



The E-9ers

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Army
Navy
Air Force
Marine Corps
Coast Guard

September 2011

Volume 14 Number 9

PRESIDENT'S COLUMN

Fellow E-9ers:

Summer is fast passing. We hope you had a good one. Due to health problems, we weren't able to make it back to Wisconsin for a wedding, and other family activities, but one's health comes first. As we get older, more and more things need to be repaired or replaced. Why should a person in this day and age live with pain.

As I read over our newsletters, I realize that there is a wealth of information that we all can use. Take advantage of it. I would appreciate your input to come up with monthly speakers. Mike has done an outstanding job, but he wants to move on, and we have to come up with his replacement. Please help me out.

We'll see you all at our next meeting.

Your prez,

TRICARE COVERS NURSING FACILITY CARE

Tricare covers skilled nursing facility (SNF) care. For Tricare to cover SNF admission, beneficiaries must: (1) be treated in a hospital for at least three consecutive days, not including the day of discharge; and (2) be admitted within 30 days of your hospital discharge (with some exceptions) to a skilled nursing facility. You are responsible for Tricare beneficiary cost shares. The amount you pay varies, depending on your eligibility status and Tricare option. For more information, please see the chart at www.tricare.mil/costs. For more information, visit the Tricare website at <http://www.tricare.mil>.

Military.com Article, Dated August 1, 2011

VA STUDY OF PURPLE HEART VETS

A study led by Department of Veterans Affairs (VA) researchers has found that aging veterans who earned the Purple Heart show decreased mortality compared with those who had not earned the medal. Additionally, those war-wounded veterans who survive into later life -- especially those who do not develop post-traumatic stress disorder (PTSD) -- may provide valuable clues as to the factors that lead to resilience to combat stress. An abstract of the article in the July 12, 2011 edition of the journal *Depression and Anxiety* is available online at <http://onlinelibrary.wiley.com/>.

Military.com Article, Dated July 25, 2011

The E-9ers OFFICERS

The following officers of the E-9ers Association are interested in hearing from you and what suggestions that you may have to improve our group. If you have any thoughts that you would like to share, please give one or more of them a call. They would love to hear from you.

President: Bill Kelm

303-955-2514

kelmwoods@comcast.net

Vice President: Bob Gerle

303-288-7442 (Home)

303-263-1109

bobgerle@comcast.net

Secretary: Sharon Melcher

303-341-9170

E-mail: kcmelcher@comcast.net

Treasurer: Ken Melcher

303-341-9170

E-mail: kcmelcher@Comcast.net

Director: Jack Hunter

303-797-3136

jackhunter@e9ers.org

Director: Mike Phelps

720-304-2156

E-mail: masser86@comcast.net

Sergeant At Arms: Cal Keil

303-755-8532

Email: calkeil@aol.com

Newsletter Editor: Hank Kordek

303-366-4028

E-mail: hkordek@comcast.net

The E-9ers Association Next Monthly Meeting

September 28, 2011

11:00 a.m.

at

Mr. Panda Restaurant

2852 S. Havana Street

Aurora, CO

RETROACTIVE COVERAGE CLOSING FOR TRICARE YOUNG ADULTS

The opportunity to purchase retroactive Tricare Young Adult (TYA) coverage expires on September 30. Retroactive TYA provides coverage for young adults back to January 1, or the day they became eligible if that was after January 1. TYA allows eligible adult children to purchase Tricare coverage after their eligibility for "regular" Tricare coverage ends at age 21 (or 23 if enrolled in a full course of study at an approved institution of higher learning).

TYA-eligible beneficiaries may choose to purchase retroactive coverage if they've had significant health care expenses that weren't covered by other insurance. Once enrolled in TYA, beneficiaries may file a claim for reimbursement of costs for covered care. Additionally, young adults in the Continued Health Care Benefit Program (CHCBP) may elect to purchase retroactive TYA coverage and receive a refund for their CHCBP fees.

Those interested in purchasing retroactive TYA coverage must ensure their application form is received by the regional or overseas health care contractor by September 30, 2011. All premiums – both retroactive and the initial three-month payment – must be submitted with the application. The application and payment can be dropped off at a Tricare Service Center, or mailed or faxed to the regional or overseas health care contractor. To be reimbursed for covered services, receipts for care must be included when a claim is filed.

TYA launched in May 2011, and has shown a steady increase in enrollment numbers. As of July 31, almost 7,700 young adults have purchased TYA, which currently offers Tricare Standard coverage for \$186 a month. To qualify for TYA, uniformed services dependents must be under 26, unmarried, and not eligible for their own employer-sponsored health care coverage. A premium-based Tricare Prime benefit is scheduled to be available later in 2011.

Before choosing to purchase TYA, beneficiaries should carefully consider all of their health care coverage options and balance all the costs. Complete information and application forms are available at www.tricare.mil/tya.

Tricare Media Center Article, Dated August 8, 2011

JPAC LAUNCHES FIVE MISSIONS TO SEARCH FOR REMAINS

The Hawaii-based military command that searches for missing U.S. service members has recently deployed teams to Vietnam, Canada, Vanuatu, Germany, and Papua, New Guinea to search for Americans unaccounted for from the Vietnam War and World War II. The Joint POW/MIA Accounting Command (JPAC) said August 12 that the missions were the last ones due to deploy during the fiscal year ending September 30.

In Vietnam, about 35 team members will search for five Americans at burial and aircraft crash sites in three provinces. They expect to spend 35 days on the mission. Separately, JPAC team members and Navy divers from Virginia Beach, VA have deployed to Newfoundland province in Canada to search for three Americans that remain unaccounted-for from a World War II aircraft crash. The team will spend 30 days conducting underwater excavations.

Military Times Article, Dated August 13, 2011

2011 AURORA VETERANS SALUTE

The Aurora Center for Active Adults will be presenting the 17th annual Aurora Veterans Salute on Wednesday, November 2 at Wings Over the Rockies Museum, 7711 E. Academy Blvd., Denver CO. This year's event will be sponsored by Spalding Rehabilitation Hospital in partnership with KEZW and Buckley AFB. The 2011 Salute will commemorate the 50th anniversary of the Vietnam War and will honor Vietnam-era veterans.

Advance sale tickets are \$20 for veterans, military personnel, and non-military guests. Ticket sales open August 1. After October 2, tickets will cost \$25. For more information call the Aurora Center for Active Adults at 303-739-7950. Once again the E-9ers Association will have at least one table at the event.

A sponsor social and museum tours will run from 9:00 AM to 11:30 AM. Luncheon and the veterans salute will run from 11:30 AM to 1:30 PM. Lunch will be provided by Carrabba's Italian Grill.

SOCIAL EVENT

WHAT: Academy Lodge, Colorado Springs, CO.

WHEN: Friday - Sunday, August 26 - 28, 2011. Check in time 2:00p.m. Check out time 11:00 a.m.

We do not need to reserve rooms with a credit card if we check in by check in time. After checking in and getting settled, we have plans to go to the Falcon Club for what is called Final Friday at 3:30 p.m. The Falcon Club has a buffet with lots of good food. Cost for members is free; non members is \$10.00 each.

Saturday, August 27, 2011 - We have plans to go to Cripple Creek by car pool. Departure time 10:00 a.m. Return time 3:15 P.M.

Optional Activity: Melodrama at the Butte Theater on Main Street next to the Fire Department. Calamity Jane (a musical) will be playing from 1:00 P.M. to 3:15 P.M. General admission is \$15.75. Seniors, 62 and older is \$13.75. If you plan on attending make your own reservations by calling 719-689-3247 with your credit card as soon as possible.

Bob and Mardy will be staying at Family Quarters and will hold a Social Time on Saturday evening starting at 6:30 P.M. They will be providing the food and monetary donations to defray the cost of the food would be appreciated. Any suggestions for food items would be appreciated.

Sunday, August, 28, 2011 - For anyone who wishes to attend church. Protestant service is at 9:00 a.m. Catholic service is at 10:00 a.m. Following church services, we will take in the Sunday Brunch at the Falcon Club.

Please call your reservation for brunch to Mardy by August 24. Phone numbers are 970-506-0016 or 303- 587-2666. If no answer, please leave a message on either number.

ARMY REPORTS RECORD SUICIDE NUMBERS

As many as 32 soldiers killed themselves in July, the Army reported August 12, a figure that, if confirmed, would be the highest total since the Army began releasing the figures in 2009. The Army suffered 31 suicides in June 2010.

Among active-duty troops, three of 22 cases have been confirmed as suicides. Of ten potential suicide cases among reserve troops, all remain under investigation, the Army said. "Every suicide represents a tragic loss to our Army and the nation," Gen. Peter W. Chiarelli, vice chief of staff of the Army, said in a written statement. "While the high number of potential suicides in July is discouraging, we are confident our efforts aimed at increasing individuals' resiliency, while reducing incidence of at-risk and high-risk behavior across the force, are having a positive impact." "We absolutely recognize there is much work to be done and remain committed to ensuring our people are cared for and have ready access to the best possible programs and services."

July's figure was a significant jump from the 14 reported suicides in June. Since the start of the wars in Afghanistan and Iraq, more than 1,100 soldiers have taken their own lives, with the numbers escalating each year for the last six years. Last year alone, 301 soldiers committed suicide — a new record.

Military.com Article, Dated August 13, 2011

BARNEY FRANK: CREDIT RATING DOWN DUE TO MILITARY SPENDING

The senior Democrat on the House Financial Services Committee says the biggest reason the United States is seeing its credit downgraded is that it spends too much money being "the military policemen of the world." Rep. Barney Frank told CBS's "The Early Show" that reining in defense spending is "going to be my mantra" for the next few months.

The liberal Massachusetts Democrat says \$200 billion could be saved "without in any way endangering our security" by dialing back U.S. military involvement in the world, including operations in Western Europe. Frank says the military establishment has always had this "great momentum" in politics, but says the credit reversal "could change our thinking." Frank calls the military a logical target "if we're looking for something that breaks the mold" on spending.

Military.com Article, Dated August 8, 2011

STUDIES ON FEMALE VETS INFLUENCE VA HEALTHCARE

The large number of women serving in the military and in combat zones for extended periods is producing reams of data that will shape health care and programs for female service members and veterans for years to come, analysts say. With nearly 214,000 women on active duty and roughly 240,000 women having deployed to operational theaters since 2001, researchers are poring over information and interviewing female veterans to study a host of issues.

More studies have been produced on women in the military in the past six years than were issued in the previous 25, said Dr. Bevanne Bean-Mayberry, a clinician for the Veterans Affairs Center for the Study of Healthcare Provider Behavior. Researchers are examining topics ranging from the causes of homelessness for female vets, post-deployment health and treatment, traumatic brain injury in women, and female veterans' impressions of medical care received at VA health facilities. "Women are the fastest growing group of veterans in the VA health system. VA has to address women's health concerns," said Susan Wood, director of the Jacobs Institute of Women's Health at George Washington University.

A special edition of the journal *Women's Health Issues* published by the Jacobs Institute in July contains 18 articles related to female veterans' health studies, focusing on the changing demographics and demands placed on VA health care as a result of the surge of female veterans entering the system. VA provided funding to make this issue of the subscription-only journal available to the public. It is online at www.whijournal.com/supplements.

VA is likely to be pleased by some of the researchers' findings. For example, in one study, female veterans reported being highly satisfied with their medical treatment if they are seen at a VA facility containing a primary care clinic tailored to women. In 2008, VA began an initiative to ensure that female patients have access to a primary care provider who treats illness, provides gender-specific health care, and mental health services.

Researchers also found that female veterans who experienced sexual trauma on active duty reported very good or excellent satisfaction with their health care at VA facilities. According to researchers, patients in the general population who are victims of sexual assault or abuse tend to look less favorably on the general medical care they receive. But the female veterans in that study also said VA needed to improve communications between multiple doctors and health care providers — and between doctors and the patients themselves.

"Opportunities exist to educate providers on the special coordination needs of female veterans with histories of military sexual trauma," wrote Rachel Kimerling, a clinical psychologist with the National Center for PTSD at the VA Palo Alto Health Care System. Other findings published in the journal supplement include:

- Post-traumatic stress disorder is the most common psychiatric condition diagnosed for those with traumatic brain injury for both genders, although women are less likely to receive a PTSD diagnosis than men.
- Women with TBI also are twice as likely than men to receive a depression diagnosis and report more severe neurobehavioral symptoms related to their TBI than men — sensory problems, mood swings, memory processing and problem solving.
- More female vets smoke (29 percent) than male veterans (23 percent).

Air Force Times Article, Dated August 8, 2011

TRICARE STANDARD OFFERS OPTIONS

Tricare Standard gives beneficiaries the freedom to choose any Tricare-authorized provider, including those outside of the network. It is an ideal plan for families who are already receiving care from a non-network provider and do not want to change providers. Although beneficiaries will incur a higher cost share, Tricare Standard is a preferable option for people who want to pick from a larger provider pool. Families living abroad can qualify for the Tricare Overseas Program (TOP) Standard option. For more information, visit the Tricare Standard website at www.tricare.mil/standard or the TOP Standard website at www.tricare-overseas.com. To find a Tricare network or non-network provider, visit www.tricare.mil/providerdirectory.

Military.com Article, Dated July 25, 2011

VETS WITH PTSD, GOVERNMENT REACH SETTLEMENT

More than a thousand Iraq and Afghanistan veterans with post-traumatic stress disorder would be given lifetime disability retirement benefits such as military health insurance under the terms of a settlement reached between the government and the veterans. Attorneys for the veterans, the Justice Department, and the military jointly filed a motion on July 29 that spelled out the terms. The settlement must be approved by a judge to be final.

It also affects another thousand veterans who already had lifetime retirement benefits, but would receive a higher disability rating from the military. All of the veterans affected by the settlement would potentially receive new monthly disability compensation.

The settlement stems from a 2008 class action lawsuit filed in the U.S. Court of Federal Claims in Washington by veterans unable to serve, at least in part, because of the anxiety disorder who said they were illegally denied benefits. The law requires the military to give a disability rating of at least 50 percent to troops discharged for PTSD, but each of the plaintiffs received a disability less than that, said Bart Stichman, co-executive director of the National Veterans Legal Services Program, a nonprofit organization that represented the veterans.

As part of the lawsuit, the military in January 2010 said it would expeditiously review the cases. But attorneys for the veterans grew concerned about the pace in which the cases have been reviewed by military boards. One of the boards reviewing the cases was moving so slow, it was going to take seven years for all the cases to be reviewed, Stichman said. That led to settlement talks.

Timothy Martin, 32, a former specialist in the Tennessee National Guard, who struggles with panic attacks and nightmares related to his war service in Iraq, would benefit from the settlement. He said the health care benefits from the settlement would help with health care for his kids, ages 2 and 5. "The extra money, the back pay, the insurance, it's going to really help change our lives," Martin said.

Each of the veterans in the suit was released from the military between December 17, 2002, and October 14, 2008. PTSD is an anxiety disorder that can develop after a terrifying event in which a person felt physically harmed or threatened.

NVOA News Article, Dated July 29, 2011

PANETTA: MORE DEFENSE CUTS WOULD HURT SECURITY

Bigger defense cuts triggered by failed deficit reduction negotiations would have "devastating" effects on the nation's security, Defense Secretary Leon Panetta said August 16. Panetta said the Pentagon is prepared to make \$350 billion in cuts over the next 10 years, as agreed by Congress. But he warned of dangers to the national defense if bigger reductions are required.

The deficit compromise reached between the White House and Congress set up a special bipartisan committee to draft legislation to find more government cuts. If the committee cannot agree on a deficit-reduction plan by year's end or if Congress rejects its proposal, it would trigger some \$500 billion in additional reductions in projected national security spending. "That would have devastating effects on national defense," Panetta said.

In a joint appearance at the National Defense University, Panetta and Secretary of State Hillary Rodham Clinton made the case for preserving U.S. influence in the world by limiting budget cuts for defense, diplomacy and development. Clinton and Panetta were responding to questions posed by Frank Sesno, director of the School of Media and Public Affairs at George Washington University. Asked about the situation in Libya, Panetta said the anti-Gadhafi forces are on the move toward Tripoli and "regime forces are weakened."

Military Times Article, Dated August 16, 2011

WELCOME ABOARD!

The following new members have recently joined our association. Please welcome them into our elite group of E-9ers and spouses:

Nils Trulsson, MCPO (USN, Ret)
Keith Himmers, CMSgt (USAF, Ret)

Cookie Trulsson
Diane Himmers

STUDY: DRUG PRESCRIBED FOR PTSD IS INEFFECTIVE

A powerful anti-psychotic drug given to tens of thousands of veterans suffering from post-traumatic stress disorder (PTSD) is no more effective than a placebo against PTSD, according to a study released August 3. The study, published in the Journal of the American Medical Association, could diminish the widespread use of second-generation anti-psychotics to treat PTSD, said Dr. John H. Krystal, who led the study as director of the clinical neuroscience division of the Veterans Affairs' National Center for PTSD.

When anti-depressants fail to help servicemembers with PTSD, the drugs are often supplemented with second-generation anti-psychotics prescribed "off label" -- meaning their use in treating PTSD patients has not been approved by the U.S. Food and Drug Administration. "I do think doctors and patients and family members are going to see the study, and all are going to have some questions about the use of these second-generation anti-psychotics," Krystal said.

In 2009, more than 80,000 veterans with PTSD were prescribed second-generation anti-psychotics, Krystal and his colleagues said in the journal. Risperidone, which the FDA approves only for schizophrenic and bipolar patients, was thought to be the most effective drug in this class. But the new study -- the largest of its kind -- found that veterans with PTSD who were given risperidone fared no better than those who received a placebo.

Krystal's team looked at 267 patients at 23 VA outpatient medical centers from 2007 to 2010. Placebos were given to 134 patients, and 133 were given up to 4 milligrams of risperidone daily. Patients' PTSD symptoms were gauged using various scales and surveys, including a clinically administered measurement called CAPS -- a 30-item interview that is the gold standard in PTSD assessment, according to the VA.. An analysis of the data showed that there was "no statistically significant difference between risperidone and placebo in reducing CAPS total scores," the researchers wrote. "I think this has implications for a large number of veterans who have been on risperidone for a long time where the benefit might not be so clear," Krystal said. What's more, the drug did not reduce PTSD symptoms in terms of quality of life, depression, anxiety, or paranoia.

Risperidone-treated patients also complained of several of the drug's common side effects, including fatigue, sleepiness, increased saliva, and weight gain. The findings do not leave doctors entirely without drug options for PTSD. Selective serotonin re-uptake inhibitors -- a widely used class of antidepressants -- are approved for PTSD. Also, risperidone showed a small ability to help calm nerves and aid sleep. Other drugs that target those symptoms, such as prazosin, may prove to be more beneficial, he said. Krystal said more research is needed to examine the underlying brain chemistry of PTSD.

Military.com Article, Dated August 3, 2011

VA REACHES OUT TO RURAL VETERANS

The Department of Veterans Affairs is focusing on delivering quality health care to Veterans, including those in rural and remote areas. VA Secretary Shinseki recently traveled to rural areas across America to hear from veterans about what works -- and what can be improved. More information on his visits can be found on the White House blog at <http://www.whitehouse.gov/blog>.

Military.com Article, Dated August 15, 2011

DECA PROMOTES PREPAREDNESS

Commissaries are promoting preparedness items at reduced in prices as part of Defense Commissary Agency's (DeCA) severe weather promotional package that runs until October 31. Your disaster supply kit should include water, nonperishable foods, paper goods, cooking utensils and a manual can opener, a first-aid kit, cleaning materials, toiletries, pet care items, lighting accessories, a battery-powered or hand-crank radio, duct tape and scissors, copies of personal documents, cell phone with charger, family and emergency contact information, extra cash, emergency blankets, and maps of the area. For more information about the 2011 hurricane season or on ways to prepare for emergencies, visit the following websites: the National Oceanic and Atmospheric Administration (<http://www.cpc.ncep.noaa.gov>), the Centers for Disease Control (<http://www.bt.cdc.gov/disasters>), the Red Cross (<http://redcrosslv.org/disaster>), and the Federal Emergency Management Agency (<http://www.fema.gov>).

Military.com Article, Dated August 1, 2011

VETERANS GROUPS QUESTION BENEFIT CLAIMS VIA EMAIL

A seemingly simple idea — to have the Veterans Affairs Department send out emails to speed up notifications to veterans that their disability claims have been received — has drawn complaints from major veterans groups that say the idea would be more expedient but not necessarily fair.

Representatives of Veterans of Foreign Wars and Disabled American, testifying July 20 before a House subcommittee about HR 2383, the Modernizing Notice to Claimants Act, said they are concerned that veterans may be hurt by the bill, which would authorize electronic communication instead of regular mail to provide notice that VA has received a claim and has begun to process it. The problem for them isn't the electronic notice, but how people often deal with email and what rights they might be waiving if the notice isn't clear and veterans don't read the fine print.

Jeffrey Hall, DAV's assistant national legislative director, said veterans now receive a detailed and individualized notice from the VA that includes a form giving consent for VA to help obtain private medical records that might support a claim, requests for specific information to help process the claim, and a record of what steps have been taken so far. It also asks for crucial information to support a claim, and provides legal notice of VA's duty to help a veteran.

At the hearing of the House Veterans' Affairs Committee's oversight and investigations panel, Hall said he worries that electronic messages will be less detailed and more generic, and may not be fully read because the Internet is "an environment where users have become accustomed to checking the box on license and other disclaimer agreements without first reading them."

Ryan Gallucci, VFW's deputy national legislative service director, had similar concerns. One of his worries is that veterans might read the message and believe they have to collect their own medical evidence while waiving VA's duty to help. "Under this proposal, veterans may spend weeks and months collecting their medical evidence based on VA's encouragement to veterans to collect their own records," he said. "This will negatively affect veterans by making their effective date later."

Hall said it is possible that veterans could end up with lower disability rates because those filing electronic claims and getting electronic replies may be less likely to seek the help of veterans service officers, who understand the VA system and how to get the maximum benefit. Even so, both Hall and Gallucci like the general idea of VA communicating electronically with veterans, with Gallucci noting that "many veterans conduct business via email and web-based portals."

But for this specific purpose, Hall said electronic notification may end up becoming a tool to cut the disability claims backlog, but in a way that leaves veterans with something less than their full benefits. The only way to reduce the backlog is to create a system designed to get claims done right the first time, not just get them done quickly," Hall said. "As such, we believe that notice should be sent by the most effective means, not simply the most expeditious means. For many veterans, that may well be by way of electronic communication. Others may strongly prefer written communication."

Thomas Murphy, VA's compensation service director, said electronic notification "would significantly enhance" efficiency and "provide increased flexibility," and has the potential to "significantly shorten overall claim development time." Some technical changes are sought by the VA in the bill, but Murphy said the VA "fully supports" the measure. Rep. Bill Johnson, R-OH, chairman of the oversight and investigations subcommittee, is the bill's sponsor.

Military Times Article, Dated July 20, 2011

VA TO ALLOW WI-FI ACCESS

Responding to demand from health care personnel who work in its 152 hospitals, the Veterans Affairs Department will open its network to access by popular Apple iPhones and iPads in October, 2011. The agency also will soon allow its employees to access and use commercial cloud computing applications. VA underestimated the amount of concrete in its hospitals, which blocked Wi-Fi signals and will have to install more access points than envisioned in the original contract.

Military.com Article, Dated August 15, 2011

2011 CALENDAR



SEPTEMBER

- 5 Labor Day
- 11 Patriot Day
- 11 Grandparents Day
- 14 UVC Meeting
- 17 U.S. Constitution Approved (1787)
- 18 POW/MIA Recognition Day
- 18 U.S. Air Force Established (1947)
- 23 First Day of Autumn
- 25 Gold Star Mother's Day
- 28 Membership Meeting

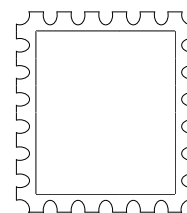
HAPPY ANNIVERSARY

- Sep. 1 1944 (67th) Robert & Lois Van Sciver
- Sep. 3 1949 (62nd) Joseph & Helen Gordy
- Sep. 5, 1970 (41st) Jerry & Debbie Gamache
- Sep. 15, 2001 (10th) Terri Sykora & George Zeiger-Sykora
- Sep. 29, 1973 (38th) Bob & Sandy Tomlinson

HAPPY BIRTHDAY

- 1 Rene Simard
- 5 Donna Tellgren
- 5 Buck Ward
- 6 Barbara Mills
- 8 Judy Ashby
- 8 Patricia Lee
- 8 Robert Oden
- 12 Herman Darden
- 12 Kalyn Nelson
- 13 Louise Malouff
- 13 Thomas Rochford
- 15 Joyce Aivalotis
- 16 Lillian Pierce
- 19 Marie Nuce
- 19 Yolanda Saville
- 20 Gayla Platt
- 21 David Howard
- 21 Manuel Maciel
- 23 Carrie Winningham
- 25 Claire Denlea
- 26 Carl Victor
- 26 Dorothy Preston
- 27 Ted Gembczynski
- 30 Dorothy McIlrath
- 30 Ronald Vigil
- 30 Joseph Gordy

The E-9ers Association
 Hank Kordek, Editor
 13155 E. Exposition Ave
 Aurora, CO 80012-3520



RETURN SERVICE REQUESTED

