### <u>AFFIDAVIT</u>

I, SAMUEL HENNON, Plaintiff in the case of HENNON v. ROLLINS, ROGERS and STEPHENS, case no. 07 CV 5235, pending in the U. S. District Court for the Northern District of Illinois, make the following statements based on personal knowledge and observations and in support of FURTHER AFFIANT SAYETH NOT.

- 1. I am a veteran of the U. S. Navy serving between 1969 through 1972.
- 2. During my time in service I suffered injuries that were service connected.
- 3. I used PVA to represent me on my claims to benefits for service connected disabilities.
- 4. In April 2004, I received an award for disability compensation for service connected disabilities of 100% which would have given me an award of @ \$2,600/month.
- 5. By July 2007 the award amount was \$3,172.00/month.
- 6. I met Bo Rollins, a part of the National PVA hierarchy, in spring of 2005 and he took issue with the fact that I had worked to get the Vaughn Chapter of PVA off probation.
- I was an active member of the Vaughan chapter of PVA (VCPVA) and was elected to the Board of the VCPVA in October 2005.
- 8. I have always been an outspoken advocate for veterans and helped them to put their disability cases together and helped them to file appropriate forms and directed them to service officers; I was the webmaster for Veterans for Unification; I was the founder of the Veterans Voting bloc Illinois chapter and created and ran websites for them; I was the founder and owner of WVBSR, which is a veterans broadcasting systems radio station.
- In my various advocacy roles I frequently had differences of opinions with VA officials including Michael Stephens.

- 10. Also in my various advocacy roles I frequently differed with Veterans service groups who were approved by VA to advocate for veterans including National PVA.
- In March 2006 I went to Washington D. C. to lobby congress on behalf of the National PVA regarding bills pending.
- 12. While in Washington D. C. on March 8, 2006 Doug Vollmer, the Administrative

  Executive Director for National PVA for Governmental Relations, said to me that I had
  embarrassed the organization with my questions to Senator Craig and Carl Blake, Senior
  Legislative Director and Blake Ortner, Associate Legislative Director objected to my
  bringing up the need to serve homeless veterans and said that this was not the time to
  bring that up.
- 13. After I returned from Washington I drafted a letter of complaint on the poor service being delivered by the National service officers of PVA and the service by Chicago Regional Office of VA.
- 14. In October 2006 I asked to review my file and was allowed to do so but was not allowed to copy from the files and was given only one hour to review. (See attached exhibit 14)
- 15. I learned from examining my VA records on October 19, 2006 with my wife, that Ed Rogers, National PVA field director, had been communicating without my knowledge or consent with Michael Stephens, the Director of the Chicago Regional VA office where he referred to Stephens as "My friend" and referred to my claim as a "pot of poop" in an e-mail dated April 7, 2006.
- 16. Further review of my VA benefits file showed that without my consent the PVA National field service officer Ed Rogers; Bo Rollins, National Director of Field Services; and Michael Stephens Of VA initiated a review of my disability benefits which made

- no sense because I was already receiving 100% benefits and had never requested any review nor was I advised that either VA or PVA was on their own reviewing my benefits file.
- 17. Examining the file I found a communication between Rogers, Stephens, and Rollins where reference was made to my veterans advocacy websites, the wording of an e-mail of April 20, 2006 stated "Look at the client's websites."
- 18. In June of 2006 I received a letter from National PVA indicating that VA was reviewing my benefit entitlements.
- 19. I had not requested this review and had no idea why there would be a review of my receiving a 100% disability benefit package.
- 20. On March 2, 2007, I received a letter from Chicago Regional Office reducing my benefits from 100% to 60%, which also meant a reduction of my monthly award from \$3,172 to \$1,826.00. (See attached exhibit 20)
- 21. Since March of 2007 to September 2009, I have lost \$39,000 in benefits. In addition I lost \$1,000 each year in educational benefits which the State of Illinois gives to 100% veterans tuition assistance of \$1,000 per child. I have two children who were eligible. I lost \$4,000 of this benefit.
- 22. I have also had to see my Psychiatrist Dr. George Paniotte, for the anxiety I suffered because of the actions by PVA and VA. (See attached exhibit 22)
- 23. With the 100% I could have been eligible for a vehicle allowance for adaptability 0f \$13,000 which I applied for and was denied.

## FURTHER AFFIANT SAYETH NOT.

Signed and swom to before me this 1st day of September, 2009.

Armand L. Andry Attorney for Plaintiff One South Dearborn, Suite 2100 Chicago, Illinois 60603 773/626-3058

Fax: 773/626-3061

e-mail: armandandry@hotmail.com

"OFFICIAL SEAL"
Sally M Andry
Notary Public, State of Illinois
Commission Expires 8/29/2010

### DEPARTMENT OF VETERANS AFFAIRS

Chicago VA Regional Office 2122 West Taylor Street Chicago Illinois 60612

In Reply Refer To: 328/Privacy/cmm

CSS 26-480-628

HENNON, Samuel L

SAMUEL L HENNON 2008 N 75<sup>TH</sup> CT ELMWOOD PARK IL 60707

October 06, 2006

Dear Mr. Hennon:

This letter is in response to your request to view your claim folder. The viewing of your claim file may be don at the VA Regional office in Chicago at 9:00 am. Your claim file will be located in our customer service center. On October 19, 2006. If this viewing period is not convenient for you please contact us as soon as possible.

Our address is listed below for your convenience. Please request your claim file at the customer service center help desk and a representative will assist you.

> VA Regional Office Chicago 2122 West Taylor Street Chicago IL 60612

Do You Have Questions Or Need Assistance?

If you have any Questions, call us toll-free by dialing 1-800-827-1000. Our TDD Number for the hearing impaired is 1-800-829-4833. If you call, please have this letter with you.

Sincerely yours,

Michael Stephens

Michael Stephens

Veterans Service Center Manager

Email us at: https://iris.va.gov



#### DEPARTMENT OF VETERANS AFFAIRS

Chicago VA Regional Office 2122 West Taylor Street Chicago Illinois 60612

100 Mer 02 2007

SAMUEL L HENNON 2008 N 75TH CT ELMWOOD PARK IL 60707 In Reply Refer To: 328/POST/dv

C 26 480 628 HENNON, S L

Dear Mr. Hennon:

We made a decision on your claim for service-connected disability compensation received on June 22, 2006.

This letter tells you what we decided. It includes a copy of our rating decision that gives the evidence used and reasons for our decision. We have also included information about what to do if you disagree with our decision, and who to contact if you have questions or need assistance.

### What Did We Decide?

Effective May 1, 2007, service-connection for Guillain Barre syndrome with residual urinary leakage is severed.

Effective May 1, 2007, service-connection for Guillain Barre syndrome with residual weakness, right lower extremity is severed.

Effective May 1, 2007, service-connection for Guillain Barre syndrome, left lower extremity is severed.

Effective May 1, 2007, service-connection for Guillain Barre syndrome, with incontinence of bowel is severed.

We also determined that the following condition were not related to your military service, so service connection couldn't be granted:

Medical Description	
Post traumatic stress disorder	
Face drop, facial injury	
Numbness in extremities/peripheral	

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C 26 480 628 Hennon, S L

neuropathy	
Sleep apnea	_
Transverse myelitis and myelopathy	_

Effective May 1, 2007, entitlement to the 100% rate is terminated.

Effective May 1, 2007, entitlement to Dependents' Educational Assistance under 38 USC, Chapter 35 is terminated.

We have enclosed a copy of your Rating Decision for your review. It provides a detailed explanation of our decision, the evidence considered and the reasons for our decision. You can find the decision discussed in the section titled "Decision." The evidence we considered is discussed in the section titled "Evidence." The reasons for our decision can be found in the portion of the rating titled "Reasons for Decision" or "Reasons and Bases."

# What You Should Do If You Disagree With Our Decision.

If you do not agree with our decision, you should write and tell us why. You have one year from the date of this letter to appeal the decision. The enclosed VA Form 4107, "Your Rights to Appeal Our Decision," explains your right to appeal.

# Do You Have Questions Or Need Assistance?

If you have any questions, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the number is 1-800-829-4833.
Use the Internet	Send electronic inquiries through the Internet at https://iris.va.gov.
Write	Put your full name and VA file number on the letter. Please send all correspondence to the address at the top of this letter.

In all cases, be sure to refer to your VA file number 26 480 628.

If you are looking for general information about benefits and eligibility, you should visit our web site at http://www.va.gov, or search the Frequently Asked Questions (FAQs) at http://iris.va.gov.

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C 26 480 628 Hennon, S L

We sent a copy of this letter to the AMVETS because you appointed them as your representative. If you have questions or need assistance, you can also contact them.

Sincerely yours,

Suzanne S. Lowe

Suzanne S. Lowe

Veterans Service Center Manager

Email us at: https://iris.va.gov

Enclosure(s): Rating Decision

VA Form 4107

cc: AMVETS

MEDICAL RECORD

Progress Notes

01/19/2007 09:27 \*\* CONTINUED FROM PREVIOUS PAGE \*\*

ar consideration to caking

RTC next week or prn. Understood safety net.

Signed by: /es/ GEORGE E. PANIOTTE, M.O. ATTENDING 01/26/2007 18:25

HENNON, SAMUEL L

HINES VA HOSPITAL Pt Loc: DUTPATIENT

Printed:12/10/2007 09:22 Vice SF 509

MEDICAL RECORD Progress Notes NOTE DATED: 01/26/2007 18:29 LOCAL TITLE: MH ATTENDING NOTE VISIT: 01/26/2007 10:00 MHC OR, PANIOTTE-IND TREATMENT AREA Problem: Depression. Guilt, hopelessness, helplessness, emptiness, anger, worthlessness, decreased concentration, irritability etc.. remain and the pt. continues feeling anger and anxiety with his depression during a good part of the day. Finally he is willing to increase his medications, though he still refuses my recommendation for impatient tx. Neurovegetative symptoms in terms of sleep disturbances cont. but have improved and the pt. is getting a reasonable night's sleep. He

continued being irritable towards all close to him and has diffuse anger, but not express it, instead unleashing it during our sessions (pt. has enough trust in psychiatrist to express his feelings fully without holding back. Thus catharsis does occur). At home he generally avoids family stimulation and does not react to his family. However, the patient remains incapacitated, essentially paralyzed, unable to do house chores, without bathing, or caring much for himself. He is eating and sleeping reasonably though, and remains in the house protected from the elements. He refuses inpatient treatment again citing that his wife is taking care of him in relation to my concerns. Thus he is not certifiable against his will at this time.

#### TREATMENT AREA

Problem: Anxiety and PTSD: 2/10 with 5 being passing and 10 being the best. are trying to do to me. Can't discern a clear paramoid element that is not directly driven by anxiety, i.e. no psychosis. Not directed at snybody except 3 specific persons. Can't concentrate well while trying to read or sustain prolonge effort and is distractible. Calmer after session though he remained and the state of the state of the session through the remained and the state of the session through the remained and the state of the session through the remained and the state of the session through t protonged effort and is distractione, calmer area; session incoming ne remained angry at political process. Flashbacks and anger occur relating to the veterans as remainders occur (PTSD). Symptoms from the other 2 clusters still are grossly incapacitating but not as intense as the withdrawal cluster. Refused recommendation for inpt. tx. Not certifiable. Wife takes care of him despite her duty as a full time nurse and housewife.

However, he now finally (with much insistence) accepting of incr. in abilify and effexor. Promises to call q 2 days until next apt,

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MAI TOTALACTE CATEL DAT TO THE TANK NOT

HENNON.SAMUEL I HINES VA HOSPITAL Pt Loc: CUTPATIENT Printed:12/10/2007 09:21 Vice SF 509

Progress Notes MEDICAL RECORD \*\* CONTINUED FROM PREVIOUS PAGE \*\* 01/26/2007 18:29 BULLOWS - THE POWER RECORDING

#### TREATMENT AREA

Problem: Medical Goal: "To continue to keep medical problems under control."

Objective(s): To make >95% of all medical apt. and to be >95% compliant with med regimen.

Method(s): F/u with primary care.

Not an imminent danger to self/others, despite being paralyzed by anxiety, anger, PTSD symptoms, and depression at this time  $\cdot$  thus can't be certified.

AXIS 1: PTSD, severe.
Major Depressive Disorder, severe, recurrent.

Deferred.

AXIS III: Hypertension treated with zestril.

Post vaccinial neurological disease with a component of demyelinating neuropathy and possible myelopathy, with the patient having attained an

neuropathy and possible myelopathy, with the patient having attained an excellent recovery.
Pulmonary emboli 1974.
Cerebral Vascular Accident (stroke) in January 2001. Permanent weakness on right side. Hospitalized at West Lake Hospital. Small lacunar infarct due to labile blood pressure.
Sleep aprea.
Restless leg syndrome.
Myderate obssity

Moderate obesity.

Mild double vision, right eye, from his stroke.

Still with parasthesia, numbing and tingling in the fingers.

AXIS IV: His illnesses, inability to cope at work. Physical

restrictions

that hamper the patient.
AXIS V: The

relates himself at home angry, and psychologically paralyzed. He remains unable to do minor house chores, much less to do any sort of work (is completely unemployable) and he can't attend to his children, his bills, his wife, or his family. Sam isolates himself and becomes irritable and angry all of the sudden consequent to sudden internal thoughts relating to his remembrances of wounded American troops and to certain individuals at PVA. He is not a danger though to self/others on very extensive direct and indirect questioning. Judgment is impaired, though immediately adaptive to self care. His thinking is still angrily disproportionately preoccupied with those that purportedly wronged him, with violent ideation towards them, though he does not plan to act on this, guaranteeing this inaction. He remains angry about injured American troops from Vietnam, with cues and remembrances, sometimes brooding about this. He continues unable to formulate a daily living plan with occasional \*\* THIS NOTE CONTINUED ON NEXT PAGE \*\*

HENNON, SAMUEL L

HINES VA HOSPITAL Pt Loc: OUTPATIENT Printed:12/10/2007 09:21 Vice SF 509

26 480 628

MEDICAL RECORD

Progress Notes

01/26/2007 18:29

\*\* CONTINUED FROM PREVIOUS PAGE \*\*

speech incoherency and near-continuous psychological paralysis during much of the day. Thankfully, his wife is taking care of him and all household responsibilities. In his psychological paralysis he is neglecting his personal appear;ance, care, and hygiene, and looks unkempt and somewhat disheveled. He makes good eye contact. His capacity to deal with stress is seriously compromised even sitting at home essentially without any responsibilities. His relationship with his children has significantly decreased and that with his wife has turned into a caretaking one. He does not have any other relationships anymore except perhaps with this psychiatrist. Given that his wife is taking care of him, and that he is eating and sleeping, without s/iiip on careful questioning, and no plan or intent to act on his violent ideation (not directed towards strangers or family), on very careful and prolonged examination, he is not certifiable. I will have him return to the clinic within days. He agrees, finally, to taking incr. medication doses (see above). He refuses any other type of tx. at this time. Wife and or patient to call me immediately if situation deterforates.

RTC next week or prn. Understood safety net well because of repeated explanations. Pt. verbalized that he could call or come in as a walk in at any time. Call q day or two.

Signed by: /es/ GEORGE E. PANIOTTE, M.D. ATTENDING 01/26/2007 19:15

HENNOW.SAMUEL L

HINES VA HOSPITAL Pt Loc: OUTPATIENT Printed: 12/10/2007 09:21 Vice SF 509