From the Desk of the President

Dear Friends,

I have been truly blessed to serve as national president of Paralyzed Veterans of America since July 2014. It has been a time of tremendous growth and expansion across our programs.

We’ve titled this year’s report “A Lifetime of Service.” Just as I and other Paralyzed Veterans’ leaders and this organization continue our work toward improving the lives of all veterans, our commitment to them lasts a lifetime. You’ll read several examples of our unwavering dedication to America’s veterans in this report.

We continue to fulfill our mission to ensure that veterans receive all their due benefits from the Department of Veterans Affairs and provide important opportunities to effect change. For example, in 2014 we expanded our outreach to veterans’ caregivers. In many cases the caregiver is a spouse or parent who is also contributing to increased household expenses. We offer caregivers emotional support as well as benefits and claims assistance and much needed vocational resources, while also maximizing vocational opportunities for our veterans.

In Long Beach, California, after years of advocacy, we saw the fulfillment of a vision: a state-of-the-art long-term-care center for veterans with spinal cord injury or disease (SCI/D). The center is the result of a coordinated effort between Medical Services and Architecture, and will serve as a prototype for future VA facilities.

In sports we expanded our offerings, developing recreational opportunities to individuals with all levels of disability. We are extremely excited about the addition of boccia to our programs, which provides individuals with even the highest level of quadriplegia the chance to compete. Our chapters are now exploring wheelchair lacrosse, promoting clinics, and raising interest in this exciting sport.

Whether Paralyzed Veterans is securing benefit awards or delivering opportunities, none of it could be accomplished without your continued support. We are proud that our service begins at the bedides of newly injured veterans, and we remain partners to those veterans—as well as their families and caregivers—through every phase of their recoveries and lives. It would not be possible without individuals like you, who share and support our mission—individuals such as Jeffrey Carlton (see p. 46) who made a tremendous gift through his trust that will enable us to continue our work that is so critical to veterans with SCI/D. Equally important is the support of every individual donor and corporate sponsor who believes in the work we do and can take pride in knowing the impact that is made on so many lives.

As a paralyzed veteran, I thank you for providing this organization the foundation for the work we do every day and will continue to do throughout the lives of our members.

Al Kovach, Jr.
National President, Paralyzed Veterans of America
In Memoriam

Paralyzed Veterans of America experienced the loss of four members, leaders, ambassadors, and advocates for the veterans community over the past twelve months. We are saddened by their passing but honored to have known them and grateful for their years of work on behalf of veterans.

Frank J. Rigo
Former National Secretary

Frank J. Rigo passed away on February 18, 2015, with his family by his side. He was 91.


In September 1958, Rigo became a member of Paralyzed Veterans of America, serving the organization for nearly 54 years. In 1978, he served for nearly 26 years as Paralyzed Veterans of America's national secretary. After retiring from that position in 2002, Rigo was reelected national secretary in 2008, serving three additional years before officially retiring in 2011.

As national secretary, Rigo was responsible for the certification of Paralyzed Veterans of America members, chapter secretaries and Research Foundation members. He also served as an ex-officio member of the Paralyzed Veterans of America Resolution Committee. His most valuable work to the organization involved his accurate and meticulous record keeping of board of directors meetings.

An active lifetime member of Paralyzed Veterans of America, Rigo was a charter member of the organization's Arizona Chapter, where he served as chapter secretary for eight years. In 2003, he was presented with Paralyzed Veterans’ prestigious Speedy Award, which recognizes significant contributions to the organization and a spirit of service to improving the lives of America’s paralyzed veterans.

Rigo remained active at Paralyzed Veterans of America conventions and board of director’s meetings and teleconferences as recently as January 2015.

In addition to his work at Paralyzed Veterans, Rigo served for more than 25 years as executive manager of the Arizona and Phoenix Professional Photographers Associations and superintendent of the Photography Exhibition of Arizona at the Arizona State Fair.

Jerry L. Dugan
Former National Treasurer

Jerry L. Dugan died September 9, 2014, after being admitted to a hospital in critical condition near his home in Longwood, Florida, shortly after Labor Day. He was 74.

A native of Mount Vernon, Ohio, Dugan served under five presidents as Paralyzed Veterans’ treasurer from 1989–99. He was honored him with the Cliff Crase Award for Professionalism in 2010.

Dugan earned a bachelor’s degree in accounting from Franklin University in Columbus, Ohio, and went on to own a tax and accounting service.

He served in the Air Force (1958–60) and was honorably discharged with a service-connected injury. Dugan joined the Vaughan Chapter of PVA in Chicago and later transferred his membership to Central Florida PVA. A lifetime member of the Central Florida Chapter, Dugan served on its board of directors as chapter treasurer and president (1968–88).

His service on the national level was just as strong. Dugan was a member of Paralyzed Veterans’ Chapter Enhancement, Development Committee, Field Advisory Committee, and National Review Committee, and he also served as a national director.

Dugan also enjoyed helping his local community. He was director of the Orlando Recreation Center for the Disabled, a member of the Central Florida Hospital Planning Committee, and a member of the Orlando Amateur Radio Association.
Patterson “Pat” Grissom

Former National President

Patterson “Pat” Grissom passed away September 3, 2014, at the Department of Veterans Affairs Long Beach Healthcare System spinal-cord injury center, where he had been a long-term resident. He was 89.

Born Feb. 27, 1925, Grissom was a World War II veteran who served in the Army from 1944–46. He was paralyzed by a German bullet on March 26, 1945, in the village of Lamperthiem, Germany.

Grissom was one of PVA’s founding fathers and served as the organization’s third national president from 1950–51.

He was also a technical advisor to director Stanley Kramer for the 1950 movie The Men, starring Marlon Brando and Jack Webb. The film featured about 45 paralyzed veterans from the former Birmingham General Hospital in Long Beach. This movie proved to be important because it awakened the general public to the multiple problems faced by paralyzed veterans.

During our 55th Annual Convention in 2001, Grissom received the Speedy Award, the highest honor bestowed by Paralyzed Veterans of America, in recognition of his significant contributions to improving the lives of America’s veterans.

David Fowler

National Vice President David Fowler passed away February 18, 2014, after battling a respiratory illness. He was 53.

Fowler began his life of service advocating on behalf of veterans and all people with disabilities in 1985, when he joined the Texas Chapter of Paralyzed Veterans. A U.S. Army veteran, he enlisted in the service in 1983, where he became a paratrooper with the 82nd Airborne Division. In 1984 he suffered a spinal cord injury that resulted in paralysis from the shoulders down.

Shortly after his injury he began mentoring other spinal cord injured veterans with quality of life issues by serving as a “Peer Partner” through a Department of Veterans Affairs program. He was also a volunteer counselor serving veterans with new injuries in the Michael E. DeBakey Veterans Affairs Medical Center in Houston.

In 1991 he became actively involved in the Texas Chapter of Paralyzed Veterans of America, and over the years he became an ardent leader for the organization. Fowler was elected to the Executive Committee of Paralyzed Veterans of America and had served as a national vice president since 2011, a role he described as “very rewarding.”

In addition to his work with Paralyzed Veterans, he was a member of Disabled American Veterans, the 82nd Airborne Association, and the United/Continental Accessible Travel Advisory Board, where he educated the travel industry to understand the unique issues related to air travel for people with disabilities.

In 2006, Fowler was appointed by Gov. Rick Perry to the Texas Governor’s Committee on People with Disabilities. He was an active and influential member, including making policy recommendations to the governor and legislature related to veterans services in Texas. Fowler also served on the Houston Commission on Disabilities and other committees that addressed accessibility in local stadiums and the Metrorail transit system.

Despite the severity of his injury, Fowler participated in a variety of adaptive sports. In 20 years, Fowler never missed the National Veterans Wheelchair Games (NVWG) in which he competed in power soccer, slalom, wheelchair races, and power relay events—and used adaptive equipment to bowl. After attending his first NVWG, Fowler said he thought, “If I can do this, what else can I do? How can I pay back this organization that is improving my life?”

All are deeply missed, and our sympathies go out to family and friends of these icons of our organization. Paralyzed Veterans will honor their memory by continuing to support our nation’s paralyzed veterans to the fullest extent of our abilities—just as they did.
“Paralyzed Veterans of America is certainly one organization that has initiated, led, or facilitated actions that have made improvements in laws and regulations that affect the daily lives of veterans and citizens with disabilities.”
Government Relations

For 68 years, Paralyzed Veterans of America has been answering the needs of America’s veterans with spinal cord injury or disease (SCI/D) and improving the lives of all people with disabilities through our programs and presence on Capitol Hill and in public projects. For 35 of those years, Doug Vollmer, U.S. Navy veteran, directed our efforts to advocate and ensure legislation that supports the needs of veterans and the disability community. Now retired, he reflects on some of the accomplishments witnessed in those years.

From its earliest days Paralyzed Veterans of America recognized that government would play a critical role in the lives of its members. Immediately following its organization, the leadership began petitioning Congress and the Veterans Administration (now the Department of Veterans Affairs/VA) to address the unique needs of veterans with SCI/D. By the mid-1960s Paralyzed Veterans had established a permanent office in Washington, DC, and over the ensuing years this presence has grown into today’s Government Relations Department.

In 1979, I joined the staff of the Legislation Program, and for the past 25 years headed the Government Relations Department until my retirement in spring 2014. During this period I came to realize that no one organization, much less one individual, can be solely responsible for the passage of legislation or executive branch actions but an individual or organization can be the leader or catalyst for a movement that brings about such initiatives. Paralyzed Veterans of America is certainly one organization that has initiated, led, or facilitated actions that have made improvements in laws and regulations that affect the daily lives of veterans and citizens with disabilities.

In spring 1979, Paralyzed Veterans was celebrating its recent court victory in ensuring that all stations in the new Washington, DC, Metro system would be accessible with elevators, both those then under construction and all future ones in the system. At the same time, due to increases in resources, the national staff was growing both in numbers and in sophistication. Our national advocacy (disability rights) and legislation (veterans) programs also grew and were taking on more and more challenges.

In 1983, Paralyzed Veterans sued the Civil Aeronautics Board (CAB) over the abusive treatment of and disregard for the rights of people with disabilities flying on commercial airlines.
At that time, airlines could—and did—impose inconsistent and arbitrary rules that often made air travel difficult and demeaning for people with disabilities. The court ruled for the CAB; the same thing occurred at the appellate level and the Supreme Court. In each instance the courts ruled that current law didn’t address the issue and basically said, ‘Take it to Congress.’ And so we did, as well as partnering with other organizations with similar concerns, and in a matter of only a few months secured passage of the ‘Air Carrier Access Act.’ This law secured the rights of disabled passengers and helped set the stage for larger efforts to protect the rights of people with disabilities, and positioned Paralyzed Veterans of America as a leading voice for both accessible transportation and the broad scope of rights.

Beginning in the mid-1980s the disability community was aware of the need for sweeping improvements in the laws and programs essential for enhanced quality of life and the ability to maximize independence. In the 98th and 99th Congresses efforts were made to secure legislation overturning multiple court decisions that had whittled away existing protections and programs. These efforts met with no success but brought about awareness within the disability community that a broad, inclusive coalition was necessary to move things forward.

In late 1988 some organizations, including Paralyzed Veterans, came together to start crafting the outlines of comprehensive legislation necessary to level the playing field for disabled citizens. In 1989 during the first session of the 101st Congress, the ‘Americans with Disabilities Act’ (ADA) was introduced. For the next year and a half, efforts were made—on an almost daily basis—to secure passage of this far-ranging legislation with final passage coming in July 1990, and it was signed into law July 26. While the law was not perfect and has required amendment over the years, it has proven to be the cornerstone ensuring the rights of disabled Americans and a model for the rest of the world.

Efforts addressing the needs of veterans were equally if not more intense over the years. For Paralyzed Veterans, quality, accessible health care had been, and continues to be, the number one priority. The organization has addressed issues of eligibility, cost containment, staffing, research, infrastructure, and all the myriad elements that are essential to a huge, first-class medical system.

Every year during the annual budget/appropriations process in Congress, Paralyzed Veterans and the other major veterans service organizations (VSOs) have had to fight to secure adequate resources to meet the needs of those individuals who have served the nation in uniform.

During every Administration and in every Congress, in my experience, there has been some effort to cut spending or inadequately provide for veterans care and benefits. In 1985, to strengthen our voice on Capitol Hill, Paralyzed Veterans brought together three other major VSOs to craft The Independent Budget, a ‘Budget for Veterans by Veterans,’ that we believe was free of political trade-offs and realistically enumerated what resources were required to meet the nation’s commitment to veterans.

For the past 30 years The Independent Budget has been produced and disseminated to decision makers in Congress and the Executive Branch and has come to be recognized as a legitimate assessment of funding requirements, necessary management initiatives, and legislative action.
Paralyzed Veterans’ Government Relations Department had logged long hours during the spring and summer of 2014 when the Department of Veterans of Affairs came under a firestorm of scrutiny for long waiting lists for veterans seeking care at VA medical facilities. While the media called for resignations and Congress was under public pressure to pass legislation that would address the revealed widespread systemic problems, Paralyzed Veterans was working with all of them to ensure our members’ voices were heard.

In May 2014, following reports of long wait times for access to care and alleged veterans’ deaths at the Phoenix VA Medical Center, the Inspector General released a preliminary report that identified systemic problems that existed throughout the entire VA health care system. At the same time, VA initiated an internal audit of its entire health care system. VA released its findings in June 2014, revealing approximately 57,000 veterans across its health care system had waited more than 90 days for their first appointment.

After both reports resulted in the resignation of Secretary Eric Shinseki, Congress’s solution to the issues was legislation that would essentially make it easier to contract for services in the private sector. With health care as the cornerstone of Paralyzed Veterans’ mission, the government relations team and its partners worked around the clock with legislators and concerned parties and testified before Congressional committees during the crafting of the “Veterans Access, Choice and Accountability Act of 2014.” While the bill received bipartisan support, the bill is not wholly in the best interest of Paralyzed Veterans members.

VA Health Care System Comes under Fire

In reflecting on 35 years of government relations work on behalf of veterans and people with disabilities, I rest well knowing I have played a role in improving the lives of millions of people, but I still know there remains much to do. I also know that any success to which I was a part only occurred because of the truly talented, professional, and dedicated people with whom I worked, the rightness of our mission, and the sacrifices of fellow veterans.

—Doug Vollmer
“The viability of the VA health care system depends upon a fully integrated system where all of the services support each other,” said Associate Executive Director Carl Blake. “Our members depend on the spinal cord injury system of care, one of the many specialized services that also includes amputee care, blinded care, polytrauma care, and more. Those kinds of services cannot be duplicated in the private sector.”

Paralyzed Veterans will continue to work toward legislation in the 114th Congress that strengthens and supports the quality of the VA health care system instead of encouraging veterans to seek medical care outside of the system.

**Social Security Entitlement Reform**

Social Security entitlement reform continued to be a front-burning issue in fiscal year 2014 and will carry over into the 114th Congress. Proposed curtailments to the overall program include 20 percent cuts to the Disability Insurance (DI) Trust Fund benefits. “If balance isn’t restored to the DI trust fund, it could be depleted by 2016,” explained Susan Prokop, senior associate director of advocacy for Paralyzed Veterans. “In collaboration with a coalition of like-minded organizations, Paralyzed Veterans will continue to work with Congress on this issue, advocating for a reconfigured formula that will provide a long-term solution to a program that many veterans depend upon.”
Also threatened this fiscal year was the method by which cost-of-living adjustments are made in Social Security, veterans compensation, and other benefits. She warns that attempts to reduce benefits through changes in the Consumer Price Index will likely return in 2015, but that the team was successful in forestalling this in the 113th Congress. “Sometimes you can measure success in things that get stopped, and preventing cuts that would affect veterans and military retirement benefits is undoubtedly a success for our members.”

Just prior to the close of the fiscal year 2014, Congress passed a major piece of legislation that addresses employment opportunities (now P.L. 113-128). With bipartisan, bicameral support, the “Workforce Innovation and Opportunity Act” reauthorizes all of the nation’s workforce development programs and contains many disability provisions, including funding to help service- and nonservice-connected veterans and people with disabilities navigate multiple service programs and activities. This act also gives priority of service for veterans inside state job development systems. Prokop notes the new law affects job training and development centers, as well as the system of state vocational rehabilitation agencies, calling it a “significant accomplishment.”

**Convention on the Rights of Persons with Disabilities**

Paralyzed Veterans was back to work on the Convention on the Rights of Persons with Disabilities (CRPD) in fiscal year 2014, continuing to push for the Senate to ratify the treaty that would promote and protect the rights of people with disabilities in more than 150 countries. Since the U.S. signed the CRPD in 2009, Lee Page, senior associate director of advocacy, has been working to push it ahead in Congress. “The treaty calls on other countries to do what America did in 1990 in passing the Americans with Disabilities Act: ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability,” he said. Paralyzed Veterans will continue to advocate for it in the next Congress.

**Public Transportation Accessibility**

Twenty-five years after passage of the American Disabilities Act (ADA), Paralyzed Veterans continues to work with Amtrak to bring rail travel to compliance. In 2014, Paralyzed Veterans worked with Amtrak to upgrade bridge-plate designs that provide safe and efficient boarding for disabled passengers, and strategized on level boarding for all Northeast corridor stations. There is still a lot to do but we’re working closely with the rail provider to get all stations compliant with the ADA.

Through partnerships with airlines, airline contractors, and the TSA Advisory Board, we represent members on issues pertaining to boarding assistance, chair stowage, and streamlined security procedures. Over the past two years, multiple training sessions with boarding assistance personnel at five airports across the nation were coordinated. Paralyzed Veterans is working with airline partners to educate and define the needs of the disability community for safe, efficient, and dignified air travel. Training will continue in 2015 with input from the Department of Transportation, Aviation Consumer Protection Division.
Veterans Benefits

In 2014, our 74 service officers made contact more than 192,000 times pursuant to a claim, appeal, or intervention for more than 60,000 veterans and their families nationwide.

Our efforts, which are always free of charge, resulted in monetary and other awards from the Department of Veterans Affairs totaling more than $290 million in new awards and ancillary benefits and more than $1 billion in total benefits secured—new, retroactive, and recurring awards—for all clients. Additionally, Paralyzed Veterans’ service officers garnered an average award of $2,850 per month for clients, more than the combined average for the next two highest veterans service organizations (see figure 2).

Such benefits include adaptive equipment, auto grants, burial grants, education, insurance, and others. These benefit awards can change veterans’ lives immeasurably in the process, providing them the opportunity to move forward. In addition, our efforts to serve spouses, family members, and caregivers became a renewed focus, as we work to provide comprehensive services for our nation’s veterans—and that includes the people who care for them—to maximize their independence.

Total Awards Secured from VA for Veterans:

$290,179,063*
Paralyzed Veterans of America: A Lifetime of Service
2014 Annual Report

Monetary Benefits Secured for Veterans in 2014

**Figure 1**

Assisting All Veterans

Amount (in millions)

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
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</thead>
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<tr>
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<tr>
<td>Housing</td>
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<tr>
<td>Adaptive Equipment</td>
<td>$22,308,679</td>
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<tr>
<td>Spouse &amp; Dependent Benefits</td>
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<tr>
<td>Low Income Assistance</td>
<td>$4,191,433</td>
</tr>
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**Top Award Categories**

**About VA Benefits**

*Disability compensation* is a tax-free monetary benefit paid to veterans with disabilities that are the result of a disease or injury incurred or aggravated during active military service. Paralyzed Veterans of America seeks this and other monetary entitlements, such as unemployment income, debt waivers, and traumatic injury assistance, for eligible veterans.

*Supplemental health* entitlements provide comprehensive support to optimize the health and independence of veterans with disabilities. We pursue automobile grants, auto adaptive equipment installation, durable medical equipment and assistive devices, grants for home adaptability, and other health benefits to help veterans and their families thrive and enjoy full access.

*Survivor benefits* are available to the spouses and unmarried children of deceased veterans, including financial assistance with burial expenses and monetary compensation.

Pension benefits help unemployed veterans with advanced age or disabling conditions deal with financial challenges by providing *low income assistance*. This includes special benefits and medical expense offsets for catastrophically disabled veterans.

*Insurance and education benefits* offer eligible veterans, spouses, and dependents the stability, security, and economic opportunity to enjoy self sufficiency and full quality of life after service. We help veterans obtain life and mortgage insurances as well as education entitlements to assist with the pursuit of higher education.
Ensuring that all veterans, from the Greatest Generation to the latest generation, receive the benefits their service has earned them is our utmost priority—even if it takes years and the combined efforts across several Paralyzed Veterans departments.
Robert Butterfield served 20 years, including combat postings in the Persian Gulf. Our service officers and staff attorneys worked with him for more than 15 years helping to gather evidence and keeping his claim active after VA refused to recognize a relationship between his service in the Gulf War and his disabling spinal cord condition that resulted from a sudden, unexplained demyelinating of his spinal cord leading to quadriplegia.

When Robert was denied at the local level, Paralyzed Veterans took his claim to the Board of Veterans’ Appeals. Although his initial appeal was denied by the Board, the Office of General Counsel represented him before the U.S. Court of Appeals for Veterans Claims, where a remand was secured for additional development. His appeal returned to the Board, where Paralyzed Veterans’ attorneys argued for and obtained a grant. Robert was found to be entitled to service-connected benefits because he suffered from a medically unexplained chronic multisymptom illness related to his service in the Persian Gulf, often referred to as Gulf War syndrome.

Once the Board granted Robert’s appeal, however, the Department of Veterans Affairs spent more than a year adjudicating it. He once again turned to Paralyzed Veterans for help. Jason Stephenson, Veterans Benefits’ director for the West Region, and service officers Joni St. Pierre (Denver) and Kenny Dison and Susan Sullivan (Sacramento) advocated to ensure that VA assigned the appropriate ratings and that Robert received all the compensation due to him.

But once it was granted, Jason reviewed and found the decision to be in error, lowering the level of compensation and certain additional benefits that Robert was to receive. Jason kept in regular contact with Robert, even speaking to him on weekends. Jason, Joni, Kenny, and Susan’s relentless attention to the case ensured that VA took appropriate action to correct what was needed.

Service Officer Allen Williams (Los Angeles) and the Northwest area manager, Michael Killen, also became involved when the case was transferred closer to Robert’s residence. Allen assisted with determining and documenting the final overall percentage of one of Robert’s disabilities and also assisted him in obtaining what is known as concurrent receipt—retirement pay along with VA disability benefits.

It took 17 years, but Robert finally received all of his earned benefits. “I have to give a lot of credit to Paralyzed Veterans of America,” he said at the time of the award. “You need people like them on your side because they really know the ins and outs of the system.”

“Had we not asserted ourselves, Mr. Butterfield’s appeal would have still been pending.” Jason noted.

“The team from Paralyzed Veterans has been outstanding. I would not have been able to fight this battle without them.”

—Robert Butterfield, U.S. Air Force

Our advocacy and ongoing efforts ensured that Robert’s appeals, authorization payment, proper percentage of disabilities, and concurrent receipt were all accurately resolved so he could finally receive the retroactive payments he was owed. The intensive annual training and study of VA benefits and regulations that service officers undergo, along with testing, enables them to spot errors and recognize when a veteran has received a faulty VA decision. Then teamwork, tenacity, and persistence take over, as in Robert’s case, until the errors are corrected.

“If not for Paralyzed Veterans of America and the hard work of people like Diane Rauber, Linda Blauhut, Jason Stephenson, and Allen Williams, I might still be waiting.” Robert said. “I spent a lot of time working on my own claim, but there’s no way you can do it all yourself. The team from Paralyzed Veterans has been outstanding. I would not have been able to fight this battle without them.”
Veterans Benefits, the largest program area of Paralyzed Veterans of America, works through a nationwide network of 69 offices primarily co-located within VA SCI centers. This proximity makes our service officers first responders, who routinely oversee their care in Department of Veterans Affairs, ensure that they know and receive their benefits, and discuss options for education and employment—all from the bedside. Paralyzed Veterans of America service officers, many with spinal cord injury themselves, are often the first indicator for the newly injured that life goes on. And there the partnership for life begins.

Because of the extensive training and testing our service officers undergo annually, they are recognized experts in VA benefits and the claims and appeals processes. Because we specialize in assisting veterans with the most catastrophic injuries—and therefore the most complex claims—the work of our Veterans Benefits Department requires the ability to interpret medical evidence and an extensive knowledge of vast regulations affecting veterans with spinal cord injury. For a paralyzed veteran and his or her family, navigating a vast federal bureaucracy is a daunting prospect, but receiving due benefits, such as disability compensation, as quickly as possible is critical to the resumption of life.

Increasingly, we’re helping address the unique challenges of the post-9/11 generation of veterans, who are now facing numerous changes within VA in terms of administering benefits and delivering health care, particularly prosthetics. Ensuring that all veterans, from the Greatest Generation to the latest generation, receive the benefits their service has earned them is our utmost priority—even if it takes years and the combined efforts across several Paralyzed Veterans departments.

### Average Monthly Benefit Award Per Client

<table>
<thead>
<tr>
<th>Organization</th>
<th>Average Monthly Benefit Award Per Client</th>
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<tr>
<td>Paralyzed Veterans of America</td>
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<td>Vietnam Veterans of America</td>
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<td>Disabled Veterans of America</td>
<td>$1,360</td>
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<td>Veterans of Foreign Wars</td>
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<td>AmVets</td>
<td>$1,128</td>
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<tr>
<td>American Legion</td>
<td>$1,123</td>
</tr>
</tbody>
</table>

Figure 2
Focus on Employment

Operation PAVE (Paving Access for Veterans Employment) continues its vital work ensuring that veterans with catastrophic injury are equipped for civilian employment, providing connections to top employers, and working with employers to help them understand the value veterans bring to a workforce. In 2014, Paralyzed Veterans opened its eighth PAVE office, located in Chicago. The office will serve veterans in Illinois, Indiana, Ohio, and Missouri. More than 2.5 million veterans reside in those states.

PAVE assists veterans in underserved states with service- and nonservice-connected disabilities by eliminating or reducing their barriers to employment. The program has helped veterans navigate complex social issues through counseling and guidance, education, training, housing, employment, and acting as a liaison between the benefits departments of VA. PAVE services are also provided to spouses, dependents, and caregivers.

Currently, PAVE counselors are working with more than 700 veteran clients to secure career opportunities. PAVE placed 179 clients* in 2014, with a goal of placing one veteran, caregiver, or family member per day in 2015.

*figure excludes training and vocational placements, such as internships
Roberto Medinaroque, U.S. Marine Corps

Roberto Medinaroque served in the U.S. Marine Corps from 1992 until 2010, completing tours in Haiti, Bosnia, Liberia, and Iraq before being stationed at Fort Leonard Wood in Missouri. While there, he was diagnosed with post-traumatic stress disorder (PTSD). Approximately eight months after this diagnosis, Roberto felt he was managing the condition well. However, he suffered a setback accompanied by depression when he was diagnosed with multiple sclerosis (MS), a disease in which the immune system attacks the protective sheath (myelin) that covers the nerves. Myelin damage disrupts communication between the brain and the rest of the body. Due to the MS diagnosis, Roberto was forced to medically retire.

“It was a low point for me,” Roberto recalled.

Eventually, Roberto decided to focus on his education. He earned a bachelor’s degree in business administration with a concentration in technology management in June of 2013. During this time, Roberto worked two jobs to make ends meet—at the James A. Haley Veterans Affairs Medical Center as a housekeeping aide and at Centurum, Inc. as a recruiter. Roberto worked long hours and yearned for employment that would better fit his skills and capabilities as he continued to further his education, and he enrolled in a graduate program.

“Paralyzed Veterans of America helped me go from working in housekeeping at a VA hospital to a job in Human Relations.”

During this time, Roberto came to Paralyzed Veterans of America in hopes of establishing a service connection for his MS diagnosis. Initially, because he was not paralyzed, Roberto was unsure if Paralyzed Veterans was able to represent him, but was assured of our assistance after meeting with National Service Officer Stephen Bush. Like many veterans, Roberto did not realize that Paralyzed Veterans will assist any veteran in need.

As Stephen was assisting him with benefits, the topic of employment came up, and in June of 2014, Roberto began working with Elizabeth Goldin, vocational rehabilitation counselor with Paralyzed Veterans of America. Roberto expressed his desire to work in human resources (HR) at the VA medical center, saying, “I want a professional job in which I am able to use my qualifications and continue to advance.”

Together, Elizabeth and Roberto began the process of job development, vocational counseling, and preparing Roberto to gain employment in human resources. While doing so, he continued to work on an advanced degree, eventually completing an MBA in August of 2014.

Meanwhile, Elizabeth assisted Roberto with actively searching for federal employment in HR. For five months, Elizabeth and Roberto worked closely together with a goal of utilizing Roberto’s Schedule A status, a special hiring authority available to federal agencies to hire and promote individuals with disabilities, to gain federal employment.

“It was a process,” Elizabeth said. “All of us did our parts, and on October 6, 2014, Roberto started his new job at the James A. Haley VA Hospital as a human resources specialist. Roberto came to the office to thank us all.”

“I wanted to find a job that enabled me to use my education, and I wanted to work within the VA system,” Roberto said. “Thanks to Paralyzed Veterans of America, I was able to achieve both goals.” Having done so, he says, has been truly fulfilling and has helped him in several ways, including management of his PTSD and depression.

“I have a new outlook now,” Roberto says. “I am doing what I want to do professionally, and I finally feel appreciated as an employee. I want other veterans who struggle with the same disabilities to know that it is possible.”
**Focus on ALS Veterans**

The spinal cord disease, amyotrophic lateral sclerosis (ALS) or Lou Gehrig’s disease, is a progressive debilitating disease, leading to limited mobility, reduced respiratory function, paralysis, and death. Muscle weakness is a hallmark initial sign in ALS, which advances into abnormal fatigue of the arms and/or legs and difficulty with speech, swallowing, chewing, and breathing. When the breathing muscles become affected, ultimately, the patient will need permanent ventilatory support in order to survive.

Because of factors yet to be identified by the medical community, a correlation exists between military service and a higher incidence of ALS occurrence. Since ALS was approved as a compensable, service-related disease, Paralyzed Veterans of America has expanded its efforts to identify and assist these veterans whose quality of life often depends on swift receipt of benefits.

The rate at which ALS progresses varies significantly, affected by physiological variables and the severity of individual nerve damage. The average survival expectation is three to five years, though many can survive ten-plus years with the proper care. Capt. Mark Reese, 52, was diagnosed with a slow-progressing form of ALS in 2013 and is partnering with Paralyzed Veterans to ensure he has the best care and quality of life.

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**Mark Reese, U.S. Air Force (Ret.)**

In 1992, after five-and-a-half years in the U.S. Air Force, including stints in pilot training, missile launching and personnel management, a reduction in force saw Mark Reese unemployed and looking for a way to support himself. He spent the next five years trying to make ends meet with several different retail jobs, as he applied for positions that would lead to the next phase of his career. While on a daily run, a friend suggested that Mark apply to the Drug Enforcement Agency (DEA), which turned out to be the right opportunity for him.

Mark began the two-year application process and in 1999 was in training to become a DEA special agent. But during a qualifying run at the Quantico training facility, his right foot failed to lift mid-stride, and he fell. Unable to get the foot to respond, Mark hopped the rest of the course on his left foot.

After undergoing surgery for compartment syndrome and trying unsuccessfully to qualify four more times, Mark accepted a less physically demanding position as a DEA diversion investigator in 2001. It wasn’t until a year later that doctors thought they’d found the reason for Mark’s continued “foot-drop” occurrences and occasional leg weakness while running, biking, and climbing: they diagnosed him with multiple sclerosis (MS).

“**The people at Paralyzed Veterans tell you what they’re going to do and they do it. The services they offer are invaluable to someone in my condition. I don’t know where I’d be without them. I’m truly very thankful for them.**”

—Capt. Mark Reese, U.S. Air Force (Ret.)

Over the next 11 years, despite receiving medical care for MS and maintaining an active lifestyle, Mark’s symptoms were intensifying and began to affect his personal and professional life. “My right leg would shake while rock climbing, or my foot would drop off the pedal while riding my bike,” Mark said. “As an athlete, I just wanted to push myself to keep going, but my body just wouldn’t cooperate.”
He began to rely on a cane while out in the field on work assignments. Still, he struggled with the fatigue and weakness, eventually falling while on a job. The DEA organized the purchase of a scooter for him to use while at work and finally in 2011 transitioned him to an in-office role as a program analyst.

It wasn’t until 2013 that Mark learned the correct and more serious diagnosis of ALS. Knowing the severity of the disease and its correlation with military service, his doctors told him he needed an advocate.

“They advised me to visit the VA to discuss my care and benefits,” he said. “But they told me to talk to Paralyzed Veterans of America first. They said Paralyzed Veterans would take care of everything, and they were certainly right.”

Mark began working with Kenny Dison and Susan Sullivan, national service officer and secretary at the Paralyzed Veterans Sacramento Service Office. They helped him complete and file the forms for a power chair and an adaptive vehicle so he could continue to work as the muscle weakness became more severe. They helped him obtain the adaptive housing grants so he and his wife could stay in their home.

“It’s uncanny how well they know the system,” Mark said. “Susan and Kenny navigated everything with the VA. As a result, I have never had any issues getting any services that I’ve needed.”

In the year and a half since Mark’s ALS diagnosis, Paralyzed Veterans has continued to assist him. As weakness increased in his legs and he no longer had mobility in his right hand, he was unable to continue driving. The long days at work added to his fatigue, and he didn’t have enough stamina by the weekend to enjoy life the way he once did. Paralyzed Veterans knew his options and advised him that his diagnosis qualified him for full early retirement from the DEA and then helped him file for authorization.

“They know the pitfalls, and they know where to go and what to do to get results. You can either get frustrated, or you can follow the advice of the people who know what they’re doing,” he said.

Paralyzed Veterans is now working to help Mark obtain a grant to add a larger, more accessible bedroom and bathroom to his home should the progression of his disease necessitate a wheelchair or hospital bed for his ongoing care.
The Paralyzed Veterans of America Publications Program continues to provide the most critical and essential news and information for people with spinal cord injury or disease (SCI/D), their family members, and caregivers. Provided free to all members of Paralyzed Veterans, PN magazine ensures that its readers are equipped with the knowledge of advances in spinal cord medicine, healthcare, employment, research and technology, legislation and regulations affecting veterans and the disability community, as well the activities of our organization. In addition, the bimonthly four-color magazine regularly covers travel, finance, sports, caregivers, sexuality, and other topics.

Coverage of developments in the Department of Veterans Affairs, from rules changes to special programs, is enhanced by reports on health studies affecting veterans, employment trends, career fairs, commemorative events, and much more.

Adaptive sports and recreation are often the motivator that propels newly injured veterans back into life, empowering them with confidence, newly realized abilities, and with myriad healthful benefits, including strength, weight control, and assuaging symptoms of depression and post-traumatic stress. In addition to coverage in PN, adaptive sports are the exclusive focus of Sports ‘n Spokes (SNS) magazine. SNS brings a world of possibility to individuals with SCI/D and covers the full range of adaptive sports and recreation activities, as well as the programs of Paralyzed Veterans of America that engage our members and the disability community.

Both magazines embody the power of the spirit, the professional contributions to society, the personal story within each person, the practical resolve to carry on, and even the playful nature of the soul. Robust websites for the two publications feature language translation, video, and social media communities.

PN enjoys a worldwide readership of 78,600; 17,100 for SNS. In addition, the robust and interactive online editions receive hits from all over the world, and, because of the language translation feature, are the leading sites for users having an interest in the areas that we cover.

Paralyzed Veterans of America continues to reach out to veterans and the disability community of the world, expanding the opportunities for them to enhance their lives. Our publications’ print and digital efforts are vital tools in that mission.
Air Force veteran Bobby Adams recently celebrated his 79th birthday with his wife of 14 years, Thedra (the couple has been together more than 30 years). Bobby asked her to marry him shortly after complications during surgery for spinal stenosis (a compression of the spinal cord) resulted in high-level quadriplegia, with paralysis from mid-neck down.

In the years since, Thedra, like many spouses and family members of veterans with spinal cord injury, has served as primary caregiver. For caregivers, providing the full range of activities of daily living can be daunting, overwhelming, especially in the initial stages when adjusting to this new role. There are questions to be answered, responsibilities to take on, plans to make. And, when the individual has a high level of quadriplegia, the care itself becomes a full-time job.

At Paralyzed Veterans of America, we have long recognized the service of these “silent” heroes, and have included them in our priorities. Just as for veterans, advocacy for caregivers begins at bedside, explaining outcomes, Department of Veterans Affairs’ benefits and processes, providing assurances, answering questions, and liaising between family and the medical team.

There may be education needs, social work, and psychological support, or ensuring they get respite care (in-home care or temporary hospital care that relieves the caregiver for limited periods of time) when needed.

“Bobby was originally hospitalized for three or four months after the surgery that injured him. He was near critical when he was transferred to the SCI unit. For months Bobby was very sick. It was (Paralyzed Veterans) that helped me know what I needed to do—where to go and who to talk to. They stayed on top of Bobby’s care and provided me with information about everything. This was important at the time because just as Bobby was traumatized—so was I. Paralyzed Veterans provided the support I needed.”

Said Glen Middleton, a former Paralyzed Veterans service officer for the Adamses, now hospital liaison officer for our California chapter, explained, “The role of a service officer, first off, is to support the veteran, but in supporting the veteran many times we have to support the caregiver, especially if a spouse or child of a veteran.”
During the early stages, Thedra said, Paralyzed Veterans played an integral role providing educational, informational, and moral support. “One thing I realized was that there were few people we could talk to that really understood. Our reps were good listeners with big shoulders that understood us. They definitely helped make existence in our situation livable,” Thedra said. “Two of Bobby’s reps were paralyzed and were well aware of what it was like and could personally relate.”

One of those early representatives was Sherman Gillums, current deputy executive director, who was then a service officer. “After Bobby became paralyzed following surgery, we attempted to secure benefits for him under a 1151 claim (disability due to VA medical error), but we were unsuccessful,” Gillums said. “Most of our advocacy after that was related to ensuring he received quality care. In one instance, VA couldn’t perform an eye test on him because of his head positioning, and we had to intervene to ensure he could be adequately examined through alternative means.

“I worked with Thedra as well. What was remarkable was the fact that despite Bobby’s high level of injury, he was always extremely well kept (dressed, shaven, etc.), and that seemed to contribute to his optimism. She was a vocal advocate for him, assertive and protective.”

After the surgery and resulting paralysis, Bobby spent the next 16 months in the hospital undergoing intense rehab. Thedra was constantly monitoring his care and turning to Paralyzed Veterans any time he had a need or a question. “All we had to do was mention what we needed, and they were on it,” she said, including assisting in Bobby’s return home by ensuring that the couple obtained the needed home care equipment. Thedra then assumed the role of caregiver full-time.

With such a high-level injury, Bobby, who is also on a ventilator, required Thedra’s assistance with every activity: medications, bathing, feeding, dressing. She learned wound care to ensure against infection. Managing his care took all her time and energy.

In December 2012, Bobby was moved to the spinal cord injury unit at the San Diego VA medical center where he could get full-time care. While overseeing Bobby’s care and advocating for him would still be Thedra’s prime concern, the next step in their journey will be for Thedra to re-establish her identity and ensure self-sufficiency, which included exploring options for re-entry into the workforce through Paralyzed Veterans Operation PAVE (Paving Access for Veterans Employment).

“I’ve realized that the VA will not take care of me forever if something were to happen to Bobby. It’s more evident now than ever that I need to prepare for whatever the future holds for us,” Thedra says.

She has been consulting with Joan Haskins, Paralyzed Veterans’ vocational counselor, about potential employment. A college graduate and a veteran, Thedra believes there are many opportunities for which she would be a good fit. “I’m very versatile. I could work from home or part-time, but I need flexibility to get to the hospital,” she said.

“Joan Haskins worked her butt off, gave me leads, set up interviews. It wasn’t that (Paralyzed Veterans) didn’t come through for me; the jobs just didn’t come through.”

Said Haskins, “Thedra faces the plight of many job-seekers who have put their vocational lives on hold to care for a family member and then reach a point when they want to see what options they have in the world of work. Oftentimes, despite solid skills and interests, work opportunities in a community can be limited or the caregiver may need a very select set of circumstances.

“The Paralyzed Veterans’ vocational rehabilitation counselor is there to assist and provide information and guidance when the timing is right. We go at the pace of the veteran or caregiver and remain there as partners for life.”

Thedra hasn’t given up, just as her husband never has. “He inspires,” she said proudly. “He humbles people with his attitude and spirituality. Everybody at the hospital talks to Bobby a lot. He mentors other patients; he tells them they can get through it.”

Although she no longer manages his basic daily care, Thedra spends several hours every day with him. “It’s absolutely crucial for me to advocate for him, and he does better when he knows I’m there with him and for him.”

Says DeMarlon Poillard, “Even though we have secured the necessary and appropriate care for Bobby and they are comfortable after all these years with how to manage VA procedures and have their own daily routine, Paralyzed Veterans of America is still there for them. As his current service officer, I see Bobby at least once week, check in with the medical team about his care, and Thedra knows..."
she can come to me at any time she has a question or concern. Our role changes as their needs change.”

Over the years, Bobby says, Paralyzed Veterans of America has provided “moral support, help navigating the VA system (where to go and who to talk to), information and help filing claims, help when I can’t get things or need information from doctors and nurses—and now helping my wife get a job.”

Thedra continues to pursue employment goals while maintaining daily vigil over Bobby’s care and while Paralyzed Veterans maintains the ongoing support for both of them—now 14 years and continuing forward.

Paralyzed Veterans of America has provided “moral support, help navigating the VA system (where to go and who to talk to), information and help filing claims, help when I can’t get things or need information from doctors and nurses—and now helping my wife get a job.”

During site surveys (44 conducted at VA facilities in 2014), we look not only at the standards of care provided to veterans with spinal cord injuries, but also the environments in which the care is administered.

Medical Services and Health Policy

Without quality health care, a veteran with spinal cord injury would face a much shorter life expectancy. Paralyzed Veterans’ Medical Services and Health Policy Program ensures the highest level of care through the wide-ranging services our team provides. Oversight of VA medical centers through site visits that include patient and staff discussions as well as facility design and construction assessment, along with the program’s educational offerings and support of research all combine to advance understanding and improve patient care and outcomes.
For more than 30 years, Paralyzed Veterans of America has conducted regular site surveys that assess all 25 VA-operated spinal cord injury/disease (SCI/D) centers across the country, as well as Department of Veterans Affairs medical centers with specific identified issues, long-term-care facilities and outpatient centers. We are the only veterans service organization that conducts these types of surveys and the only one with a survey team that includes clinicians who specialize in spinal cord injury.

During these site surveys (44 conducted at VA facilities in 2014), we look not only at the standards of care provided to veterans with spinal cord injuries, but also the environments in which the care is administered. We also discuss the needs of the various health care providers. Our site teams include doctors, nurses, architects, and our members who receive care in those facilities who evaluate the health care environment and accessibility.

We gather data about each facility throughout the year from our local service officers, whose offices are mostly co-located within VA SCI centers, where they evaluate the environments and discuss problems of care with veterans who use the facility. As a result, we arrive aware of circumstances and prepared to ensure resolution. While on site, we talk with all of the appropriate staff and patients about concerns as well as what the facility does well. We meet with all levels of leadership and the medical staff, including the nurses who provide bedside care: physicians; pharmacy; prosthetics; and therapists. We determine if the facility has enough staff to provide quality services, from housekeeping to comprehensive rehabilitation. Site visits address any aspect of care that could hinder an optimal environment, including appointment timeliness, staff sufficiency, prescription protocols, wheelchair acquisition, room availability, privacy and special needs, and housekeeping efficiency.

On the fourth day of the survey, we meet with the hospital leadership to provide an outline of our major findings, which serves as the basis of our comprehensive report. This report includes details about deficiencies at each facility and our recommendations to improve care. Our detailed reports can help facilities gain the funding and resources they need to provide care.

Reports may include suggestions for increasing clinician staffing, expediting processing of prosthetic equipment to promote patient independence, or offer assistance with design support from our program for renovation projects. Additionally, we support leadership recommendations and are currently actively engaged in ensuring mandated staffing levels for spinal cord injury units to meet demand.

Specifically in Long Beach (see p. 34), we are working with the facility to identify the long list of veterans who need or are going to need long-term care placement.

Working closely with our service officers in the facilities, the site visit team monitors and advises on improvements to ensure veterans have the environment most conducive to healing.

Truman Suttle, Field Advisory Committee

In 1997, Truman Suttle was an active member of Paralyzed Veterans, volunteering as a hospital liaison to record staff and patient concerns with the Mid-South Chapter. After we began conducting routine visits to monitor facilities and care in VA SCI centers across the country more than 30 years ago, Truman was a natural fit for the Field Advisory Committee (FAC). As part of those duties, which he has held for more than 20 years, Truman visits three VA facilities per year and contributes to the quality of care for veterans by offering his perspective on wheelchair accessibility and the unique needs of SCI/D patients, as a paralyzed veteran himself.

“As a wheelchair user, I bring a unique perspective to our site visits that enables me to truly represent our members. Everyone on the site visit team is there for the same reason: to ensure that our members are getting the highest possible quality of care. I believe site visits are one of the most important things that Paralyzed Veterans of America does for its members.”

“Truman’s role—along with others on the FAC—is critical, complementing the team’s technical findings,” said Lana McKenzie, associate executive director of Medical Services and Health Policy. “First, many patients are more comfortable sharing their concerns and observations with another wheelchair user. In addition, Truman tours the facilities with our architects and examines whether needs have been met as a ‘neutral’ observer on behalf of the patients using those health care facilities.”
Often veterans with catastrophic injuries or spinal cord disease must manage secondary conditions that accompany paralysis. And when the care is provided by private physicians and medical facilities not familiar with the complex issues that can occur, those conditions can become life-threatening. In these cases, our Medical Services team must respond quickly. Because of our site visits and long-established relationship with the Department of Veterans Affairs, we can initiate immediate action on a veteran’s behalf.

Richard Hoover, a fighter pilot who flew 148 combat missions in Vietnam, had a broken back and had been lying on a stretcher on a floor in a VA ward for four hours when Paralyzed Veterans first stepped in to help him. It was 1973 when Richard, working as an instructor and test pilot in Aerospace Defense Command in Florida, fell 2,000 feet into a swamp crawling with alligators and snakes. “It was during a training exercise,” he recalled. “The engine flamed out and I ejected, but the parachute failed. When I hit the ground, I knew almost instantly that my back was broken.”

Rescued and flown from the Air Force hospital to the Long Beach SCI center, Richard did not know what to expect next. He was told he would live “maybe an hour, then six hours, then a day, then possibly no more than six days.”

They took him off the ambulance and into one of the VA wards, where his stretcher was placed on the floor. There he lay for almost four hours when he was noticed by a Paralyzed Veterans service officer, who immediately got nurses to his side. That was his introduction to Paralyzed Veterans, and it changed his life forever.

“The next day that service officer came to see me. He told me he could represent me before VA, and explained all the things [Paralyzed Veterans] could do for me. He basically steered me and guided me through the whole year I was an inpatient, and set me up to start my life over. I told myself that if I lived, this was an organization I wanted to be involved with.”

After almost 40 years as a member of Paralyzed Veterans, Richard was battling a secondary infection common to paraplegics. He was unable to get care at the Puget Sound Health Care System, his SCI center of record. After several trips to the local hospital and ER, being seen by private physicians who did not have the proper experience with SCI patients to diagnose the cause of the infection, Richard believed he was going to die. He knew enough about secondary infections associated with SCI to understand the danger he faced. He needed specialized care at a VA SCI center.

“I was just getting sicker and the doctors didn’t know what the problem was. I tried to get into the local community-based outpatient clinic, but to get an appointment would have taken six weeks that I didn’t have,” he said.

He once again turned to Paralyzed Veterans. And because of the close working relationship the Medical Services team has with the Department of Veterans Affairs, action on his behalf was immediate. First a team of VA physicians and nurses spoke with him by phone to assess his condition. Then VA sent a jet ambulance to Montana to rush him to care.

“Paralyzed Veterans of America has saved my life twice.”
—Richard Hoover, U.S. Air Force

Richard said. “When I got to the Long Beach SCI Center they knew immediately what the problem was. Three days later I was in surgery, followed by four months on a customized antibiotics regime.” It was the swift action and specialized expert care Paralyzed Veterans secured that saved Richard Hoover’s life a second time.

“I have no doubt that if Paralyzed Veterans had not been there for me, I would not be here now.”

Inspired by his experience with Paralyzed Veterans of America during his long recovery after his spinal cord injury, Richard committed himself to serving the organization. Beginning as a national service officer in his local chapter, he eventually became the first Paralyzed Veterans president to serve three terms. He also served as executive director, and has served for more than seven years as editor of PN magazine and Sports ’n Spokes.
Research and Education

Serving veterans with spinal cord injury has, since our beginnings, been a priority. Paralyzed Veterans has worked for 68 years to find improved care and eventually a cure for paralysis. Through our Research and Education Foundations we have provided grants totaling more than $1.25 million.

In addition, Paralyzed Veterans has been a partner with Yale for 25 years, supporting its efforts to advance research and treatment. That anniversary was recognized in October 2013 at the Yale Center for Neuroscience and Regeneration Research, where advances are being made to restore function and reduce pain in individuals with SCI, MS, and related disorders.

“The unique collaboration of the Paralyzed Veterans of America and Yale University has transformed cures for SCI/D from impossible to achievable objectives,” Dr. Stephen G. Waxman, director of the Center, said.

On the anniversary, Paralyzed veterans presented a check for $270,000 bringing the total contribution since the center’s inception to more than $10 million. Our 34 chapters play a significant role in supporting Yale’s research with annual gifts.

Yale has made significant progress in research and treatment for spinal cord injury and disease. The center’s spinal cord repair program is advancing rapidly on the possibility that adult-derived stem cells could protect at-risk nerve cells and rebuild an injured spinal cord. The center’s multiple sclerosis research program also has made significant enhancements that could eventually induce remissions to restore normal functions in patients with MS and related disorders.

Through its pain research program, the center also has identified a single gene out of 30,000 that is a key driver of pain after nerve injury and spinal cord injury.

Such breakthroughs enable people with paralysis to focus on other aspects of life that will help lead to self-actualization, instead of suffering through life due to the consequences of spinal trauma or disease.
Health care professionals now can access the most up-to-date information on treating and preventing pressure ulcers in the 2nd edition *Clinical Practice Guideline, Pressure Ulcer Prevention and Treatment Following Spinal Cord Injury*, an updated guide from the Consortium for Spinal Cord Medicine, completed in 2014. Paralyzed Veterans administers and provides financial support for the Consortium.

Pressure ulcers are the most dangerous secondary complication for individuals of all ages with spinal cord injury and disease (SCI/D). The prevention of pressure ulcers begins within the first few hours after an injury and continues throughout the lifespan. The updated publication provides the most comprehensive recommendations for the prevention, assessment, and management of pressure ulcers. This updated clinical practice guideline is designed as an essential tool to help empower, inform, and educate healthcare professionals who treat individuals with SCI/D. Specifically, the guideline is designed to be used by physicians in a number of specialties (i.e. internal medicine, plastic surgery, and physical medicine and rehabilitation), nurses, physical and occupational therapists, social workers, and psychologists.
“Paralyzed Veterans of America, having been in this business of very systematic site visits for over 30 years...it’s a gift.”

—Dr. Carolyn Clancy, VA Under Secretary for Health, speaking at Summit 2014

Annual Health Care Summit

An important aspect of care for our most seriously injured veterans is the close, mutually beneficial relationship Paralyzed Veterans has with the Department of Veterans Affairs. Increasing that bond and care focus is our annual Health Care Summit, which provides policy leaders, VA clinicians, and other health care professionals with access to the latest research and best practices to advance and strengthen the continuum of care for individuals with spinal cord injury or disease. Growing annually, the third Paralyzed Veterans Health Care Summit hosted more than 600 attendees. Paralyzed Veterans provided grants for doctors, nurses, social workers, physical therapists, and psychologists to attend. We believe if they are going to be taking care of America’s veterans, they should have the most current information on best practices so that they are able to provide optimal care in an optimal environment.

Said Dr. Paul A. Gutierrez, Summit Program Committee Chairman, “The summit is an extremely valuable educational opportunity. You’re really getting expert experience, from lectures based on state-of-the-art research and science to very practical information. We all face similar challenges, and seeing how someone else approaches them can be eye-opening. That sharing of knowledge is definitely helping to advance SCI/D patient care.”

[L-R]: Sherman Gillums, deputy executive director; Lana McKenzie, associate executive director for Medical Services and Health Policy; Al Kovach, national president; Dr. Carolyn Clancy, VA undersecretary for health; and Homer S. Townsend, Jr., executive director, during Summit 2014.
Paralyzed Veterans of America ensures that our members—veterans with spinal cord injury or disease (SCI/D)—who receive care in VA facilities are treated in the optimal environment for rehabilitation and recovery. Our Architecture Program carries out an integral aspect of that mission. We are the only veterans service organization with a staff of licensed architects who review and evaluate VA facilities nationwide. Our architects conduct a wide range of activities that include design consultations, review of facilities, review of demand, and continual assessment of the needs of those receiving care.

But there also exists a critical shortage of for extended care and long-term-care (LTC) centers across the country for veterans with SCI/D. Absence of such facilities can leave these veterans with no other choice but institutional care, where staff oftentimes do not have the knowledge or experience required to provide for the specialized needs of this population. Thus, we are strong advocates for building such facilities in areas where there are none. In 2014 significant progress was made toward correcting these deficiencies nationwide, starting with Long Beach, California.

**Long Beach SCI**

Paralyzed Veterans has for years pushed for the development of a state of the art long-term-care facility in Long Beach, California, which is the first on the West Coast, a huge win for our members.

Long Beach will be the fifth LTC facility specifically for veterans with SCI/D. As with the other such centers across the country, veterans with spinal cord injury or disease will be cared for by an interdisciplinary team of experts in a homelike environment.

Said Dr. Sophia Chun, acting chief consultant of the VA Spinal Cord Injury System of Care, “If it were not for the advocacy of Paralyzed Veterans medical services team and architects, Long Beach’s SCI/D long-term-care facility would not have been a reality. (Paralyzed Veterans), in recognizing a need for a SCI long-term-care facility in the western United States, had advocated for a LTC center at Long Beach for more than 10 years. Their persistence and dedication to the vision of this project and their continual support throughout the construction process is very appreciated by everyone at Long Beach.”

Just as in a home, there are public “living room” areas that encourage socializing and camaraderie. People need social contact and interaction with their peers and they also need personal space. The bedrooms are designed for veterans to personalize and make their own, with plenty of places for individual belongings; a desk to work at, have books or files; and a seating area for visitors.

A noninstitutional environment isn’t just for aesthetics. Studies have shown that these more “residential” facilities have a positive effect on health outcomes and can greatly improve the quality of life.
When a veteran is admitted to the LTC center, the first impression will be of the large and spacious common areas with equally spacious rooms designed for the comfort of veterans.

“Having the Paralyzed Veterans’ architects participate in our VA Long Beach’s SCI/D LTC has been invaluable from start to finish,” Dr. Chun said. “Their expertise in creating a physically accessible space that is both functional and aesthetic has been a great help to Long Beach though each step of the process.”

Currently, architecture is advising on similar facilities under construction in Dallas and in the design phase in the Bronx and San Diego. Architecture staff was heavily involved in advocating for funding for the San Diego facility as well, and is providing input at the very early stages in Denver now that needed funding has been approved.

Ensuring Access in Public Areas
Paralyzed Veterans has become known as the expert in ensuring access for all with disabilities in public spaces. Among other public projects, we reviewed, at the team’s request, the plans for the new Minnesota Vikings stadium. The guidance and recommendations from our architects led to even greater renovations above and beyond what is required by the Americans with Disabilities Act. The stadium is now one of the best for wheelchair seating options and access.

Also in 2014 in Washington, DC, the Americas Veterans Disabled for Life Memorial was unveiled. For the first time, America has paid tribute to some of our most courageous—our disabled veterans. A Washington Post review of the Memorial stated, “Many of those who visit will have impaired mobility, and the memorial is attentive to that in ways that might not be immediately
obvious to the able-bodied. The star-shaped fountain and triangular reflecting pool are set low to the ground so that they can be easily surveyed by someone sitting in a wheelchair; there are a great number of benches, strategically placed in front of glass text panels and with unobtrusive metal bars to help people who need assistance sitting or standing up; and the curb cuts for wheelchair ramps have straight rather than flaring edges, which helps people with visual limitations.”

Noted National President Al Kovach, “A lot of veterans feel like they’re wearing their scars and that no one else understands. This memorial is going to educate people and make it easier for them to engage with disabled veterans.”

Barry Owenby, project executive, expressed “appreciation and gratitude for the professional support and advice…provided over the many years of design reviews and approvals [which] provided invaluable, professional advice, and consultation as we progressed through schematic design and design development, and finally to construction documents. Because of your efforts and suggestions, we were empowered to enhance both the aesthetic and practical aspects of the Memorial’s design, most especially for disabled visitors.”

He added that Paralyzed Veterans’ “commitment to advocating for accessible design” has had a “tremendous positive impact on disabled Americans, both veterans and non-veterans alike.”
Sports and Recreation

Since our founding in 1946, Paralyzed Veterans of America has been a leader in the development of adaptive sports and an advocate for their role in rehabilitating body and spirit for individuals with spinal cord injury or disease. We provide a variety of physical activities for athletes at all levels of ability.

Each year we co-present the National Veterans Wheelchair Games, the largest annual wheelchair sporting event in the world, with the Department of Veterans Affairs and support from numerous corporate and community sponsors. Every athlete who competes has served our country in the armed forces and must use a wheelchair to compete. More than 550 veterans competed in the 2014 Games in Philadelphia.

Especially for recently paralyzed veterans struggling to adapt, who often experience depression and feel alone, seeing hundreds of other wheelchair users improves their outlook and boosts self-confidence. They reach new levels of ability and determination. And while doing so, friendships are made for life. The Games are often referenced by the athletes as a family reunion that they eagerly anticipate each year.

An important new area of focus in adaptive sports and recreation is researching and developing opportunities for our members with quadriplegia, and more limited mobility, to compete. In 2014 we introduced boccia, a full medal Paralympic event, to the Games.

In addition, Paralyzed Veterans’ chapters across the country are working to empower veterans to be more active and healthy in their daily lives by getting them involved in the many sports and recreation programs we offer and promoting new ones—highlighting fitness, social networking, and community involvement. Sports and recreation activities can reinforce critical values necessary for health while combating the risk of isolation, depression, and other negative outcomes of catastrophic disability. Current additional offerings are bowling, billiards, bass tour, handcycle racing, air rifle and air pistol, and shooting sports.
Paralyzed Veterans’ chapters are working to empower veterans to be more active and healthy in their daily lives by getting them involved in the many sports and recreation programs we offer and promoting new ones.
A fter his first year of college, Charlie Brown found himself looking for something he could do that would really make a difference in his life. He decided to join the Marines. In 1986, while on leave from his aviation ordnance duties at Marine Corps Air Station Cherry Point, Charlie sustained a spinal cord injury as a result of a diving accident. During his initial rehabilitation at the Department of Veterans Affairs Spinal Cord Injury Center in Augusta, GA, Charlie became a member of the Southeastern Chapter of Paralyzed Veterans; he later returned to his home state of Missouri, where he served on the Gateway Chapter board in a multitude of capacities, including Americans with Disabilities Act coordinator, advocacy director, treasurer, and vice president. Today Charlie serves as a national vice president on the Paralyzed Veterans’ Executive Committee.

With a lifelong passion for sports, Charlie was excited to learn after his injury about the many sports and recreation activities available through Paralyzed Veterans. He participated in his first National Veterans Wheelchair Games (Games) in 1992. When he returned home to St. Louis, he began looking for a way for veterans to compete in sports outside of the games—and spent the next 18 months working to establish the Rolling Rams quad rugby team. Quad (or wheelchair) rugby is a simple game with complex strategies for playing both offense and defense. It’s played with a ball similar to a volleyball on a basketball-size court with goal lines marked by cones and a lined-off “key” area.

The object of the game is to score a goal (1 point) by crossing the goal line with possession of the ball while the opposing team is defending that goal. The team with the most points when time runs out wins.

In 2011, Charlie discovered the Paralympic sport of boccia, which was offered as a demonstration sport for the first time at the 2012 Games. Currently on the USA boccia team, Charlie was selected team captain for the Parapan American Games in Guadalajara, Mexico. Ranked 63rd in the world after one international tournament, he fully believes an active life has kept him healthy.

“Every time I’ve wanted to accomplish something or do something different, Paralyzed Veterans of America has helped me on every level.”

—Charles Brown, U.S. Marine Corps

“Every time I’ve wanted to accomplish something or do something different, Paralyzed Veterans of America has helped me on every level. We share a goal of improving the quality of life not only for veterans with spinal cord injuries, but also the disabled community as a whole. Boccia is a great example. I’m working with Paralyzed Veterans to grow the sport nationally and Paralyzed Veterans has really supported me. It’s an incredible organization.”
Kevin Patton wanted to serve in the military so much that he joined the Army reserve as a junior in high school in 1982. After graduating two years later, he joined the Air Force and was stationed at Mather Air Force Base, near Sacramento, California, where he worked as a surgical technician in the base hospital.

Just two years into his service, he was injured in a single-car accident that left him a T12-L1 paraplegic. During rehab, Kevin met a Paralyzed Veterans of America service officer—a meeting that changed the direction of his life. “After I got hurt, I was sent to Wright-Patterson Medical Center in Ohio for rehabilitation,” explains Kevin. “There, I was met by a Paralyzed Veterans service officer who got my claim going with the VA. After I was discharged, my wife and I moved back to California, where other service officers took over my case. Eventually, one of them talked with me about becoming a service officer myself, and I went to work for Paralyzed Veterans.”

But Kevin’s true passion has always been sports, so when he had the opportunity to become sports director of the Paralyzed Veterans of America Bay Area & Western Chapter, he jumped at the chance. “Through sports, I’ve met so many people and had the opportunity to travel across the country,” he said. In this position, Kevin’s mission is to get more of the membership active. One way he does that is by partnering with other local sports programs, such as the City of Sacramento’s Access Leisure & Paralympic Sport Club. He has also helped develop activities for kids with disabilities and worked with the U.S. Army’s Warrior Transition program.

“When I hear people talk about the limitations of life in a wheelchair, I tell them. “Get in the chair and come out here and play with me. Let me show you what I ‘can’t’ do. And I’ll show you what I can do,” he said.

Kevin is also a devoted supporter of the National Veterans Wheelchair Games, having participated several times since 1992. He says that what brings him to the games year after year is the competitiveness and camaraderie with the other veterans. When a shoulder injury prevented him from participating in the 2014 Games, he officiated so he could stay involved and volunteered to take part in a wheelchair lacrosse exhibition match.

“As a sports director, I’m constantly involved with various sports. Right now, our members are excited about wheelchair lacrosse.”

—Kevin Patton, Bay Area & Western Chapter

Back at home, Kevin is spreading the word about an adaptive sport that’s getting a lot of interest from our members: wheelchair lacrosse. It’s the first full-contact adaptive sport since wheelchair rugby was introduced in the late 70s. Its supporters say this exciting, fast-paced sport is truly revolutionizing both adaptive sports and the lacrosse community. In May 2014, Kevin and Rebecca Sherman, executive director of the Bay Area & Western Chapter, attended a wheelchair lacrosse clinic in Las Vegas organized by Paralyzed Veterans’ Sports and Recreation program. Then, with the help of the national program, Kevin immediately began planning to bring the new sport to his chapter. With help from the national sports program, Kevin immediately began planning to bring the sport to his chapter.

“The clinic was very exciting and introduced me to a great new, up-and-coming sport,” said Kevin. “I know our members will love it as much as I do.”
General Counsel

Our Office of General Counsel not only protects veterans legal rights, it also promotes the practice and growth of veterans law. In addition to creating training videos and online materials, an annual legal writing contest is held for students to encourage debate on public policy issues affecting today’s veterans. Law student Matthew Dowd won the award in 2005; it’s relevant in 2014 as he recently made partner with Wiley Rein, a leading global law firm, where he has initiated a more vibrant interest in veterans law. Matthew also argued some cases pro bono on behalf of veterans.
“Awards like this are great opportunities for law students and attorneys, and it’s great that Paralyzed Veterans of America is providing these opportunities,” Matthew said. “It’s an entry to get interested in veterans law, and I hope it continues to spur lawyers to get involved and help out where they can.”

The winning legal writing contest entry by Matthew Dowd was about a Civil War-era law that placed limitations on attorney representation of veterans before the Board of Veterans’ Appeals at the Department of Veterans Affairs.

Not only did his piece win first prize, it was cited in a Senate report accompanying a 2006 bill to overturn the attorney fee limitations. Those provisions became law in late 2006 as part of the “Veterans Benefits, Health Care and Information Technology Act.”

“In addition to winning the competition, it was rewarding to see evidence of a law journal article having a direct effect on changing the law,” Matthew said. “It goes to show that a writing competition can be more than just an academic exercise.”

In 2008, after graduating from law school a semester early, Matthew moved on to serve as a law clerk for the Hon. Paul R. Michel, former chief judge for the U.S. Court of Appeals for the Federal Circuit, which handles many administrative law cases involving personnel and veterans claims, and his interest in veterans law grew.

One case, he says, will always stand out as one of his most fulfilling. In 2013, along with fellow Wiley Rein attorneys Samantha Lee and Derick Holt, Matthew secured a successful pro bono appeal on behalf of a veteran seeking compensation from the VA for injuries sustained during World War II.

“That meant a lot to all of us here, me in particular, because if you think about what the men and women who fought in World War II did, it was just an astronomical sacrifice on their part,” Matthew says. “We wouldn’t have the country we have without them. For me to be able to do my little part to help this veteran is certainly a highlight of my career.”

Matthew also successfully briefed and argued an appeal before the U.S. Court of Appeals for the Federal Circuit involving constitutional and due process rights of a military veteran employee of the U.S. Postal Service. After the case was remanded, he negotiated a settlement with the Postal Service to return the veteran to work and secured a back pay settlement award.

Matthew has served as a co-chair for the Federal Circuit Bar Association’s Pro Bono Committee and today works with his firm’s Pro Bono and Associates Committees on numerous pro bono cases.
## Paralyzed Veterans of America

### Revenues

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions</td>
<td>147,056,777</td>
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<tr>
<td>Other</td>
<td>2,559,689</td>
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<tr>
<td>Total revenue</td>
<td>149,616,466</td>
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### Expenses

#### Program expenses

<table>
<thead>
<tr>
<th>Program expenses</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veterans and disability services</td>
<td>20,543,374</td>
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<tr>
<td>Public education</td>
<td>78,283,254</td>
</tr>
<tr>
<td>Advocacy</td>
<td>2,251,655</td>
</tr>
<tr>
<td>Sports and recreation</td>
<td>2,634,310</td>
</tr>
<tr>
<td>Research, consumer, and professional education</td>
<td>2,100,517</td>
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<tr>
<td>Chapter and community outreach</td>
<td>4,192,724</td>
</tr>
<tr>
<td>Total program expenses</td>
<td>110,005,834</td>
</tr>
</tbody>
</table>

| General and administrative                                   | 4,950,992  |
| Fundraising                                                   | 31,667,353 |
| Total expenses                                                | 146,624,179|

| Excess from operations                                       | 2,992,287  |
| Investment income                                            | 6,477,865  |

### Net Assets

<table>
<thead>
<tr>
<th>Net Assets</th>
<th>2014</th>
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</thead>
<tbody>
<tr>
<td>Increase in net assets</td>
<td>9,470,152</td>
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<tr>
<td>Net assets, beginning of the year</td>
<td>43,722,306</td>
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<td>Net assets, end of year</td>
<td>53,192,458</td>
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### Financial Ratios

#### Program expenses

<table>
<thead>
<tr>
<th>Program expenses</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veterans and disability services to total expenses</td>
<td>14.0%</td>
</tr>
<tr>
<td>Public education to total expenses</td>
<td>53.4%</td>
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<tr>
<td>Advocacy to total expenses</td>
<td>1.5%</td>
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<tr>
<td>Sports and recreation to total expenses</td>
<td>1.8%</td>
</tr>
<tr>
<td>Research, consumer, and professional education to total expenses</td>
<td>1.4%</td>
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<tr>
<td>Chapter and community outreach to total expenses</td>
<td>2.9%</td>
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<tr>
<td>Total program service expenses to total expenses</td>
<td>75.0%</td>
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</tbody>
</table>

| General and administrative expenses                            | 3.4%       |
| Fundraising expenses to total expenses                          | 21.6%      |
| Total                                                         | 100.0%     |
### Research Foundation

<table>
<thead>
<tr>
<th>Revenues</th>
<th>2014</th>
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</thead>
<tbody>
<tr>
<td>Contributions from Paralyzed Veterans of America</td>
<td>592,470</td>
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<tr>
<td>Contributions – Other</td>
<td>298,886</td>
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<tr>
<td>Interest income</td>
<td>378</td>
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<tr>
<td>Total revenue</td>
<td>891,734</td>
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<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants</td>
<td>1,047,102</td>
</tr>
<tr>
<td>Returned unused grants from prior years</td>
<td>(25,095)</td>
</tr>
<tr>
<td>Program services ($106,470 donated by Paralyzed Veterans of America)</td>
<td>119,343</td>
</tr>
<tr>
<td>General and administrative</td>
<td>1,265</td>
</tr>
<tr>
<td>Total expenses</td>
<td>1,142,615</td>
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</table>

<table>
<thead>
<tr>
<th>Net Assets</th>
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<tbody>
<tr>
<td>Decrease in net assets</td>
<td>(250,881)</td>
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<tr>
<td>Net assets, beginning of the year</td>
<td>431,778</td>
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<td>Net assets, end of year</td>
<td>180,897</td>
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### Education Foundation

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<tr>
<th>Revenues</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions from Paralyzed Veterans of America</td>
<td>147,909</td>
</tr>
<tr>
<td>Contributions – Other</td>
<td>162,193</td>
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<tr>
<td>Interest income</td>
<td>54</td>
</tr>
<tr>
<td>Total revenue</td>
<td>310,156</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants</td>
<td>254,007</td>
</tr>
<tr>
<td>Returned unused grants from prior years</td>
<td>(7,061)</td>
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<tr>
<td>Program services ($72,909 donated by Paralyzed Veterans of America)</td>
<td>81,761</td>
</tr>
<tr>
<td>General and administrative</td>
<td>985</td>
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<tr>
<td>Total program expenses</td>
<td>329,692</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net Assets</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Decrease in net assets</td>
<td>(19,536)</td>
</tr>
<tr>
<td>Net assets, beginning of the year</td>
<td>24,057</td>
</tr>
<tr>
<td>Net assets, end of year</td>
<td>4,521</td>
</tr>
</tbody>
</table>
A child of “The Greatest Generation,” Jeffrey M. Carlton witnessed sacrifice, determination, and philanthropy through the eloquence of his parents’ example.

Later in life Jeff would utilize their example and his own business acumen to build a successful forging business in Southern California. He founded Press Forge in 1978 and served as the company’s chairman and CEO. Press Forge is one of the largest U.S. suppliers of forging services and products to commercial and military aerospace, nuclear, oil and gas exploration, and industrial markets.

However, business was not enough. Jeff Carlton gave back. He was a 20-plus-year donor to Paralyzed Veterans of America. In addition to his annual investments in support of Paralyzed Veterans of America, he remembered our veterans in his Trust. Because of his dedication and belief, Paralyzed Veterans is the fortunate beneficiary of the largest commitment in our history.

Leading by example and in keeping with Jeff’s entrepreneurial spirit, his periodic gifts serve as a challenge to our donors. New and increased contributions will count in support of the Jeffrey M. Carlton Challenge. Over the next two decades, it is expected his perpetual support will provide at least $50 million to assist us in expanding our mission to serve our members and all veterans. Just in the past several months commitments totaling more than $6 million have been received or pledged by the Jeffrey M. Carlton Trust.

Jeffrey M. Carlton Conference Center
Dedicated in his honor at national headquarters Nov. 10, 2014
Paralyzed Veterans of America Supporters

Each contribution to Paralyzed Veterans helps us serve veterans and others with spinal cord injury or dysfunction. Due to space limitations, we are able to recognize only those from whom we received cumulative gifts of $1,000 or more. We thank you for all of your support.

<table>
<thead>
<tr>
<th>Amount Range</th>
<th>Supporters</th>
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<tbody>
<tr>
<td>$5,000,000 and above</td>
<td>The Jeffrey M. Carlton Trust, Dorothy and Roy Hansen</td>
</tr>
<tr>
<td>$500,000 – $999,999</td>
<td>Anonymous, Dona Mae Ashworth, Wesley &amp; Jacqueline Carnrick, José L. Morales, PhD Trust – Carlos Pelly, Trustee</td>
</tr>
</tbody>
</table>

Paralyzed Veterans has been diligent in its efforts to ensure the proper recognition of donors. We apologize if we have made any mistakes. Should you find an error or an omission, please notify the Development Department at (800) 424-8200, ext. 600. Thank you for your understanding.
$10,000 – $49,999 (con’t)

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Michael Gilbert  
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gMg  
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John Shade  
Dr. Roger Shammas
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Mrs. C. W. Acree
Accessibility Services, Inc.
2L Race Services, LLC
$2,000
Mrs. Catherine A. Stein
Texas Paralyzed Veterans of America
Technatomy
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$2,000

$2,000 – $4,999

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Accessibility Services, Inc.
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Mr. Donald B. Adams
Melissa Afentoulis
Avadhesh & Uma Agarwal
Betty Akins
Darleen Alexander
Mr. J. F. Allen
Ms. Lisa Allen
Mrs. Carole Allice
Gary Altobello
Gwen Amazaki
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American Legion Post #45
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Frances J. Stanford
Mr. & Mrs. Paul Stanford
Mrs. Shari Stanford
Marjorie Stankausky
Mr. & Mrs. Landis D. Stanley
Teresa Stanley
Stanley Black & Decker, Inc.
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Wallace Starke
A. Starkey
Sherrill & Judy Starr
Mr. & Mrs. William Stayton
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Marynell Steburg
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Nell T. Steele
Wilbur G. Stein
Katherine A. Stentzel
Ms. Carmella M. Steoart
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F. Stephenson
Marcia Stephenson
Mr. Mike Stevens
Mr. Doug Stevenson
Frank Stewart
Mrs. J. Russell Stewart
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Mary Stilwell
Mr. & Mrs. J. C. Stimson
Shirley Stitt
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Vernon J. Stoehr
Helen A. Stokes
Kevin Stolworthy
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Robert W. Stone
Donald Stonebrook
Patricia Storevik
Mr. Edward L. Storm
Ms. Margaret L. Stout
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M. A. Toomey
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Theda Torgerson
Nancy A. Torretta
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Mildred Treadway
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Troy R. Young
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Dr. Jose M. Yrizarry
Frances Yu
Nancy Zabel
Ms. Dorothea Zaiger
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Marylouise Zamora
Marjorie Zander
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Charles Zemach
Mr. Gregory Zentner
Caroline Zicarelli
Richard D. Zier
Dale & Meryl Zimmerman
Dr. Tom Zimmerman
Mr. David Zinn
Mr. Kim Zinszer
Mr. Frank Zschaschel
Mr. Ron Zuberbier
Julia Zuczek
Dorothy Zumwalt
David Zurfluh
Legacy Circle

We are pleased to recognize the members of the Paralyzed Veterans of America Legacy Circle, individuals who have included Paralyzed Veterans in their estate plans through a future bequest, a charitable gift annuity, a charitable trust, or one of many other types of deferred gift arrangements. Listed below are those individuals who have granted us permission to publicize their names.

Rose Accardi
Joel Adamchick
Christine Adler
Mr. Anthony Agro
Mr. George Akins
Stefan Albanese
Eleanor Albrecht
Mr. Rodney Alexander
LTC James M. Alfonte, USA (Ret.)
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Dewey Allen
Matie Allendorf
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Mr. James S. Ambrose
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CDR George D. Anderson
Mr. Roy C. Andrews
Ms. Tasha Angel
Anonymous
Mr. Justo Molina Aponte
Ms. Diana Arias
Norman J. Arkoos
Dona Mae Ashworth
Mr. Melvin L. Atchison
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Mrs. Mildred H. Bailey
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Charnelle Champine
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Ms. Saras Cheam
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Mr. Terry Chenoweth
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Mr. Walt Curryo
Ms. Lauren Dahl
Barbara Daniels
Mr. & Mrs. Fletcher Darby
Mr. Herbert W. Darley
Mr. Max L. Darling
Jane Davies
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Ms. Dorothy Kamisky
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Mr. Gerhard Kathery
Col. George Kawanami
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Walter Koper
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Mr. Stephens Krenzer
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Mr. Michael Miller
Mr. Ronald Miller
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Dewey Mills
Gwen Mills
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Dorris E. Pizzotti
Mr. James Plite
Mr. Donald Plunkett
Melvin Port
Jean M. Porter
Mrs. Emily B. Powell
Patriot Society

During fiscal year 2014 the following people responded to an invitation from Paralyzed Veterans of America to join its Patriot Society. The Patriot Society is a group of individuals who go above and beyond to support Paralyzed Veterans of America.

Mr. Kenneth Abrams  
Hugo W. Adlhoch  
Paula Albrecht  
T. C. Altfillisch  
American Legion Post #19  
Joyce W. Amis  
Mr. Larry Andrews  
Charles Arnold, Esq.  
Mrs. Beverly J. J. Arnstein  
Mr. Russell Atha III  
Mary Bagge  
Mr. Benjamin D. Bagno  
Fred Bering  
Mrs. Susan Bosworth  
Ms. Michele Bowman  
Mr. Donald Braden  
Mr. & Mrs. Jeremiah P. Bresnahan  
Maureen Brosnan  
Mr. Larry Bryant  
Mr. James G. Burke  
Mr. Frank M. Byam  
Raymond Clift  
United Croatian Club  
Ed Connelly  
Dr. & Mrs. Robert Coons  
Ms. Betty L. Cory  
Ms. Delores Costa  
Miss Constance Crocker  
DAV Chapter #64  
Mr. Marc Desmarais  
Michael Dopson  
Rita Durbin  
Corine & George Duke  
D. Roger Etcetera  
M. Grey Ferguson  
Robert Fisher  
Ms. J. Charleen C. Follis  
Falko Forbrich  
Danny Ford  
Martha R. Francis  
Irina Fritz  
L. Fuller  
Dr. Margie Gallagher  
Mr. John Gibson  
Stephen Gifford  
Herbert Glass  
Betty Goldiamond  
Mr. Steven P. Goodman  
Mrs. Patsy M. Graham  
Mr. Michael Graziano  
G. T. Green  
Ms. Alice R. Greenwood  
Mrs. Theresa G. Half  
Dr. & Mrs. Michael Hanyak, Jr.  
Mrs. Faith Harvie  
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Henry & Lynn Haye  
Dr. R. C. Heimbaugh  
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Mr. Edward Hipke  
Maj. James Hogan (Ret.)  
Mr. & Mrs. Brian Holiman  
Ms. Jayne L. Hollander  
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Allen Hutchinson  
Ms. Patsy Jones  
Ms. Judy M. Judd  
Mr. Russell P. Kelley, Jr.  
Mr. Walter W. Klinge  
Argiro & Alex Koutsoubis  
Martha L. Krimendahl  
Mrs. Richard Kucera  
Ms. Marsha J. Kurth  
Leo L. Laliberte  
Mr. Paul L. Lawrence  
Margie Lassmann  
Roy E. Lee  
Ms. Nancy Leitner  
Mr. Richard Leonard  
Harold K. Light  
Mrs. Estelle Long  
Mary Loughman  
Miss Karen Lowery  
Cecilia K. Maier  
Mr. Alan Manning  
Mrs. Lorraine E. Marano  
Sarah & Alex Marshall  
Mr. Jeremiah Mc Closkey  
Terry & Marie McKinney  
Debrah Meloney  
Maria Menendez  
Lynda Monteleone  
Rose M. Montgomery  
Mr. Enoch Morris  
MSgt. Richard Moulson, Sr.  
Mr. Boris Nachamkin  
Sherry Neuman  
John A. Nungesser  
Mr. Mickey Olliff  
Cambis Ostovari  
Lawrence K. Palmer  
Ms. Henriette Paternayan  
Mr. Robert S. Perkin  
Ms. Christine Perren  
Dr. & Mrs. Donald A. Person  
Mr. George Poschner  
Ms. Sharon Price  
David & Tina Quesada, Jr.  
Kathy Reynolds  
Mr. Richard Rhoads  
Patrick Rhodes  
Ms. Rachel B. Romero  
Mr. Daniel J. Rubery  
Mr. Bennett Ross  
Ruth Sacco  
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Helen Satterthwaite  
L. K. Seal  
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Mr. Paul Schlereth  
Maj. Carl Schneider  
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Mr. & Mrs. Herbert J. Schumacher  
John Shade  
Mr. Donald Shepherd  
Mr. Robert Sherman  
Mr. Gilbert Simonetti  
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Iris Smith  
Ms. Margaret Snow  
Rosemary Studer  
Janice Sutherland  
Mr. Curtis Tang  
Mr. & Mrs. John Vacca  
John & Henrietta Van Tol  
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Mrs. Willard J. Walker  
Stephen Watters  
Mr. Richard F. Williams  
Ms. Jane E. Wilsher  
Charles R. Wolf  
Mr. Carl Von Wolffradt  
Philip P. Woodward  
Peter & Saundra Zentrich  
Ms. Sophie Zetes

For more information, please contact Joseph Macias at (800) 424-8200.
The 2015 Executive Committee
(July 1, 2014 – June 30, 2015)

The committee was elected during the 68th Annual Convention in February.

Awards

Speedy Award, Member
Randy L. Pleva, Sr.

Speedy Award, Nonmember
Bill Siebert, President
Ralph Braun Family Foundation

Host Chapter Award
Central Florida Chapter

Annual Chapter Volunteer Service Award
Iowa Chapter

National Membership Development Award
Texas Chapter

VA Voluntary Service Award
Lance Toguchi
Long Beach VA HCS

Dwain Taylor Volunteer Service Award, Member
Larry Dodson

Dwain Taylor Volunteer Service Award, Nonmember
Barbara Biesboer

National Service Office Locations

VA Regional Office
Montgomery, AL

VA Regional Office
North Little Rock, AR

VA Regional Office
Phoenix, AZ

VA SCI Center
Long Beach, CA

Vocational Rehabilitation Office
Long Beach, CA

VA Regional Office
Los Angeles, CA

VA Regional Office
Sacramento, CA

VA SCI Center
Palo Alto, CA

VA Regional Office
San Diego, CA

VA Regional Office
Denver, CO

VA Regional Office
Washington, DC

VA Medical & Regional Office Center
Wilmington, DE

VA SCI Center
Miami, FL

VA Health Care Center
Orlando, FL

VA Regional Office
St. Petersburgh, FL

VA SCI Center
Tampa, FL
National Service Office Locations [cont’d]

Vocational Rehabilitation Office
Tampa, FL

VA SCI Center
Augusta, GA

Vocational Rehabilitation Office
Augusta, GA

VA Regional Office
Decatur, GA

VA Regional Office
Chicago, IL

VA SCI Center
Hines, IL

VA Regional Office
Indianapolis, IN

VA Regional Office
Des Moines, IA

VA Medical & Regional Office Center
Wichita, KS

VA Regional Office
Louisville, KY

VA Regional Office
New Orleans, LA

VA Medical & Regional Office Center
Augusta, ME

VA Regional Office
Baltimore, MD

VA Regional Office
Boston, MA

Vocational Rehabilitation Office
West Roxbury, MA

VA Regional Office
Detroit, MI

VA Regional Office
St. Paul, MN

VA SCI Center
Minneapolis, MN

Vocational Rehabilitation Office
Minneapolis, MN

VA Regional Office
Jackson, MS

VA Medical Center
Kansas City, MO

VA Regional Office
St. Louis, MO

VA Regional Office
Lincoln, NE

VA Benefits Office
Las Vegas, NV

VA Regional Office
Newark, NJ

SCI Office
Albuquerque, NM

VA Regional Office
Albuquerque, NM

VA SCI Center
Bronx, NY

VA Regional Office
Buffalo, NY

VA Regional Office
New York, NY

PVA Benefits Office
Syracuse, NY

VA Regional Office
Winston-Salem, NC

VA Regional Office
Cleveland, OH

VA SCI Center
Cleveland, OH

VA Regional Office
Muskogee, OK

VA Medical Center
Oklahoma, OK

VA Regional Office
Portland, OR

VA Regional Office
Philadelphia, PA

VA Regional Office
Pittsburgh, PA

VA Regional Office
San Juan, PR

VA Regional Office
Columbia, SC

VA Medical & Regional Office Center
Sioux Falls, SD

VA SCI Center
Memphis, TN

VA Regional Office
Nashville, TN

VA SCI Center
Dallas, TX

VA SCI Center
Houston, TX

VA Regional Office
Houston, TX

VA SCI Center
San Antonio, TX

Vocational Rehabilitation Office
San Antonio, TX

VA Regional Office
Waco, TX

VA SCI Center
Hampton, VA

VA SCI Center
Richmond, VA

Vocational Rehabilitation Office
Richmond, VA

VA Regional Office
Roanoke, VA

VA Regional Office
Seattle, WA

VA SCI Center
Seattle, WA

VA Regional Office
Huntington, WV

VA Regional Office
Milwaukee, WI

Appellate & Legal Services Offices

Appellate Services Office

VA Board of Veterans’ Appeals
Washington, DC

Veterans Appeals Litigation Office

U.S. Court of Appeals for Veterans’ Claims
Washington, DC

Medical Services Office

Paralyzed Veterans of America
Washington, DC
# Chapter Board of Directors

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Board Member</th>
<th>Position</th>
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<tbody>
<tr>
<td>Arizona</td>
<td>Leonard Smith</td>
<td>National Director</td>
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<tr>
<td></td>
<td>John Tuzzolino</td>
<td>President</td>
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<tr>
<td>Bay Area &amp; Western</td>
<td>David Hollingshead</td>
<td>National Director</td>
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<tr>
<td></td>
<td>Richard Kratt</td>
<td>President</td>
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<tr>
<td>Bayou Gulf States</td>
<td>Willie Harvey</td>
<td>National Director &amp; President</td>
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<tr>
<td>Buckeye</td>
<td>Carl Harris</td>
<td>National Director &amp; President</td>
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<tr>
<td>Cal-Diego</td>
<td>Jim Russell</td>
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<td></td>
<td>James Miller</td>
<td>President</td>
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<tr>
<td>California</td>
<td>Arthur Lyles</td>
<td>National Director &amp; President</td>
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<tr>
<td>Central Florida</td>
<td>Steven Kirk</td>
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<tr>
<td>Colonial</td>
<td>Ronald Hoskins, Sr.</td>
<td>National Director &amp; President</td>
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<tr>
<td>Florida</td>
<td>Joseph Del Vecchio</td>
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<tr>
<td></td>
<td>Juan Perez</td>
<td>President</td>
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<tr>
<td>Florida Gulf Coast</td>
<td>Eduardo Oyola-Rivera</td>
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<td>Davis Celestine</td>
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<td>Gateway</td>
<td>Stanley Brown</td>
<td>National Director &amp; President</td>
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<tr>
<td>Great Plains</td>
<td>Randy Squier</td>
<td>National Director &amp; President</td>
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<td>Kenneth E. Lloyd</td>
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<td>Jon R. Schneider</td>
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<td>Kentucky–Indiana</td>
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<td>Kevin Sparks</td>
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<td>Keystone</td>
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<tr>
<td>Mid-America</td>
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<td>Dan Kaminski</td>
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<td>New England</td>
<td>Craig Cascella</td>
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<td>North Central</td>
<td>Michael Olson</td>
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<td>Puerto Rico</td>
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<td>Texas</td>
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<td>Anne Robinson</td>
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<td>West Virginia</td>
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<td>Randy Pleva</td>
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<td>Wisconsin</td>
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<td>Phillip Rosenberg</td>
<td>President</td>
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<tr>
<td>Zia</td>
<td>Michael D’Arco</td>
<td>National Director</td>
</tr>
</tbody>
</table>
National Office Executive Staff

**Homer S. Townsend, Jr.**
Executive Director

**Sherman Gillums, Jr.**
Deputy Executive Director

**John D. Ring**
Chief Financial Officer

**Leonard Selfon**
General Counsel

**Linda Blauhut**
Deputy General Counsel

**Diane Rauber**
Associate General Counsel – Appeals

**Carl Blake**
Associate Executive Director of Government Relations

**Mark C. Dowis**
Associate Executive Director of Development & Marketing

**Lana McKenzie**
Associate Executive Director of Medical Services and Health Policy

**Cathy Jenkins**
Senior Director of Direct Marketing

**Jennifer Bobb**
Director of Direct Marketing

**Ernie Butler**
Director of Sports & Recreation

**Kacey Crawford**
Director of Digital Marketing

**Gwen P. Davis**
Director of Meeting Services

**Karen Davis-Moore**
Director of Human Resources

**Jane Eakins**
Director of Corporate Development & Cause Campaigns

**David Fanning**
Director of Individual Giving

**James Fischl**
Director of Field Services

**Russ Mank**
Director of Plans & Operations

**Mindy Walker**
Director of Fundraising Diversification

**Leslie Zupan**
Director of the Office of Information Technology

**Richard P. Kalafus**
Controller

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Charles Brown – Angela Winsor
Kevin Patton – Eric Stampfli
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