unit or that portion of real property used solely as your principal residence. On all other Real Estate reduce the market value by amount of the indebtedness thereon and further report only 1/2 of the net value where the real estate is held jointly between husband and wife.

Item 37C — Report the total market value of your rights and interest in all other property not included in items 37A and 37B. Do not include value of ordinary personal effects necessary for your daily living such as an automobile, clothing and furniture. Include gifts, bequests and inheritances of all property other than cash.

Item 37D — Report all debts except mortgage(s) on real estate.

Item 37E — Report the total of items 37A through 37C less 37D. This should be your NET WORTH.