



**MILITARY OFFICERS CALL**  
**Sun City Center Chapter**  
**Military Officers Association of America**  
 P. O. Box 5693, Sun City Center, FL. 33571



**Volume 32 Number 9** **September 2017**



**President's Message**  
**Charles Conover, LTC USA (Ret)**  
**September 2017**

Dear Colleagues:

Welcome back to chapter meetings. Even though we did not meet in July and August, your officers and directors have been busy planning for very active and interesting programs through the end of the year and beyond.

We received notification that our chapter has been awarded a Five Star Levels of Excellence Award. Our members can take pride in the chapter achieving this milestone.

Our membership committee is to be congratulated on their recruiting efforts as we continue to grow our membership and were recently recognized by MOAA Headquarters for their outstanding work - KEEP IT UP.

Your nominating committee has identified all the candidates for officers and directors for 2018 and will make their report at our October luncheon.

Our guest speaker for September will be Bill Morrow, LTC, USA (Ret) who will talk about Jungle Warfare Training and we look forward to his comments. See his biography in adjacent column.

Please save the October 10 date for attending the W2W presentation at the Community Hall. This program will be of interest to all Military Veterans and their families.

Contact Frank Kepley at (813) 642-0801 or [dkepley@tampabay.rr.com](mailto:dkepley@tampabay.rr.com) for reservations. See the flyer on page 13 for details.

I look forward to seeing you on September 6th.

Charlie Conover

**\$15.00 SEPTEMBER LUNCHEON \$15.00**  
 ◆(813) 642-0497◆  
**Wednesday, Sept 6 th, 2017 (Florida Room)**  
**Beef & Chicken Fajitas**  
**Mahi Mahi Fajitas**  
**Yellow Rice — Southwest Beans**  
**Salad Bar & Fresh Fruit with Assorted Dressing**  
**Dessert Bar: Chef's selected desserts**  
**Beverages: Decaf Coffee, Iced Tea, and Ice Water**

**SEPTEMBER SPEAKER**

**LTC William Morrow, USA (Ret)**



Upon graduation in 1968 Bill received a commission as a 2<sup>nd</sup> Lt. through the ROTC program at the University of Idaho. He reported to Ft. Benning, Georgia where he attended the Infantry Officers Basic course and then completed Airborne and Ranger Training before being assigned to the 82<sup>nd</sup> Airborne Division at Ft. Bragg, North Carolina. Bill served as a platoon leader at the 82<sup>nd</sup> before being reassigned to Vietnam.

He then served as the Pathfinder detachment commander for the 25<sup>th</sup> Aviation Battalion, 25<sup>th</sup> Infantry Division. Returning to the United States he was assigned to the Ranger Training Command and served as a tactics and patrolling instructor at the Florida Ranger Camp in NW Florida. He attended the Infantry Officer's Advanced Course at Ft. Benning enroute to the 3<sup>rd</sup> Infantry Division in Schweinfurt, Germany.

After completing his command tour the Army sent him to Purdue University where he received a Master's degree. He is a graduate of the Command and General Staff College at Fort Leavenworth, KS and the Department of Defense Program Management Course. He was selected to serve as the Army's Product Manager for Amphibians and Watercraft.

His final assignment was as an instructor of Acquisition Management and the Chairman of the Logistics Department at the Defense Systems Management College, Ft. Belvoir, VA. Bill retired 1993 as a Lt. Colonel.

Bill then went to work for a small business providing professional support services to the Federal Government. Bill's wife, Connie, was an active duty Air Force officer and when she was transferred to Las Vegas, it was Bill's turn to follow.

Bill successfully passed the CPA exam in Illinois in 1999 and when Connie was reassigned to the Pentagon in 2000, he returned to work for the same small business. He served as a senior director focused on business development and eventually became the Vice-President. Bill provided services to the Department of Homeland Security, the FAA, and NOAA.

Military awards include the Silver Star, Bronze Star with 2 OLC with V device, Air Medal, Legion of Merit, Meritorious Service Medal, and Army Commendation Medal. He will discuss *Jungle Warfare Training*.

Today, Bill and Connie are retired and live in Bradenton Beach, Florida.

## MEMBERSHIP CORNER

The Membership Committee Chair is providing the following to update the Chapter membership regarding our Chapter LOE & MOAA rewards. Also, this article will list new Chapter members.

- 171 Chapter Members (as of 30 June 2017)

- 105 LIFE
- 35 PREMIUM
- 14 BASIC
- 17 NON-MOAA members

New Chapter member(s) last month: 0

REMINDER: The Chapter reimburses \$100 to members upgrading to LIFE when LIFE certificate is presented to the Treasurer.

### Sun City Center MOAA Website

Don't forget to visit our new website. The link to the website is: <http://moaaf.org/chapters/SunCity/> You will find much membership information, photos, calendar of events, past newsletters and more. If you would like to suggest topics for inclusion contact Jim Haney at [jhhaney1@gmail.com](mailto:jhhaney1@gmail.com)

### VA Secretary Shulkin's goals



#### Paying providers

Community Care, especially VA's Choice Program, has increased access to care for millions of Veterans with 500,000 community providers in the Community Care Network. However, providers are still frustrated by delayed payments to the point that some of them are leaving the network. VA is encouraging the private sector to use electronic submissions to allow faster adjudication and payment.

#### Staffing

Currently it takes VA an average of 110 days to onboard a nurse and an average of 177 days for a nurse practitioner. In his remarks, Shulkin called for position management capability to provide the agency structure to create jobs based on specific duties and responsibilities that are required to meet the needs of Veterans. Low salaries for health care providers and prosthetics representatives are also making it difficult to recruit and retain critical positions. As an example, the 2016 median salary for biomedical engineers was \$85,620, while the national VA average for a VA biomedical engineer was \$65,677 – nearly 25 percent below the private sector.

"If VA cannot compete with private sector salaries, we will be unable to retain qualified providers and support staff," Shulkin said. "To help with staffing shortages, VA will be pursuing legislation to expand graduate medical education training opportunities."

#### Bureaucracy

Additionally, the secretary is taking action to reduce burdensome regulations that simply do not make sense to make it easier for Veterans to engage with VA.

## MSPB forces VA to take back fired official, VA exploring all options under new accountability authorities



On August 2, the Vice Chairman of the federal Merit Systems Protection Board ordered a stay of VA's removal of the former director of the Washington, D.C. VA Medical Center.

MSPB's stay order requires VA to return Brian Hawkins, fired on July 28, to work pending the Office of Special Counsel's review of Hawkins' claim that he was wrongly terminated.

VA has complied with the order and returned Hawkins to the payroll, but to an administrative position at the VA headquarters in Washington rather than to a patient-care position at the VA Medical Center.

"No judge who has never run a hospital and never cared for our nation's Veterans will force me to put an employee back in a position when he allowed the facility to pose potential safety risks to our Veterans," said VA Secretary Dr. David J. Shulkin. "Protecting our Veterans is my most important responsibility."

The stay order came one day after the VA Office of Inspector General (VAOIG) issued a new report finding that Hawkins violated VA policy by sending sensitive VA information from his work email to unsecured private email accounts belonging to him and his wife.

VA will quickly make an assessment of Mr. Hawkins' employment using the new evidence and armed with the new authorities recently provided by the VA Accountability Act signed into law by President Trump in June.

*Editor's note: I don't want to say I told you so, but I told you so. Now the real test begins. Will the Accountability Act, just passed hold up or will the MSPB continue to call the shots. Looks like it might finally be settled.*



### Warrior 2 Warrior Presentation

Date: October 10

Time: 11:00 am

Place: SCC Community Hall

Catered by Banquet Masters

Reservations required

Point of contact for MOAA, MOWW, MFST

Frank Kepley — 642-0801

[dkepley@tampabay.rr.com](mailto:dkepley@tampabay.rr.com)

Others: contact your service organization to make a reservation.

Lunch fee: \$14.00 (payable at door).

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LTC Charles Conover, USA (Ret).....260-3257  
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**1st VP**  
LTC Benny Blackshire, USA (Ret).....260-3105  
bwblacks@aol.com

**2nd VP**  
MAJ James Haney, USMC (Ret).....220-8758  
jghaney1@gmail.com  
Membership Chairman

**SECRETARY**  
LTC Ed Mooney, USA (Ret).....751-6844  
edmlc@yahoo.com

**ASSISTANT SECRETARY**  
Lt Col Ferris Garrett, USAF (Ret).....841-0532  
garrett4@tampabay.rr.com

**TREASURER**  
D. Kay Benson (Aux)..... 938-3030  
mamby45@hotmail.com

**ASSISTANT TREASURER**  
MAJ Kirk Faryniasz, USAF (Ret).....677-2606  
kfaryniasz@hotmail.com

**DIRECTOR**  
LT Dave Floyd, USN (Fmr).....334-7797  
DavidFloyd2012@yahoo.com

**DIRECTOR**  
Doris Glass (Aux).....642-0497  
Luncheon Reservation Coordinator  
dobygl@juno.com

**DIRECTOR**  
CAPT Frank Kepley, USN (Ret) ..... 642-0801  
Public Affairs Officer  
Legislative Affairs  
Publisher/Editor Officers Call Newsletter  
dkepley@tampabay.rr.com

**DIRECTOR**  
Jane Foppe (Aux) .....541-2618  
ljcfoppe@aol.com  
Surviving Spouse Liaison

**PAST PRESIDENT**  
LT Thom Brown, USNR (Fmr).....634-7435  
galenageneral1999@gmail.com

**PERSONAL AFFAIRS**  
CDR Ed Socha, USN (Ret) .....634-4957  
Proofreader  
ejsfalcon1@frontier.com

**JROTC Coordinator**  
Lt Col James Warchol, USAF (Ret).....633-1063  
wjammer39@gmail.com

**CHAPLAIN**  
Assistant Personal Affairs  
Lt Col Samuel Rorer, USAF (Ret)..... 260-3882  
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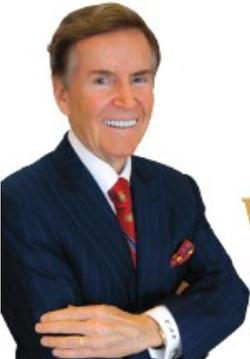


**Simone M. Baillergeon**  
Owner/Short Sale Logistics

307 S. Pebble Beach Blvd.  
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**WEALTH MANAGEMENT GROUP**

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1653 Sun City Center Plaza  
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**P: 813-633-7333**

F: 813-633-61-20

**SARASOTA**  
6371 Business Boulevard  
Suite 200

Sarasota, Florida 31-21-0

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[tpayant@payantwealthmanagementgroup.com](mailto:tpayant@payantwealthmanagementgroup.com)  
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- **Scholarships and Leadership Programs** for students from military families
- **Operation Helping Hand:** monthly support for military families of wounded servicemen and women at the James A. Haley VA Hospital .



**For more information, call  
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or log onto our website at  
mfst.us**

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## New Member

### John Regan, Maj. USAF (Ret)



John Regan joined the U.S. Air Force in the enlisted ranks in 1973. In 1980 he obtained a commission and retired in 1997 after 24 years as a Major. As a computer scientist and software engineer, he specialized in developing military command and control software both while in the Air Force mostly working in joint service assignments and later as a military contractor for 19

years. Major Regan was a software manager responsible for the development of the Joint Operation Planning and Execution System (JOPES) and the Air Force's Deliberation Crisis Action Planning and Execution Segments (DCAPES). He was the Program Manager for the development and fielding of the Joint Capabilities Requirements Manager (JCRM) and the Preferred Forces Generator (PFG). All these systems are being used to this day in planning military operations.

Major Regan was married for 32 years to his first wife, Donna, who passed away in 2005 from cancer. He married again in 2008 to Nancy who was a Navy military widow and a Government Civil Servant with a PhD in Education. Both John and Nancy have been retired now for 1 year and currently live in Valencia Lakes. Major Regan is a lifetime MOAA member.

### Secretary Mattis—Get ready for more pay raises and get rid of sequestration



Military pay and benefits are the single largest expense category for the DoD, encompassing a third of the Pentagon's budget, according to Mattis — and that's a good thing.

"I believe providing competitive pay and benefits is a necessity to attract and retain the highly qualified people needed in today's military," said Mattis. "Investment in military compensation, Blended Retirement, the Military Health System, and family programs are essential to fielding the talent we need to sustain our competitive advantage on the battlefield."

But balancing that priority with "other investments critical to readiness, equipment, and modernization" will prove challenging, especially with Mattis' dire warning that American air, sea, and ground forces remain threatened by new technologies.

Mattis and Joint Chiefs Chairman Gen. Joseph Dunford hit the House Armed Service Committee to bullhorn the threat of sequestration. "No enemy in the field has done more to harm the combat readiness of our military than sequestration," Mattis told lawmakers.

## Navy accepted the carrier Ford



The Navy announced that it has accepted its newest aircraft carrier, the Gerald R. Ford, with a commissioning ceremony that took place in July.

The acceptance of Ford marks the beginning of the end of a very long road for the new carrier, which incorporates several new technologies including an electromagnetic launching system that will replace the old steam launch system, and a new arresting gear system, a high-tech brake calibrated to the weight and design of each of the aircraft its trapping.

## VA medical center leaders removed after reports of unsafe conditions



WASHINGTON — Top leaders at a New Hampshire Veterans Affairs Medical Center were swiftly removed from their posts after a scathing article portrayed the facility as unsanitary and disorganized, despite internal ratings labeling it

as one of the agency's best facilities.

The Boston Globe chronicled multiple problems at the VA-labeled four-star facility, including flies in surgical rooms, poorly-maintained medical equipment and an administration that ignores the best interests of patients.

The newspaper quoted the center's chief of medicine — one of at least 11 whistleblowers filing complaints about conditions there — as saying he had "never seen a hospital run this poorly — every day it gets worse and worse."

In a recent statement, Shulkin called the allegations "serious" and said he was removing the director (Danielle Ocker) and chief of staff (James Schlosser) at the facility immediately.

*Editor's note: And so it begins---finally!*

## Publisher/Editor

### CAPT Frank Kepley, USN (Ret)

We need your input about member activities associated with MOAA and articles of interest to the military community. Contact Frank at:

[dkepley@tampabay.rr.com](mailto:dkepley@tampabay.rr.com) 813-642-0801



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## LEGISLATIVE AFFAIRS

**Frank Kepley, CAPT USN (Ret)**

### Supreme Court rules in veteran's favor in closely watched divorce settlement case

#### VA Service-Connected Disability Compensation

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The U.S. Supreme Court unanimously ruled, in the case of *Howell v. Howell*, that a state court cannot offset the loss of a divorced spouse's portion of a veteran's retirement benefits when that veteran waives retirement pay in favor of

disability pay (nontaxable). The issue has been hotly debated for years.

Until 2003, disabled veterans had to select either their full retirement compensation from the Department of Defense or their VA disability benefit with a reduced retirement annuity. This penalty became known as the "VA offset." Many veterans choose the offset, however, because disability payments are tax free. In the 2003 and 2004 defense authorization bills, Congress waived this offset in certain cases, and veterans with career-ending combat injuries or a disability rating of 50 percent or higher were allowed to concurrently receive both types of payments.

According to the Military Officer's Association of America, a nonprofit organization that supports veterans and active-duty military, cases like this wouldn't exist if Congress simply removed the VA offset and allowed for full concurrent receipt of retirement and disability pay.

### Unions decry VA bill as a broader attack on federal workers



Lawmakers see the new Veterans Affairs accountability legislation moving through Congress as a way to make much needed but mostly technical changes to employment rules for that department.

Union officials see it as an attack on federal workers nation-

wide.

Labor representatives are pushing back strongly against what they see as opponents' attempts to use VA policies as a way to jump start wholesale reforms to government employment rules, promotion schedules and worker protections. They insist the push has less to do with helping veterans than it does with marginalizing unions across federal agencies.

The accountability measure has earned support from VA leadership and numerous veterans advocacy groups, and is expected to move through both chambers in coming months.

House Veterans' Affairs Committee lawmakers passed legislation along party lines to crack down on employees conducting union business during official work hours, even

when the duties may overlap with VA responsibilities. Cox called it a clear attack on his members.

Officials from the conservative group Concerned Veterans for America — who have long lamented unions' influence in the VA workforce — called their objection to the new legislation proof of their inability to adapt.

"Unions are often directly responsible for blocking the same measures that will help the VA hold bad employees accountable and fix the toxic culture at the department," said CVA Executive Director Mark Lucas in a statement. "The VA exists to protect the lives of veterans, not to keep unions operational."

*Editor's note: as I have been saying, it is inevitable that the union will fight this bill to their dying breath. And if history is any indication, they will win and the veterans will lose. However, with Trump's signature on this bill it may hold up.*

### Trump's big VA budget request comes with proposed trims to veterans benefits



Under current policies, the Individual Unemployment program allows VA to award payouts at the 100-percent disabled rate to veterans who cannot find work due to service-connected injuries, even if they are not deemed 100-percent disabled. The number

of program recipients has tripled since 2000, reaching almost 339,000 in fiscal 2016.

Trump has proposed stopping those payouts once veterans are eligible for Social Security retirement benefits, arguing the practice now amounts to "the duplication of benefits." It would impact more than 225,000 veterans receiving the payouts today.

All veterans receiving benefits checks from the department would also be affected by a plan to "round down" cost-of-living increases to the nearest dollar, which was VA policy from the late 1990s until 2013.

VA officials say the move would save \$20 million in fiscal 2018 and cost individual veterans "no more than \$12 per year." But the idea has proven controversial in the past, and is likely to face opposition from outside advocates.

All veterans receiving benefits checks from the department would also be affected by a plan to "round down" cost-of-living increases to the nearest dollar, which was VA policy from the late 1990s until 2013.

A large portion of those savings will go towards reauthorizing the controversial Choice Card program, established in 2014 to allow veterans to seek medical care outside VA if they meet certain eligibility requirements.

### Letters to Legislators

**I hope that all MOAA members have written to their representatives using the links I provided to the issues regarding the TRICARE and SBP—DIC legislation. Both benefits are being attacked by the Senate and the barrage of letters is important to get their attention.**

## Trump announces ban on transgender people in U.S. military



President Trump announced on Twitter that he will ban transgender people from serving in the military in any capacity, reversing an Obama administration decision to allow them to serve openly and drawing dismay and anger from advocates.

Citing the need to focus on what he called "decisive and overwhelming victory," Trump said that the military cannot accept the burden of higher medical costs and the "disruption" that transgender troops "would entail."

"After consultation with my Generals and military experts, please be advised that the United States Government will not accept or allow transgender individuals to serve in any capacity in the U.S. Military," Trump wrote on Twitter. "Our military must be focused on decisive and overwhelming victory and cannot be burdened with the tremendous medical costs and disruption that transgenders in the military would entail."

The missive comes after Trump's defense secretary, retired Gen. Jim Mattis, delayed the implementation of the last significant piece of the Obama administration's new policy, delaying the entry of transgender military recruits until the end of 2017. The policy in place would have allowed them to begin serving July 1, but Mattis delayed it just before a deadline set, citing a need for more study.

The six-month delay was requested by the Joint Chiefs of Staff, and would allow a further review of how allowing transgender recruits would affect the military's lethality, Mattis said in a memo last month. That review was due in early December.

*Editor's note: wow! stand-by for ACLU lawsuits.*

## Vet groups urge House to reject plan to fix VA's budget gap



WASHINGTON — Leading veterans groups are opposing House lawmakers plans to extend the Veterans Affairs Choice program with emergency funding, saying the plan unfairly shifts needed monies away from department programs.

But supporters say the move simply keeps the much-needed health care program afloat while lawmakers sort-out long term fixes, and that blocking the move could harm thousands of veterans.

In a letter sent out, leaders from a coalition of eight veterans groups said they oppose a House plan that would provide about \$2 billion for VA Choice services for the next six months. The funds would come from trims to other VA programs, an offset that the groups said are not in themselves a problem.

However, the groups said they oppose "legislation that includes funding only for the 'Choice' program which provides additional community care options, but makes no investment in VA and uses 'savings' from other veterans benefits or services to pay for the Choice program."

They see using savings from VA program changes to pay for additional outside VA care as a step toward privatization of the department, a charge that administration and congressional officials have repeatedly denied.

## Proposed VA Choice funding fix fails in House vote



WASHINGTON — House Republicans suffered a surprising setback during a full chamber vote on veterans funding, which put in doubt the future of the controversial Veterans Affairs Choice Program, with just days left to

find another solution.

A proposed fix that would have provided \$2 billion to the health care program over the next six months failed to get enough votes to meet parliamentary requirements, failing despite a majority-backed tally of 219-186. Under rules, a two-thirds majority was needed to advance the measure.

The move left Republican leaders upset at what they saw as a reversal of an agreement with key chamber Democrats on the program fix. During floor debate, House Veterans' Affairs Committee Chairman Rep. Phil Roe, R-Tenn., called the measure a critical and direct solution to the problem.

"We know that veteran demand for care through Choice has never been higher and consequently the remaining money in the Veterans Choice Program will run out in mid-August, a few short weeks from now," he said. "We cannot allow that to happen."

VA officials have promised an overhauled Choice plan in coming months, to include less bureaucracy and clearer eligibility rules for the program based on medical need instead of geographical location.

Rep. Tim Walz, D-Minn., said "It's apparent in the Senate that (this plan) will not pass." We will not have money for the Choice Program ... If we can't find a compromise that gets something across the finish line, that actually does something for veterans, everything else is just message for politics."

The program was flush with money as recently as last spring, when lawmakers passed legislation to remove deadlines for funding expiration. But in the last few months, usage has spiked significantly, with nearly \$2 billion spent in less than half a year.

The Choice vote failure was a negative mark on an otherwise upbeat day for veterans' legislation in the chamber. Eight other measures related to VA, including an expansion of GI Bill benefits for reservists and wounded veterans, all received bipartisan backing in the House. They're expected to be passed.

*Editor's note: see page 8 for latest follow-up.*

## LUNCHEON FEE INCREASE

***Because the Board of Directors has been unable to find a volunteer to organize and manage the MOAA golf tournament, they have decided to no longer hold the event. The work necessary to run the tournament is extremely arduous and time-consuming and is more than one person can, or should be expected to take on. Consequently, in order to help provide some of the resultant lost income, so the chapter can maintain its current programs, the board has decided to increase the luncheon fee to \$15.00. The increase will take effect at the luncheon on September 6.***

## Trump promises huge increase in private sector care for veterans



WASHINGTON — President Donald Trump promised to triple the number of veterans “seeing the doctor of their choice” in coming months as part of an ongoing, ambitious reform plan at the Department of Veterans Affairs.

The comments, which came at a veterans rally in Ohio, are likely to again stoke concerns among administration critics of large-scale privatization of VA responsibilities.

At the start of the year, almost a third of all veterans’ medical appointments scheduled through the department were with doctors working outside the VA system, in private clinics. White House officials have previously promised an overhaul of those outside care programs in coming months, with an eye towards sending even more patients to community physicians.

VA Secretary David Shulkin has repeatedly pushed back against concerns that those moves amount to a dismantling of the department, and promising lawmakers repeatedly that both he and Trump aren’t working on a large-scale shift of taxpayer funds outside the government health care system.

But Trump told the assembled crowd that since he took office in January, “we have nearly doubled the number of veterans given approvals to see the doctor of their choice.” He added that “we’re going to be tripling up very shortly.”

The comments appear to refer to the VA’s controversial Choice program, authorized by Congress in the wake of the 2014 department wait time scandal. Usage of that program has risen dramatically since Shulkin and Trump took office.

*Editor’s note: This battle could go either way. We need the outside choice appointments, but privatization of VA a real concern.*

## Steep Pharmacy Cost Share Increases



Regarding pharmacy cost shares, the Senate proposal goes much further than even DoD’s proposed fee hikes. The intent is to raise fees to encourage beneficiaries to fill their prescriptions for free on base. This logic presumes most retirees -- who are, incidentally, the ones who use mail order the most - live near a base; the large majority do not. These proposed fee

hikes will hit TRICARE For Life beneficiaries and members of the reserve components the hardest.

A common example would be a retired beneficiary using TRICARE home delivery who is on three generic medications and uses one brand-name medication. Their current out-of-pocket cost share for a 90-day supply is \$0 for the generic medications and \$20 for the brand-name. *Under the new proposal, their annual costs would increase, starting next year, from \$80 annually to \$232. Annual COLA increases would not even come close to covering these new costs.*

*Editor’s note: You need money for training? Take it from the active duty troops and retired veterans. Shamefull!*

## House passes VA Choice funding fix in final pre-recess work (latest follow-up)

In a final flurry of activity before their scheduled August recess, House lawmakers passed a series of veterans-themed legislation, including an emergency funding measure to keep the Veterans Affairs Choice program afloat for another six months.

That financial bridge for Choice — which allows veterans to seek care with private-sector physicians at VA’s expense — is expected to quickly pass the Senate, given a mid-August funding deadline for the program. Senate Veterans’ Affairs Committee Chairman Johnny Isakson, R-Ga., and ranking member Jon Tester, D-Mont., have already endorsed the plan.

The final plan, which passed the House by a 414-0 vote Friday, is a \$3.9 billion emergency spending plan that provides \$2.1 billion for six months of funding for the Choice program and \$1.8 billion for 28 new medical leases and new health care specialist hires within VA.

Money for the legislation would come from trimming pensions for Medicaid-eligible veterans and a variety of fees, offsets that have been largely non-controversial.

In a statement following the vote, members of a veterans coalition that had opposed the earlier deals praised Roe and the rest of the congressional negotiators for reaching a compromise they praised as important to veterans care.

But the groups — Veterans of Foreign Wars, AMVETS, Disabled American Veterans, Iraq and Afghanistan Veterans of America, Military Officers Association of America, Military Order of the Purple Heart, Vietnam Veterans of America and Wounded Warrior Project — also said lawmakers “must immediately turn our attention to the coming debate over how to strengthen and modernize the VA health care system, and how community care should be integrated to ensure timely and convenient access for all enrolled veterans.”

There’s still much work ahead, and this is only six month patch in the Choice program.

*Editor’s note: contrary to the above statement, finding funding by trimming pensions for Medicaid-eligible veterans as well as other services, is in fact controversial and will no doubt be opposed.*

## US Navy admiral sentenced to 18 months in 'Fat Leonard' bribery scandal



Over two decades, Robert Gilbeau rose through the ranks to Navy admiral and earned a chest-full of honors for his service, including a Bronze Star and Purple Heart. During that period he also partied across Southeast Asia with a gregarious Malaysian businessman who paid for lavish dinners, drinks at karaoke bars and prostitutes.

That businessman, known as “Fat Leonard,” is the centerpiece of a massive bribery scandal involving Navy officers, and Gilbeau last year pleaded guilty to lying to investigators about their relationship. He was the first active-duty admiral convicted of a federal crime and on Wednesday he learned his penalty: 18 months in jail.

## 'Performance enhancing drugs' considered for Special Operations soldiers



TAMPA, Fla. — Special Operations Command wants to create super-soldiers through pushing the limits of human performance, and its looking to nutritional supplements and even performance enhancing drugs as options.

America's elite operators already have access to the kinds of fitness and performance resources available to a pro football player with dietitians, athletic trainers and physical therapists embedded with the units. But U.S. Special Operations Command is looking to go even further, pushing operators to increase pain tolerance, injury prevention and recovery, and physical performance in austere environments. SOCOM is looking to private industry and academia for ideas to get them there.

Ben Chitty, senior project manager for biomedical, human performance and canine portfolios in the Science and Technology office at USSOCOM said that SOCOM is looking at nutritional supplements, such as the kind you find at GNC, but also at performance enhancing drugs.

"For performance enhancing drugs, we'll have to look at the makeup and safety in consultation with our surgeon and the medical folks before making any decisions on it," he said.

While pushing supplements and drugs on operators to push performance might seem like a risky proposition Chitty said the focus would be on safety first and foremost.

"We're not cutting any corners," Chitty said. "We want to make sure its safe first and then we want to look at the effectiveness of it.

*Editor's note: Oh boy! Because of the risk of addiction, I have to think this is a really bad idea.*

## Sepsis can be caused by, and cause, amputations



Steven Q. Simpson, MD, FCCP, FACP, of the Sepsis Alliance and of the Division of Pulmonary and Critical Care at the University of Kansas, says "If you go into an intensive care unit (ICU) in the United States for any reason, whether it is postop after your

surgery or [for] an exacerbation of chronic lung disease, it does not matter. The most common thing leading to you not coming out of there alive is sepsis."

Sepsis, a complication of infection, is caused when chemicals released by the body to fight an infection trigger inflammatory responses throughout the body. According to Simpson, 1.5 million to 3 million cases of sepsis are diagnosed annually in the United States, and someone in the United States dies from sepsis every 3 to 4 minutes. In-hospital mortality among patients with sepsis is 300% more than those with heart attacks, he added.

Baby boomers are at the greatest risk for sepsis, according to Simpson. Clinicians should look for symptoms such as rapid heart and respiratory rates, high or low white blood cell counts, confusion, low blood pressure, low oxygenation and low urine output.

When counseling patients on how to recognize sepsis, Simpson said they should look for shivering fever or cold,

pale or discolored skin, sleepiness and shortness of breath.

"Sepsis is time-sensitive. It is an emergency," Simpson said. We need to leap on it like we would when someone says their chest is hurting or if they have facial droop."

## VA warns that scammers are trying to take advantage of Choice Program users



There's a phone line that has been set up to scam veterans who happen to misdial the Veterans Choice Program phone number.

The only difference between the phone numbers rests in the area code, warns the Department of Veterans Affairs. The Veterans Choice Program phone number is 1-866-606-8198. The scammer's number replaces 866 with 800.

VA officials say the scam phone number will not provide any information on the Choice Program or its eligibility criteria, but it will offer a \$100 rebate for the caller's credit card information. The VA says they would never ask for this information, nor would they ever offer incentives through the Choice Program.

Also, the real Veterans Choice Program hotline will automatically tell the caller that they have reached the "U.S. Department of Veterans Affairs." The fake number will only tell callers they reached the "Veterans Choice Program" after the caller asks.

## Microsoft Windows license scam (Editor)



I recently received a call claiming that my Microsoft Windows license had expired and if I wanted to renew it, I should call a given number. I do in fact pay an annual fee to renew my Of-

fice 365 program; however, Microsoft does not call and advise anyone that their license has expired. They will send an email advising you that your license fee for another year is due and will provide you with the mechanism to accomplish the renewal. It is just another one of the never ending scams that drive us all crazy.

## Doctors want improvements in EHR systems



EHR systems "need a tremendous makeover with lots of clinical input to make it easy to do not only the right thing, but the things you do all the time," said Dr. Robert Wachter of the University of California at San Francisco. Dr. Charles Webster, president

of EHR Workflow, said doctors want EHRs that won't disrupt their workflow, allowing them to spend more time with patients and not on the software.

*Editor's note: Yes, yes, yes!! More time with the patient and less time with the computer.*

## New drops can make painful eye jabs history for AMD sufferers

*The results of the collaborative research could spell the end of painful injections directly into the eye to treat the increasingly common eye disorder known as age-related macular degeneration (AMD).*



Washington D.C. : A type of eye drop to control age-related blindness has been developed by a team of researchers.

The drops developed at the University of Birmingham could potentially revolutionize the treatment of one of the leading causes of blindness.

The results of the collaborative research could spell the end of painful injections directly into the eye to treat the increasingly common eye disorder known as age-related macular degeneration (AMD).

## Just 14 days of physical inactivity can raise risk of chronic disease



It is well established that a lack of exercise can raise the risk of chronic disease, including type 2 diabetes and heart disease. New research, however, finds that the risk of such conditions could increase with as little as 2 weeks

of inactivity.

*Lack of exercise for just 14 days can increase the risk of chronic disease, say researchers.*

In a study of young, healthy adults, researchers found that switching from moderate-to-vigorous activity to near-sedentary behavior for just 14 days led to metabolic changes that could raise the risk of chronic disease, and even premature death

## How The Dark Overlord is costing U.S. clinics big time with ransom demands



A brassy, attention-seeking hacker group that calls itself The Dark Overlord is stealing massive numbers of patient records from U.S. medical and dental clinics and hawking them on the black market or spilling them onto the internet.

The group's digital rampage hasn't seized the kinds of headlines that have been devoted to the WannaCry ransomware that's swept the globe in recent days. But it has had a far greater impact in the United States than the ransomware attack, inflicting heavy – even crippling – costs on small clinics across America.

While the ransomware attack affected few computers in the United States other than those of FedEx, The Dark Overlord has plundered hundreds of thousands of digital health records in the past year from coast to coast. Targets have ranged from a Manhattan cosmetic dental practice to a semi-rural Missouri medical clinic. Just recently, the group posted the patient records of clinics in Florida and California.

The hackers freeze the clinics' records, then demand payment in bitcoin to return access. If payment is not forthcoming, the records may be released on the internet. On

the underground “dark web,” crime groups pay varying rates for what is known as personally identifiable information.

## Women Veterans: You are in control of your care at VA

*This post first appeared on the White House website.*

she wore these.



As we celebrate Women's Health Week, I am pleased to announce that VA has adopted American Cancer Society breast cancer screening guidelines that give women a choice to begin screening at age

40. The guidelines also recommend starting mammograms yearly by age 45 and then every other year from age 55. The guidelines apply to women at average risk for breast cancer and complement VA's already-extensive program for breast care for Veterans.

I believe it's important for our women Veterans to know that they are in control of their care and the care they receive from VA is consistent with or exceeds care in the private sector. Adopting American Cancer Society standards gives Veterans further assurances that their care aligns with other health-care systems.

Our Acting VA Under Secretary for Health Dr. Poonam Alaigh said it perhaps best last week: “Engaging and better servicing the unique healthcare needs of our women Veterans is one of VA's most important priorities. When it comes to their care, we want women Veterans to be in control of it every day and in every way.”

*Edibor's note: the women are finally gaining in the VA health care arena. Certainly overdue.*

## Diabetes sufferers might soon be able to take pills to treat their condition



Research led by the University of Adelaide is testing safer and more effective drugs to treat type-2 diabetes which will reduce side-effects and insulin injections, Xinhua news agency reported.

Two studies published in the Journal of Medicinal Chemistry and BBA-General Subjection on Diabetes found that two new drugs could be more efficient in reducing blood sugar.

Successfully developing new treatments for type-2 diabetes would be considered a major health coup, with insulin injections often proving unsafe and ineffective.

## Florida Council of Chapters Communiqué

### June 2017 Issue

See what the other Chapters are doing. The *Florida Council of Chapter's* newsletter, the “*Communiqué*” can be accessed by clicking on the link below. After you click the link and then click *Allow*, it may take a minute or so for the newsletter to pop up. It is worth the wait.

Apr2014.pdfhttp:[www.moaafl.org/communique](http://www.moaafl.org/communique)

Editor—Marty Brown. Send articles and photos to:  
[wayne.and.marty.brown@gmail.com](mailto:wayne.and.marty.brown@gmail.com)

## Air Force Academy cadet creates goo that stops bullets



A goeey substance normally wouldn't seem like it could stop a bullet, but an Air Force Academy cadet has created just that.

Cadet 1st Class Hayley Weir's interest in bullet-stopping materials was piqued when she took a chemistry class at the academy in 2014. The class was given three materials to combine in a way that could stop a bullet.

The students were given an epoxy, Kevlar and carbon fiber — materials that would harden together to stop a bullet but that could also shatter.

In December 2016, they had their first successful test. They went to the Air Force Civil Engineer Center for a week of testing, and the material stopped a .44 Magnum bullet. It did not shatter.

Weir said they're looking at the possibilities of using the material as extremity armor as well as coating vehicles and aircraft in it.

The possibilities are endless, she and Burke said. The material could be turned into tents that would protect people from small-arms fire and shrapnel, she said.

## US refuses to add sailors' names to Vietnam Memoria



The Pentagon has refused a long-standing request to add the names of 74 U.S. sailors who died in a 1969 ship collision to the Vietnam Veterans Memorial in Washington.

The USS Frank E. Evans was participating in a nighttime training exercise in the South China Sea when it turned into the path of an Australian aircraft carrier and was split in half. The World War II-era destroyer's stern section stayed afloat while the bow section sank.

Survivors and relatives of those killed have been pushing the Department of Defense for years to add the 74 names to the wall because the ship had supported ground operations in Vietnam just weeks earlier and likely would've been sent back to the war zone after the exercise. But Pentagon officials in a decision this month stuck to their position that the Evans victims are precluded from being added to the wall because the accident occurred outside the Vietnam combat zone.

It was a decision that angered retired Navy Master Chief Lawrence Reilly Sr., an Evans survivor whose 20-year-old son, also named Lawrence, was among those killed.

"I'm not happy with the whole thing," the 92-year-old WWII and Vietnam veteran said from his Syracuse home. "It's a bad deal."

## Trump's budget calls for new base closing round in 2021



Defense Department leaders will seek a new military base closing round in fiscal 2021 under the budget proposal for next year released by the White House on Tuesday.

The recommendation is sure to spark a contentious debate on Capitol Hill, where lawmakers have been reluctant to even discuss the idea of shuttering military facilities across the country.

But military leaders have pushed for another base realignment and closure (BRAC) process since 2013, arguing that their current domestic footprint is too large given reductions in force size and equipment modernization in recent years.

"The Defense Department estimates that it has approximately 20 percent excess capacity spread across the military departments and projects it could save \$2 billion or more annually by 2027," the budget documents state.

Trump's budget proposal faces a long legislative road before becoming law, with numerous controversial program extensions and cuts likely to face revisions from both congressional chambers.

## Man Who Pretended To Be A Wounded Navy SEAL Gets His Comeuppance In Court



In 2014, Wisconsin resident Kenneth E. Jozwiak forged a DD-214 that claimed he was wounded four times while serving as a Navy SEAL in Vietnam, defrauding the Department of Veterans Affairs of

\$2,289.

Now, Jozwiak will serve four years in prison — coincidentally, one for each of the Purple Hearts he pretended to have.

On May 18, Jozwiak pleaded guilty to unlawfully exhibiting a military discharge certificate, theft of government money, making false statements to federal agents, and attempting to obstruct an official proceeding.

"This defendant's lies about his service are an affront to those who saw combat and those wounded fighting on behalf of our nation," David A. Sierleja, acting U.S. attorney for the Northern District of Ohio told the court. "This defendant did neither, and falsely inflated his service record in an effort to get additional benefits."

IN MEMORIAM

**No deceased members reported this month.**

**Monthly Member and Board Meetings**

**Luncheon: Wednesday Sept. 6, 2017 11:00 am  
Florida Room**

**Board Meeting: Wednesday Sept. 13, 2017 10:00 am  
Trinity Baptist Church**

**Membership Committee Mtg. Club Renaissance  
3rd Wednesday Sept. 20, 2017**

## Sen. Grassley releases report on Wounded Warrior Project spending



The charity had said it spent 80 cents of each donor dollar on programs for veterans, but Grassley says that included donated media, advertisements and "educational" fundraising solicitations to reach that number. Senator Grassley found the charity:

- lacked "sufficient policies and procedures to manage the organization..."
- misled donors about more than \$65 million placed in a long-term trust that had not yet been spent on veterans.
- spent "excessive amounts" of money on travel, as well as fundraising and staff events.

And Grassley's nearly 500-page report to the Senate Judiciary and Finance Committees found Wounded Warrior Project was spending only about 68 not 80 percent of donor dollars on programs for veterans.

CEO Steven Nardizzi was fired last year, along with nearly the entire executive suite of the charity.

"I think it's going to help in the long run to deliver exactly what the program ought to do for veterans," Grassley said. *Editor's note: not seeing a lot of improvement here.*

## Another tug-of-war win for the Navy



For the seventh year in a row, the Navy beat the Marines during the New York Fleet Week's annual tug-of-war competition on May 28, according to the Defense Department.

Each team was comprised of five participants.

Four out of five Marines were body bearers, who "carry caskets at ceremonial funerals in Arlington Cemetery," Marine Capt. Evita Mosqueda told the Defense Department.

As a result, these Marines receive serious training to meet physical standards. Despite a training regimen that favored the Marines, however, the Navy team came out on top.

*Editor's note: I could not resist this one. We lost the Army-Navy game but we won the "world famous" tug-of-war.*

## VA Secretary announces decision on next-generation Electronic Health Record



Shulkin announced his decision on the next-generation Electronic Health Record (EHR) system for the Department of Veterans Affairs (VA) at a news briefing at VA headquarters in Washington.

Having a Veteran's complete and accurate health record in a single common EHR system is critical to that care, and to improving patient safety.

The bottom line is we still don't have the ability to trade information seamlessly for our Veteran patients and seamlessly execute a share plan of care with smooth handoffs.

VA's adoption of the same EHR system as DoD will ultimately result in all patient data residing in one common

system and enable seamless care between the Departments without the manual and electronic exchange and reconciliation of data between two separate systems.

● In many ways VA is well ahead of DoD in clinical IT innovations and we will not discard our past work. And our work will help DoD in turn.

● Furthermore, VA must obtain interoperability with DoD but also with our academic affiliates and community partners, many of whom are on different IT platforms.

● Therefore, we are embarking on creating something that has not been done before — that is an integrated product that, while utilizing the DoD platform, will require a meaningful integration with other vendors to create a system that serves Veterans in the best possible way.

● This is going to take the cooperation and involvement of many companies and thought leaders, and can serve as a model for the federal government and all of healthcare.

*Editor's note: having worked with the VA system since its inception (implemented it at Haley VA) as well as the DoD EHR, I feel the VA system is much superior to the DoD system, but unfortunately, joining the two together was just not possible because DoD refused to budge. So this is a badly needed solution to the 17 yr. problem.*

## GAO says VA's clinical quality measures are flawed and incomplete



A Government Accountability Office report says the Department of Veterans Affairs' clinical quality measures are incomplete and do not provide an accurate reflection of clinical measures.

The GAO recommended the use of a standard process to monitor clinical efficiency across VA medical centers, expand current productivity metrics to track all providers, implement an ongoing proactive system to review remediation plans and train providers on clinical coding procedures.

### LUNCHEON

Wednesday, Sept. 6, 2017

◆Call 642-0497◆

Florida Room, Atrium  
North Campus SCC

*Reservations no later than 6 p.m.*

*Sunday, Sept. 3, 2017*

Please give full names of members and guests, total number attending. Cost is \$15.00 payable at the door in cash or check. Social hour begins at 11:00 a.m. Business meeting at 11:15 followed by lunch and a speaker.

*Remember, if you make a reservation and do not attend, you are expected to pay. Bring payment to next meeting or send check to:*

Military Officers Association of America  
Post Office Box 5693  
Sun City Center, FL 33571-5693

## Warrior 2 Warrior

### A Veterans suicide prevention and treatment presentation

Co-directors: Ms. Susan Ullman, the wife of an Army Green Beret who succumbed to suicide.

Navy Seal CAPT Tom Chaby, USN (Ret). Former Commander of Seal Team 5.

**Date: October 10**

**Time: 11:00 am**

**Place: SCC Community Hall**

**Catered by Banquet Masters**



#### Reservations required

Point of contact for MOAA, MOWW, MFST Frank Kepley — 642-0801  
dkepley@tampabay.rr.com

Others: contact your service organization to make a reservation.

Lunch fee: \$14.00 (payable at door).

**NON REFUNDABLE**

They operate with a nationwide network of volunteers overseen by only one paid staff member. Unlike most programs grown out of some bureaucracy or institution, W2W was designed and developed by Special Operations, their wives and families. It's different, it's not run by bureaucrats, it's run by warriors for warriors.

The warrior ethos makes it nearly impossible for a teammate to ask for help. Fight through the injury, don't admit weakness, keep it inside. Asking for help risks stigma, marginalization, loss of security clearances, or worse. The VA and DoD bureaucracies are ineffective and most importantly.....this is critical.....they have no mechanism to identify teammates early on the glide slope to trouble. What these Special Operations veterans and their families came up with is a personalized peer driven deinstitutionalized program that breaks down the barriers and stigma to getting emotional help.

Instead of using mental health screenings, self referrals, or waiting for a crisis, Warrior 2 Warrior uses physical rehabilitation and physical therapy to gain acceptance. These guys will readily go through the "Physical Therapy" door, they're hesitant to go through the "Mental Health" door. It works because there is no stigma attached to physical rehabilitation.

Warrior 2 Warrior's high touch, highly personalized, peer-to-peer, de-institutionalized, non-bureaucratic approach works. Over 300 warriors have been through the program since inception. All came out healthier and many were intercepted on a trajectory to a very dark place. Warrior 2 Warrior is saving lives and saving families for these among our nation's greatest citizens. It is a 501(c)3 organization raising funds to support the program.



## MILITARY OFFICERS ASSOCIATION OF AMERICA

**MOAA:** The SCC Chapter of The Military Officers Association of America (MOAA) membership is granted to Army; Navy; Marines; Air Force; Coast Guard; National Oceanic and Atmospheric Administration; Public Health; the National; Guard or Reserve components both active or retired; and former officers and Warrant Officers who were separated under acceptable conditions.

**MISSION:** The mission of Sun City Center FL chapter shall be to promote the purposes and objectives of the Military Officers Association of America; foster fraternal relation among retired, active duty and former officers of active duty, retired and reserve components personnel of the uniformed services and their dependents and survivors; provide useful services for members and their dependents and survivors and serve the community and the nation.

**MEETINGS:** A meeting is held monthly (except July/August) in the Atrium building in the Florida room at 11:00 a.m. and includes lunch and a guest speaker.

**ACTIVITIES:** Coordinate and sponsor Annual Memorial Day ceremony; provide awards and honorariums to outstanding JROTC Cadets; contributed to Operation Warm Heart and Helping Hand; contribute to My Warriors Place; provide funds for MOAA scholarships and participate in numerous community activities.

Additional information can be obtained by calling 813-642-0801 or e-mailing [dkepley@tampabay.rr.com](mailto:dkepley@tampabay.rr.com). You can also contact us by mail at Frank Kepley, 815 Freedom Plaza Circle, Apt 104 Sun City Center Fl. 33573.



Sun City Center Chapter  
Military Officers Association of America  
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## Air Force Birthday Sept 18, 2017

**HAPPY 70th BIRTHDAY**



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MOAA Take Action link: [http://www.moaa.org/Main\\_Menu/Take\\_Action/Take\\_Action.html](http://www.moaa.org/Main_Menu/Take_Action/Take_Action.html)

# VETERANS HISTORY PROJECT

## PRESERVE YOUR MILITARY HISTORY .



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**T**his program captures through a video interview, firsthand account of Veterans who served in any branch of the US military in any capacity, from World War I through the present, and are no longer serving. Civilians who served in support of a US war effort in a professional capacity are also welcome to participate.

**3rd Friday of Each Month  
10:00 a.m. – 4:00 p.m.  
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If you are a Veteran or know Veterans that would like to share their stories, schedule your appointment now.

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