

Disabled American Veterans

Department of North Dakota

Tri-Annual News Bulletin

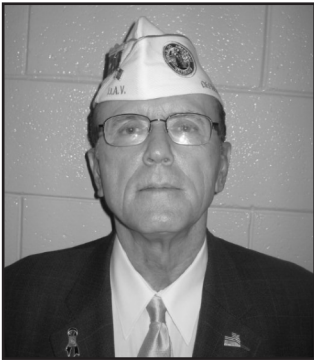


DEPARTMENT HEADQUARTERS

2009 4th STREET NE - JAMESTOWN, ND 58401

APRIL 2013

DEPARTMENT COMMANDER REPORT



Richard Krajewski
Department Commander DAV

It has been a great year for the DAV Department of North Dakota and I am privileged to have served as your Department Commander. In a few days, my successor will be elected at the convention and I will become the Department Executive Committee representative.

As I have traveled around the state, I am truly impressed by the leadership in the chapters. I want to say

thank you to the leaders and volunteers who ensure the organization continues to provide services to our veterans. I want to specifically mention the volunteers – the volunteer van drivers and the volunteers at the Fargo VA Health Care System. You have a significant impact on the lives of our veterans. Also, I want to say thanks to the leaders in our chapters.

Two of the highlights of my year as your commander were the national convention and the legislative conference. At both of these activities, I learned about the efforts and activities of the DAV at the national level. It is amazing what this organization accomplishes. Our National Service Officers work closely with thousands of veterans each year to ensure veterans receive the benefits which they have earned through their military service. The basis of our service programs -- veterans helping veterans -- has improved the lives of millions of veterans since the founding of the DAV. Our legislative staff works effectively with congress and the VA to provide adequate funding for VA programs and to ensure the VA provides those earned benefits in an efficient manner.

I am looking forward to our first post-convention department event. Our annual Veterans Home Picnic is being scheduled as this issue of the newsletter gets published. We look forward to the picnic which is tentatively scheduled for June 13.

DAVA DEPARTMENT COMMANDER REPORT



Mary Holzworth
Department Commander DAVA

Wow how time flies. It seems like it was just yesterday that you elected me as your Department Commander. Thank you for your support.

As we are approaching our annual convention, I would like to welcome Craig Johniken from Texas, our National Representative. Welcome Craig and we hope you enjoy your time in North Dakota. Also, at our convention, we will recognize our leaders and volunteers in the organization. I am thankful for your support of the DAV programs. I especially would like to thank the leaders in the Department. Since it is spring and I am thinking about outdoor activities after a long winter, let me use an analogy from baseball. Thank you leaders who have always "stepped up to the plate", when I have needed assistance. I really appreciate your cooperation and help.

I would like to pass along a few reminders to our units: Elections: As most of the units will hold their elections soon, this is a reminder that it is important to notify all members of the election date. 990-N e-postcard. This is an annual requirement. Units are required to send filing confirmation to state and national headquarters.

As a reminder it is not too late to make your reservations for the Department Convention. I hope to see you in Mandan.



Don't Forget To Remember Memorial Day 2013

SOME GONE NONE FORGOTTEN



MARK YOUR CALENDAR

DAV DEPARTMENT CONVENTION
April 27-29, 2013
 7 Seas Motel
 Mandan, ND

DAV ORIENTATION
July 13-16, 2013
 Cold Springs, KY

DAV NATIONAL CONVENTION
August 10-13, 2013
 Hilton Orlando
 Orlando, FL

DAV AUXILIARY NATIONAL FALL CONFERENCE
October 3-5, 2013
 Cincinnati, OH

DAV and DAVA DEPARTMENT FALL CONFERENCE
October 11-12, 2013
 Valley City, ND

DAV 14th DISTRICT MEETING
October 18-19, 2013
(Tentative)
 Kelly Inn
 Fargo, ND



DEPARTMENT CONVENTION

It is not too late to attend the DAV North Dakota Department Convention. The convention will be held April 26-28, 2013 at the 7 Seas Motel in Mandan, ND. Room reservations can be made at 701-663-7401.

DISABLED AMERICAN VETERANS DEPARTMENT OF NORTH DAKOTA DEPARTMENT OFFICERS 2012-2013

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DEPARTMENT CHAPLAIN
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ADJUTANT
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TREASURER
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JUDGE ADVOCATE/INSP. GENERAL
 Jan Novontny

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Annual Cost-of-Living Adjustment

(DAV Commander's Action Network)

Bills Introduced that Would Provide Annual and Automatic COLA

Rep. John Runyan (NJ) introduced similar bills, H.R. 569 and H.R. 570, that, if enacted into law would affect cost-of-living adjustments (COLA) in VA compensation and pension benefit payments. H.R. 569 would increase effective on December 1, 2013, the rates of compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation (DIC) for the survivors of certain disabled veterans. H.R. 570 would provide for automatic annual COLA adjustments each year on December 1st in the rates of disability compensation and the rates of DIC for survivors.

Both bills contain provisions that would round down less than whole dollar amounts of COLA increases to the next lower dollar. DAV and other veterans service organizations strongly oppose this rounding-down feature which, for over twenty years, has reduced compensation and pension payments by millions of dollars – all at the expense of disabled veterans and their families. While DAV supports the overall purposes of these bills to provide COLA increases, applying a rounding-down policy to disabled veterans' payments is wrong and should be halted.

H.R. 569 currently has 5 cosponsors and H.R. 570 has 2 cosponsors; both bills were referred to the House Committee on Veterans' Affairs.

You may use the prepared electronic letter on the Commander's Action Network website or draft your own to urge Representative Cramer to cosponsor these important bills, to remove the objectionable language that would round down COLA payments, and to bring these bills to the floor of the House for a vote as soon as possible.

As always, we appreciate your support of DAV and you grassroots activism in participating in DAV CAN, the Commander's Action Network. Your advocacy helps make DAV a highly influential and persuasive organization in Washington.

Thank you for all you do for America's veterans and their families.

Welcome Packets are Next Step in TRICARE West Region Transition

FALLS CHURCH, Va. – TRICARE West Region beneficiaries should have received a package from the Office of the Asst. Sec. for Defense (Health Affairs) in their mailboxes. UnitedHealthcare Military & Veterans, the incoming West Region health care support contractor, is sent out welcome packages in late February and early March.

The welcome packets include contact information for UnitedHealthcare, where to file claims, and information on continuing automatic payments, new case managers, referrals and authorizations. TRICARE beneficiaries should read their packets carefully to see if they have to take any actions to prepare for the April 1, 2013 transition to UnitedHealthcare.

One important date highlighted in the package is March 11, 2013 when beneficiaries must switch their automatic payment authorizations to UnitedHealthcare to maintain uninterrupted coverage.

Also highlighted are new features and benefit enhancements to improve beneficiaries' access to quality providers and decrease wait times. Enhancements include Convenience Care Clinics, the UnitedHealth Premium Designation Program of providers and expanded telemedicine opportunities.

The packets contain information about how beneficiaries can request that their current providers remain part of the TRICARE network after the transition to UnitedHealthcare takes place. Beneficiaries can ask their providers if they are members of the UnitedHealthcare network, and if not, encourage them to sign up.

West Region beneficiaries can access additional information about the transition by visiting the UnitedHealthcare website at www.uhcmilitarywest.com or reach UnitedHealthcare customer service at 1-877-988-9378. They may also visit the TRICARE website at www.tricare.mil/westtransition.



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THANK A VETERAN TODAY!

National Deployment of Paperless Claims Processing System Underway - Improves Benefits Delivery

WASHINGTON – The Department of Veterans Affairs announced today the nationwide transition to paperless processing of Veterans' disability claims at its regional benefits processing offices is underway. VA is aggressively building a strong foundation for its new electronic claims processing system, called Veterans Benefits Management System (VBMS) – a lasting solution that will transform how VA eliminates the backlog in 2015.

“Our approach to claims processing is being modernized to better serve Veterans and address the complex claims our employees are dealing with every day,” said Secretary of Veterans Affairs Eric K. Shinseki. “We continue to transform our claims system to be more responsive through new processes and technology, because taking care of our Veterans and their loved ones is our highest priority.”

As of December 2012, 18 VA regional offices have implemented the new system and are beginning to process newly received compensation claims in an entirely digital format. The VA is on track for full deployment of the system to the remaining 38 regional offices in 2013.

“For our Veterans, VBMS will mean faster, higher-quality and more consistent decisions on claims. We recognize that too many Veterans are waiting too long to get the benefits they have earned, and that is unacceptable. This is a decades-old problem, and we are implementing a robust plan to address it,” said Undersecretary for Benefits Allison A. Hickey. “For our employees, VBMS will be a more user-friendly system that offers better access to decision-level information, rules-based calculators, and automated tools that help them process claims more consistently.”

This marks a major milestone in VA's transformation of the processes and systems used to deliver benefits to Veterans, their families, and survivors, even while the Veterans Benefits Administration (VBA) has completed a record-breaking 1 million claims per year the last three fiscal years. Critical to VA's transformation is ending the reliance on the outmoded paper-intensive processes which prevent timely and accurate claims processing. VA is deploying technology solutions which improve access, drive automation, reduce variance, and enable faster and more efficient operations to eliminate the backlog.

The current backlog of claims is the result of increased demand,

over a decade of war with many Veterans returning with severe, complex injuries, and increased outreach to Veterans informing them of their benefits. Secretary Shinseki also made important decisions to recognize medical conditions related to Agent Orange service in Southeast Asia, and to simplify the process to file claims for combat PTSD. These decisions expanded access to benefits for hundreds of thousands of Veterans and brought significantly more claims into the system.

VBMS was pilot-tested at select regional offices between 2010 and 2012, with improvements and greater functionality added to system software releases throughout the testing period. In pilot programs, the new system cut the time to process claims nearly in half. The most recent version of VBMS software allows VA claims representatives to:

- establish Veterans' claims entirely in a digital environment as “e-folders,”
- receive, store, and view Veterans' submitted claim documents electronically,
- identify and track the evidence VA needs from beneficiaries and other outside sources,
- quickly direct claims electronically among regional offices to better match VA's workload with available workforce capacity.

The system also enables VA claims processors to access online rules-based calculators and drop-down menus to enhance standardization and accuracy of decisions, for both electronic claims and those received by VA in paper form and uploaded into VBMS. Processors will also use VBMS to generate letters to Veterans concerning their claim status and send requests to private physicians for medical records needed to evaluate claims.

When VBMS is combined with VA's other Transformation initiatives—including improved claims rater training, cross-functional claims handling teams, and prioritized lanes to speed processing based on type of claim—VA will be positioned to meet Secretary Eric K. Shinseki's priority goal of processing Veterans' claims in 125 days or less, at 98 percent accuracy, by the end of 2015.

For more information on VA's transformation go to <http://benefits.va.gov/transformation/>

New Automation Cuts Post 9/11 GI Bill Claims Time By More Than Half

WASHINGTON – As part of its ongoing transformation from paper-based to electronic claims processing, the Department of Veterans Affairs has continued to improve the automated payment of benefits for Veterans participating in the Post-9/11 GI Bill education program. As a result, VA is now providing benefit payments to currently enrolled students in an average of six days – cutting by more than half the processing time experienced during the spring enrollment period last year.

This enhancement to VA's automated processing system, called the Long Term Solution (LTS), uses approximately 80 business rules to support end-to-end automation of Post-9/11 GI Bill claims, ensuring accurate payments without the need for manual handling.

During the month of February, 46 percent of incoming documents (over 115,000) for enrolled students were fully automated, and an additional 33 percent were partially automated. For enrolled students starting a new semester of classes, processing is taking an average of six days to complete. For new students using the benefit for the first time, the

average time to establish their eligibility under the Post-9/11 GI Bill is around 24 days.

“We are happy to report that our newest technology has substantially reduced the amount of time it takes to process Veterans' education claims,” said Under Secretary for Benefits Allison A. Hickey. “It's a good example of VBA's transformation that is delivering better service to the fast-growing number of Post 9/11 GI Bill participants.”

The rules-based processing approach LTS uses is also being built into VA's technology for VA's paperless disability claims processing—the Veterans Benefits Management System (VBMS).

Over the past three and 1/2 years, VA has provided \$27 billion in Post-9/11 GI Bill benefits to approximately 938,000 Veterans, Servicemembers, and their families, and to the universities, colleges, and trade schools they attend. For more information on VA education benefits go to <http://www.gibill.va.gov/>.

Disability Claims Initiative Reduces Processing Time

Medical Records Review Can Eliminate In-Person Exam Requirements

WASHINGTON – The Department of Veterans Affairs has launched a new initiative that could eliminate the requirement for an in-person medical examination for some Veterans and shorten the time it takes to process Veterans' disability compensation claims.

The initiative is called Acceptable Clinical Evidence (ACE). This initiative was developed by both the Veterans Health Administration (VHA) and the Veterans Benefits Administration (VBA) in a joint effort to provide a Veteran-centric approach for disability examinations. Use of the ACE process opens the possibility of doing assessments without an in-person examination when there is sufficient information in the record.

Under ACE practices, a VA medical provider completes a Disability Benefits Questionnaire (DBQ) by reviewing existing medical evidence. This evidence can be supplemented with information obtained during a telephone interview with the Veteran – alleviating the need for some Veterans to report for an in-person examination.

“ACE is a process improvement that will help us meet our goal to eliminate the claims backlog and provide more timely benefits to our Veterans, their families and survivors,” said Undersecretary for Benefits Allison A. Hickey. “The initiative also saves Veterans the inconvenience and costs associated with attending a medical examination.”

When a VA medical provider determines VA records already contain sufficient medical information to provide the needed documentation for disability rating purposes, the requirement for Veterans to travel to a medical facility for an examination may be eliminated.

If VA can complete a DBQ by reviewing medical records already on file, it will use the ACE process. This would then expedite the determination of disability ratings – in turn eliminating the wait time to schedule and conduct an exam from the claims process.

During a 15-month pilot test at one VA regional claims processing office, 38 percent of claims submitted were eligible for ACE.

The ACE initiative is a part of the VBA's agency-wide Transformation Plan – a five-year, multifaceted organizational change that is based on more than 40 personnel, process and technology initiatives designed to improve claims processing. The goal of the Transformation Plan is to eliminate the claims backlog and process all claims within 125 days with 98 percent accuracy in 2015.

To learn more about VBA Transformation Initiatives, visit: <http://benefits.va.gov/transformation/>.

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DISABLED AMERICAN VETERANS



FRANCIS J. BEATON Chapter No. 1

Fargo, North Dakota

Meetings Held 2nd Thursday of each month

VA Issues New Report on Suicide Data

WASHINGTON – The Department of Veterans Affairs (VA) today released a comprehensive report on Veterans who die by suicide. In the past, data on Veterans who died by suicide was only available for those who had sought VA health care services. Today's report also includes state data for Veterans who had not received health care services from VA, which will help VA strengthen its aggressive suicide prevention activities. The report indicates that the percentage of Veterans who die by suicide has decreased slightly since 1999, while the estimated total number of Veterans who have died by suicide has increased.

“The mental health and well-being of our courageous men and women who have served the Nation is the highest priority for VA, and even one suicide is one too many,” said Secretary Eric K. Shinseki. “We have more work to do and we will use this data to continue to strengthen our suicide prevention efforts and ensure all Veterans receive the care they have earned and deserve.”

In accordance with the President's Aug. 31, 2012, Executive Order, VA has completed hiring and training of additional staff to increase the capacity of the Veterans Crisis Line by 50 percent. The Veteran Crisis Line has made approximately 26,000 rescues of actively suicidal Veterans to date. Additionally, VA has initiated a year-long public awareness campaign, “Stand By Them,” to educate families and friends on how to seek help for Veterans and Service Members in crisis. VA has launched a national public service announcement “Side by Side.”

VA is currently engaged in an aggressive hiring campaign to expand access to mental health services with 1,600 new clinical staff, 300 new administrative staff, and is in the process of hiring and training 800

peer-to-peer specialists who will work as members of mental health teams.

The report issued today is the most comprehensive study of Veteran suicide rates ever undertaken by the Department. On June 16, 2010, Secretary Shinseki engaged governors of all 50 states, requesting their support in helping to collect suicide statistics. With assistance from state partners providing

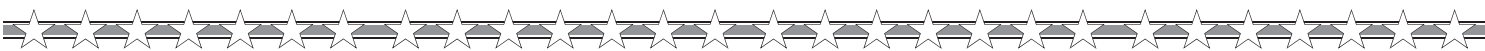
real-time data, VA is better able to assess the effectiveness of its suicide prevention programs and identify specific populations that need targeted interventions.

This new information will allow VA to better identify where those Veterans at risk may be located and improve the Department's ability to target specific suicide interventions and outreach activities in order to reach Veterans early and proactively. The data will also

help VA continue to examine the effectiveness of suicide prevention programs being implemented in specific geographic locations or care settings in order to replicate them in other areas if they have been effective.

VA has implemented comprehensive, broad ranging suicide prevention initiatives, including a toll-free Veterans Crisis Line, placement of Suicide Prevention Coordinators at all VA Medical Centers and large outpatient facilities, and improvements in case management and reporting. Immediate help is available at www.VeteransCrisisLine.net or by calling the Crisis Line at 1-800-273-8255 (push 1) or texting 838255.

The full report can be found on VA's [website](#) along with a [summary response](#) from VA Under Secretary for Health, Dr. Robert A. Petzel.



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Important Legislation on Concurrent Receipt

(DAV Commander's Action Network)

Please Contact Your Representative Today

On January 15, 2013, Rep. Gus Bilirakis (FL) introduced H.R. 303, the Retired Pay Restoration Act. This bill would end the unfair policy of forcing many military longevity retirees to forfeit some of their retired pay in order to receive equal amounts of disability compensation from the Department of Veterans Affairs (VA). The effect of this policy means military retirees are paying for their own disability with their military retired pay. This unfair policy has adversely impacted disabled veterans and their families for more than a century, but was partially repealed by Congress in 2004. Under current law disabled veterans with 20-plus years of active military service who are also in receipt of a VA disability determination of 50 percent or higher may retain both military retirement pay and their VA compensation.

In line with Disabled American Veterans (DAV) resolution 019, H.R. 303 would end the longstanding and unfair practice of the government's withholding of military longevity retired pay in exchange for VA disability compensation, regardless of disability rating. DAV believes what is unfair for a veteran rated 50 percent disabled or higher by the VA is equally unfair for a disabled veteran rated 40 percent disabled or lower. Disabled military longevity retirees should not be penalized by the government for any reason.

Currently, H.R. 303 has bipartisan support. This legislation was referred to the House Committee on Armed Services, and in addition to the Committee on Veterans' Affairs for a period to be determined by the Speaker of the House. Please use the prepared e-mail on the DAV Commander's Action Network, or draft your own message, to request that Representative Cramer support this important bill and ask that it be brought to the floor for a vote and passed as soon as possible. Thank you for all that you do for veterans and their families. We need your grassroots action to gain Congressional enactment of this important legislation.

VA Halts Further Clinic Leases

(DAV Commander's Action Network)

Federal law requires the Department of Veterans Affairs (VA) to obtain Congressional approval for a commercial lease of a future VA medical facility if the estimated first-year lease cost exceeds \$1 million. This policy has been in place for more than a decade. Dozens of leases for VA-operated community-based outpatient clinics have been approved under this procedure. Using a leasing authority rather than constructing VA-owned facilities allows VA to quickly establish convenient primary care facilities for veterans in communities where they live. Veterans who use these community clinics report high satisfaction with their care and the convenience they offer.

In 2012, in evaluating 15 proposed VA leases that each exceed the \$1 million threshold, the Congressional Budget Office (CBO) concluded that Congressional rules require that funds to offset *the entire 20-year prospective lease cost* would need to be included either in the VA budget, or would be taken from funding of ongoing veterans programs—all in the first year of each lease. CBO indicated this policy also would apply to renewals of existing VA leases. This CBO decision multiplied VA's costs for these proposed 15 leases by 20-fold, for a total need of \$1.2-\$1.5 billion in Fiscal Year (FY) 2013. Since funds of this magnitude could not be diverted from other VA accounts for this surprising new requirement and aren't covered in the budget request that had been submitted to Congress, these 15 leases were dropped from further Congressional consideration last year.

In VA's current planning, including 15 new community-based outpatient clinics located in California, Connecticut, Florida, Georgia, Hawaii, Kansas, Louisiana (2 sites), Massachusetts, New Jersey, New Mexico, Puerto Rico, Texas (2 sites), and South Carolina, VA also projects a need to lease or renew existing leases for 23 more community-based health care facilities through FY 2017 to provide care for more than 340,000 veterans across 22 states and US territories.

Unless CBO changes its policy or Congress acts to overturn this CBO decision with legislation or makes a change in House Rules in current funding policy, most if not all these leases are in jeopardy. Veterans consequently will be denied access to VA health care in these locations.

Even though this proposal doesn't impact North Dakota, your legislative committee has expressed our concerns about this unfair policy to both of our Senators and Representative Cramer. We informed them that this policy will negatively impact availability of services to wounded, injured and ill veterans. Unless a change is made, VA will be forced to buy land and construct government-owned clinics, or more likely will require veterans who need VA care to travel longer distances to receive it. VA-built clinics would be more expensive, would take much longer to approve and activate, and would reduce VA's flexibility to place and move facilities based on the changing needs of the veteran population. Forcing veterans to unnecessarily travel for care would increase inconvenience and add additional costs.



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VA Announces New Online Resources for Funeral Directors

WASHINGTON – The Department of Veterans Affairs announced today the availability of the new online funeral directors resource kit. Funeral directors nationwide may use the kit when helping Veterans and their families make burial arrangements in VA national cemeteries.

“We recognize that Veterans and their families need compassion when they approach funeral directors for help,” said Secretary of Veterans Affairs Eric K. Shinseki. “We want to assist directors by giving them the information and tools they need to aid these families.”

The website was created to enable funeral directors to find the most pertinent information to help families plan burials and apply for VA memorial benefits quickly. It has links

about eligibility, benefits and services plus videos and information regarding services offered with and without military funeral honors. The videos are available in English and Spanish. The website is available at <http://www.cem.va.gov/cem/funeraldirector.asp>.



VA maintains 3.2 million gravesites in 131 VA national cemeteries and interred more than 118,000 Veterans and family members in fiscal year 2012. Information on VA burial benefits can be obtained from national cemetery offices, from the Internet at www.cem.va.gov or by calling VA regional offices toll-free at 800-827-1000. To make burial arrangements at the time of need at a VA national cemetery, call the National Cemetery Scheduling Office at 800-535-1117.

Poem Available Online

Felix Zamora; a member of Chapter 2 who lives in La Junta, CO; has written a poem which he wants to share with fellow members. It is posted on – line on our DAV Member Portal site. I have posted it there because of the length of the poem. If you are not able to use the internet, I will mail you a copy if you send me a letter to the department headquarters.

Please take a few minutes to read this poem and we believe you will be inspired by his words and arrive at a deeper understanding of the issues regarding PTSD.

I also want to share with you the words Mr. Zamora sent me in the email attached to the newsletter: “I don't want to open up old wounds ... Over the years I have come to understand that it is only my opinion and I'm not trying to pass

the buck or rehash the war. It's over for me and I've let it go with the help of the Lord. I will say this: All the Vets that have read it have asked me for copies and I have given away hundreds on request at Veteran gatherings. They have told me that they too felt the same feeling I felt for years. I have dealt with the rage while feeling empathy for those that are still struggling with their experiences in Viet-nam. Some have also said that reading the poem helped them to identify with others who are still going through the symptoms of PTSD. I look forward to going back to North Dakota and visiting friend there. I hope we can meet and maybe have dinner together... Again thanks for your response to my inquiry. Sincerely yours Felix.”



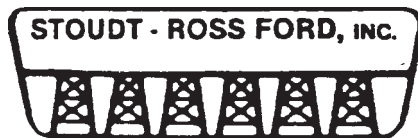
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ANDY NOMLAND
Chapter No. 2

Grand Forks, North Dakota

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MICHAEL E. DOBMEIER
Past Natl. Commander

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DISABLED AMERICAN VETERANS



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Valley City, North Dakota

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VA Will Use “Preliminary Findings” To Reduce Verification Denials of Veteran-Owned Small Businesses

WASHINGTON - To speed eligibility determinations of Veteran-owned small businesses for Department of Veterans Affairs' "Veterans First" contracts, VA will allow applicants the opportunity to correct minor deficiencies before an initial denial is issued. Starting May 1, VA will begin providing preliminary findings to applicants before completing a comprehensive review of their submissions. This is expected to greatly reduce the number of VA's initial denials and subsequent requests for reconsideration from companies.

“A large percentage of verification denials are due to single points of failure that can be easily and quickly corrected. This improved process will enable us to bring more deserving Veteran business owners into VA's system,” said Secretary of Veterans Affairs Eric K. Shinseki. “Our Center for Veterans Enterprise (CVE) will refine and measure the new process through pilot testing that has begun.”

Firms that would be denied based on easily corrected issues will receive a preliminary finding before a determination letter of eligibility is issued. They will have 48 hours to respond with their intent to correct and resubmit the documents within a specified timeframe. All Veteran-owned companies receiving preliminary findings will be encouraged to work with verification-assistance counselors to address identified issues that might result in denial.

CVE has initiated a series of limited pilots to exercise and refine this new process for applying for verification as a Veteran-Owned small business. The program is aimed at eliminating a large percentage of verification denials that are due to single points of failure.

As VA has improved the program and processes, the average time to initial determination has been reduced from more than 130 days during the summer of 2011 to an average of 46 days for those applications completed last month.

This is the most recent initiative aimed at improving the verification process. In June 2012, Secretary Shinseki announced that VA would double the amount of time - from one year to two years - before the owners of service-disabled, Veteran-owned small businesses and Veteran-owned small businesses had to re-verify their status with VA.

The next generation Verification Case Management System (VCMS) is currently under development, with an estimated contract award for a new system in May 2013. This will be a phased program with initial operational capability expected in October 2013.

In addition to the current Verification Assistance program elements, a fourth dimension to the program will launch with the pilot of VA's first Pre-Application workshop for Veterans on March 13, 2013, at an event hosted by the SDVOSB Council in Virginia. This workshop will outline what a Veteran needs to know and do to put together a successful verification application.

VA encourages feedback on the process and will post additional information and the listing of easily correctable issues on www.VetBiz.gov. CVE has also established a help desk service to address questions at [202-303-3260](tel:202-303-3260).

VA/DoD Continue to Improve Online Access to Benefit Info New Functionality Added to Online Benefits Portal

WASHINGTON - The Departments of Veterans Affairs and Defense (DoD) just released improvements to the functionality of *eBenefits*, a joint self-service web portal that provides registered users with secure online information and access to a variety of military and Veterans benefits resources.

“*eBenefits* is clearly becoming the platform of choice for Veterans seeking access to the numerous benefits they have earned,” said Undersecretary for Benefits Allison A. Hickey. “The increasing capabilities of *eBenefits* give Veterans and Servicemembers greater flexibility in securing the information they are looking for.”

The latest release, *eBenefits* 4.3, allows for easy navigation of the online disability compensation claim submission process using interview-style questions and drop-down menus similar to tax-preparation software, instead of a traditional fill-in-the-blank form. The latest release also pre-populates the application with information from a Veteran's record in VA's secure database. Veterans can view processing times for each phase of their claim.

Other site improvements include a tool to help determine if a Veteran has eligibility for Vocational Rehabilitation and Employment benefits, a calculator for military reservists to determine retirement benefits, and a search function that identifies a claimant's appointed Veterans service representative, with links to Google Maps indicating the location of their nearest representative's office. Servicemembers and Veterans can also access records like Post-9/11 GI Bill enrollment status, VA payment history, and DoD TRICARE health insurance status.

The *eBenefits* application is a key component of VA's ongoing transformation to a digital environment for Veterans' benefits delivery and fully supports VA's Veterans Relationship Management initiative that provides Veterans with the ability to access information about their benefits anywhere, anytime and empowers them to manage those benefits through self-service capabilities. Additional functionality and features will continue to be added to the site throughout the coming months.

To access *eBenefits*, Veterans and Servicemembers must obtain a DoD Self-Service Logon (DS Logon), which provides access to several Veterans and military benefits resources using a single username and password. The service is free and may be obtained in person at a VA Regional Office, DoD ID Card station or online at www.ebenefits.va.gov.

There are currently 2.2 million users with access to *eBenefits*, and VA is on track to meet the 2013 agency priority goal of 2.5 million users, as outlined for VA on www.Performance.gov.

With the most-recent release, *eBenefits* has successfully completed 13 consecutive quarterly releases since October 2009 with 47 self-service features enabling Servicemembers and Veterans the ability to download copies of their official VA and military correspondence—to include Veterans civil service preference, service verification, and benefits verification letters; military records; and VA home loan certificates of eligibility, just to name a few.

For more information about VA benefits go to <http://www.benefits.va.gov> and *eBenefits* at www.ebenefits.va.gov.

VA Promotes National Wear Red Day to Raise Awareness of Heart Disease in Women Veterans

WASHINGTON – The Department of Veterans Affairs joins the nation in celebrating National Wear Red Day today to educate women Veterans about the risks of heart disease—the leading cause of death in American women and women Veterans. VA employees are encouraged to wear red to symbolize their awareness.

“VA is dedicated to providing the highest quality care for women Veterans,” said Secretary of Veterans Affairs Eric K. Shinseki. “Through VA’s collaboration with the American Heart Association’s Go Red For Women movement, we are prioritizing heart disease prevention and outreach to women Veterans.”

The VA-American Heart Association (AHA) collaboration launched in May 2012, enabling both organizations to work together to maximize their outreach and education efforts.

Cardiovascular disease frequently affects the fastest-growing demographic in VA’s female patient population—those who served in the Vietnam, post-Vietnam, and Gulf War I eras. Nearly one-third of women Veterans under VA care have high cholesterol levels or high blood pressure. To address this issue, VA has been aggressive in its fight against heart disease in women and has worked to eliminate gender disparities in prevention and treatment of cardiovascular risk factors. Two recent VA reports show VA has eliminated significant gender disparities in high blood pressure and diabetes and has reduced gender disparities in other areas.

In addition, a VA cardiovascular workgroup is examining ways to improve women Veterans’ heart health. VA also held a Healthy Heart event and expo outside its Washington headquarters in September for VA employees, many of whom are Veterans, and the public. VA is encouraging facilities to coordinate similar events locally.

“Addressing issues like cardiovascular disease head-on ties directly with our focus on personalized, proactive care for VA patients,” said Undersecretary for Health Robert Petzel, M.D. “We will continue to exceed expectations in this and other critical issues facing women Veterans.”

Women serve in all branches of the military, representing 15 percent of today’s active duty military and nearly 18 percent of National Guard and Reserve forces. Women are the fastest growing cohort within the Veteran community. Of the 22.7 million living Veterans, more than 1.8 million are women. They comprise nearly 8 percent of the total Veteran population and more than 6 percent of all Veterans who use VA health care services. On Jan. 25, VA announced the award of over 30 grants totaling more than \$2 million to VA facilities for projects that will improve emergency health care services for women Veterans, expand women’s health education programs for VA staff, and offer telehealth programs to female Veterans in rural areas.

To learn more about VA programs and services for women Veterans, visit: www.va.gov/womenvet and www.womenshealth.va.gov.



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VA Hires More Mental Health Professionals to Expand Access For Veterans

Part of Comprehensive Effort to Boost Mental Health Services

WASHINGTON – The Department of Veterans Affairs (VA) today announced that it has made significant progress in providing increased access to mental health care services for our Nation's Veterans by hiring new mental health professionals. Last year, Secretary Eric K. Shinseki announced a goal to hire 1,600 new mental health clinical providers and 300 administrative support staff. The President's Aug. 31, 2012, Executive Order requires the positions to be filled by June 30, 2013. As of Jan. 29, VA has hired 1,058 mental health clinical providers and 223 administrative support staff in support of this specific goal.

"We aren't slowing down our efforts even after these initial positive results," said Shinseki. "We still need to hire more mental health professionals in order to reach our goal, but each new hire means we can treat more Veterans and provide greater access to our mental health services."

Overall, VA has set aggressive goals to fill these new positions as well as existing and projected mental health vacancies within the VA system. As of Jan. 29, VA has hired a total of 3,262 mental health professionals and administrative support staff to serve Veterans since the goal was announced, which includes the new 1,058 mental health clinical providers and 223 administrative support staff. The mental health professionals hired include psychiatrists, psychologists, social workers, mental health nurses, licensed professional mental health counselors, licensed marriage and family therapists, and addictions therapists.

VA provides a comprehensive system of high-quality mental health treatments and services to Veterans. The department is utilizing many tools to recruit and retain one of the largest mental health care workforces in the nation to serve Veterans better by providing enhanced services, expanded access, longer clinic hours, and increased telemental health capability to deliver services.

"Today, as Veterans return home from missions in Afghanistan and those who previously returned from Iraq, it is imperative that we ensure they have access to timely, high-quality mental health care," said

Undersecretary for Health Dr. Robert A. Petzel. "The invisible scars of war follow them as they return from theater. It is our responsibility to identify these wounds, treat them and prevent the long-term physical, mental and social consequences of them."

In accordance with the President's Aug. 31, 2012, Executive Order, VA has also completed hiring and training of additional staff to increase the capacity of the Veterans Crisis Line (1-800-273-8255, press 1) and phone lines have been increased by 50 percent. As of Dec. 31, 2012, the Veterans Crisis Line has received over 747,000 calls, over 83,000 chats, as well as over 5,000 texts, and has saved more than 26,000 Veterans in imminent danger.

There are many Veterans who are willing to seek treatment and to share their experiences with mental health issues when they share a common bond of duty, honor, and service with the provider. VA is in the process of hiring and training 800 Peer Specialists in the coming year. Additionally, VA has awarded a contract to the Depression and Bipolar Support

Alliance to provide certification training for Peer Specialists. This peer staff is expected to all be hired by Dec. 31, 2013, and will work as members of mental health teams.

The number of Veterans receiving specialized mental health treatment from VA has risen each year, from 927,052 in fiscal year (FY) 2006 to more than 1.3 million in FY 2012. One major reason for this increase is VA's proactive screening of all Veterans to identify those who may have symptoms of depression, Post Traumatic Stress Disorder (PTSD), problem use of alcohol or who have experienced military sexual trauma (MST).

Mental health care providers seeking opportunities to serve our Nation's Veterans can find additional information about rewarding VA careers and apply for jobs online at www.vacareers.va.gov and www.usajobs.gov. To locate the nearest VA facility or Vet Center for enrollment and to get scheduled for care, Veterans can visit VA's website at www.va.gov.



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VA Joins With Million Hearts Campaign Joint Effort to Fight Heart Disease, Prevent Heart Attacks

WASHINGTON – February is American Heart Month, a time to educate Americans on what they can do to live heart-healthy lives. With that mission in mind, the Department of Veterans Affairs (VA) and the Department of Health and Human Services have joined forces to promote the Million Hearts™ campaign — a national initiative that has set a goal of preventing one million heart attacks and strokes over five years.

The Million Hearts™ campaign encourages a targeted focus on the “**ABCS**” – **A**spirin for people at risk, **B**lood pressure control, **C**holesterol management, and **S**moking cessation — all of which address the major risk factors for cardiovascular disease and can prevent heart attacks and strokes.

“The Million Hearts campaign encourages Americans to receive appropriate care for cardiac risk factors and to make healthy choices,” said VA Secretary Eric K. Shinseki. “VA is proud to be a partner in this important campaign.”

VA has tobacco use cessation clinicians at each VA facility, as well as dietitians who are available to provide nutrition counseling. MOVE! — VA's national weight management program— is helping Veterans lose weight and keep it off. And our highly-trained VA pharmacists are talking to their patients about the importance of staying on blood pressure medications and controlling their hypertension.”

Many Veterans in VA primary care population have chronic conditions, and many have multiple diagnoses. Of this population, 52 percent have hypertension, 36 percent have obesity, 24 percent have diabetes, and 18 percent have coronary heart disease.

VA Undersecretary for Health Robert Petzel,

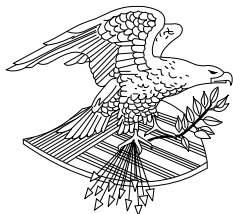
M.D., described the Million Hearts™ campaign as an important partner in VA's disease prevention efforts. “We'll continue communicating our Million Hearts goals to our front-line providers and patients,” he said. “We'll continue promoting effective management of the ABCS goals through our Patient Aligned Care Teams and our Healthy Living Campaign. And we'll continue to identify and partner with community efforts to promote and improve smoking cessation and overall heart health.”

“Our goal is to provide high value care for all the Veterans we serve,” said Roxane Rusch, VA's deputy assistant deputy under secretary for health for quality, safety and value. “This means focusing on the individual's

experience as well as how we are improving population health over time.”

VA's increased focus on helping patients quit smoking, lose weight, eat healthier, and become more physically active, will enhance the successful tobacco and alcohol intervention programs already in place, and help Veterans achieve greater success.

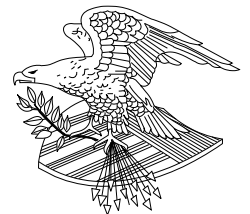
In its efforts to place more emphasis on disease prevention, VA has established a Health Promotion/Disease Prevention Program Committee at every VA medical center. Committee members represent a range of disciplines and content areas. Their job is to oversee the prevention-related activities of the facility and to support VA's “Healthy Living” campaign, which was launched in 2011 to continually emphasize specific healthy living messages and suggestions for Veterans. These messages cover core prevention areas including nutrition, physical activity, weight management, smoking, alcohol use, stress management, clinical preventive services, safety, and health care communication.



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New Members Appointed to VA Advisory Committee on Minority Veterans

WASHINGTON – The Department of Veterans Affairs has announced the appointment of six new members to the Advisory Committee on Minority Veterans.

The committee advises the Secretary of Veterans Affairs regarding the needs of minority Veterans with respect to compensation, health care, rehabilitation, outreach, and other benefits and programs administered by the VA.

“Our Veterans are reflective of the society in which we live, and we draw strength from their diversity,” said Secretary of Veterans Affairs Eric K. Shinseki. “VA relies on this committee to provide sound counsel on issues that impact the minority Veteran population, and we welcome the newest members.”

Chartered on Nov. 2, 1994, the committee makes recommendations for administrative and legislative changes. The committee members are appointed to one, two, or three-year terms.

The new committee members include:

- Tommy L. Daniels, Brig. Gen., retired Air Force, of Fort Worth, Texas; General Daniels is a tireless advocate for the equitable treatment of Veterans at the state and federal level. He is a strong supporter of Junior ROTC programs in the Fort Worth school system as well as promoting aerospace and aviation opportunities for minorities.
- Raymond Jardine, Col., retired Army, of Honolulu, Hawaii; Dr. Jardine's professional experience includes owning and operating Native Hawaiian Veterans, LLC, which provides a wide variety of services to include homeland security, emergency management, information technology, community relations, public outreach, and professional staff augmentation.
- Thanh Dinh, Air Force Veteran of Burke, Va.; Mr. Dinh currently serves as Senior Consultant and Chief Operating Officer for the Odin Group, a Service-Disabled Veteran-Owned Small Business and certified Minority Business Enterprise. In this capacity, Mr. Dinh was responsible for co-authoring a long term strategic plan for VA's Veterans Benefit Administration that focused on new initiatives designed to transform the existing VA claims processing operation.
- Harold Hunt, Army Veteran of Pembroke, N.C.; Mr. Hunt has served as Post and District Commander for the Veterans of Foreign Wars, Past Chief of Staff Military Order of the Purple

Heart State of North Carolina, and a member of the American Legion, Disabled American Veterans, Lumbee Warriors Association, and National Association of County Veterans Service Officers.

- Shelia Mitchell, Air Force Veteran of Manassas, Va.; Ms. Mitchell currently serves as President and Chief Executive Officer for Veterans at Your Service, LLC, a Service-Disabled Veteran-Owned Small Business that specializes in assisting Veterans in preparing claims for VA benefits.
- Elisandro T. Diaz, Navy Veteran of Santa Ana, Calif.; Mr. Diaz currently serves on the board of the Orange County Home Ownership Prevention Collaborative; with an emphasis on helping Veterans preserve their homes.

There are approximately 4.7 million minority veterans in the United States and its territories, thus comprising nearly 21 percent of the total Veteran population.

The current members of VA's Advisory Committee on Minority Veterans are:

- Clara L. Adams-Ender, Brig. Gen., retired Army, is president and chief executive officer of Caring About People with Enthusiasm Associates, Inc., a management consulting and inspirational speaking firm
- **Oscar B. Hilman, Brig. Gen., retired Army, served as commander of the 81st Brigade Combat Team in support of Iraqi Freedom II (2004-2005) where his brigade received two combat streamers.
- Benjamin C. Palacios, Command Sgt. Maj., retired Army, is assistant VP, regional account manager for Guam and CNMI region for Science Application International Corporation (SAIC).
- Celia Renteria Szelwach, Army Veteran, provides project management and technical leadership of public health projects focused on rural, women, and minority Veterans as program manager for Atlas Research.
- Marvin Trujillo, Jr., Marine Corps Veteran, is a Laguna Tribal Member who belongs to the Road Runner, Little Parrot, and Turkey Clans. He serves as the Tribal Veterans Service Officer for the Pueblo of Laguna and the Co-Chair of the All Indian Pueblo Council Veterans Committee.

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Legislative Committee Go To Meetings



Legislative Committee with Senator John Hoeven. Left to Right: Joe Litzinger, Mike Dobmeier, Senator Hoeven, Tom Saddler, Warren Tobin and Richard Krajewski.

Legislative Committee with Representative Cramer.



Legislative Committee during the meeting with Senator Heitkamp.



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