Submission of Documents to Department Of Veterans Affairs

Board Of Veterans Appeals
Litigation & Support Division
P.O. Box 27063
Washington, D.C 20038

FAX: (844) 678-8979

Please index this submission as one .pdf

Veteran:	Stone, Emanuel S.	**VSC:**	VBALAN344
C-File or SSN:	C 24076 460		
Street Address:	Long Beach VAMC 5901 East 7th Street		
City, State, Zip:	Long Beach, CA 90822-5201		

Date:	3/24/2026	**ATTN:**	Litigation and Support Intake

From:	**Gordon A. Graham**
	Title: Nonattorney Practitioner VA #39029 POA Code E1P
	Address 14910 125th Street KP North
	City, State Gig Harbor, WA 98329
Tel: (253)-313- 5377	**Fax (253) 590-0265**
	Email: **gagraham51@gmail.com Gordon.Graham@va.gov**

Type of Document Submitted:

☐	Request for Board Hearing at VA Central Office in D.C.(Rule 703)
☒	Request for Advancement of the Docket (§20.902(c)) Homeless
☒	Waiver of Time to Select a Different Board Review Option
☐	Submission of New and Relevant Evidence associated with the Instant Appeal
☒	VAF 10182 NOTICE OF DISAGREEMENT (BVA Review)
☐	Motion for Reconsideration (Rule1002)
☒	Other Appellant's Legal Brief of thirteen (13) Pages

Number of Pages Submitted (NOT including this cover sheet): Fifteen (15) Pages

OMB Approved No. 2900-0674
Respondent Burden: 30 Minutes
Expiration Date: Mar. 31, 2025

VA U.S. Department of Veterans Affairs

DECISION REVIEW REQUEST: BOARD APPEAL (NOTICE OF DISAGREEMENT)

PART I - PERSONAL INFORMATION

1. VETERAN'S NAME *(First, middle initial, last)*	2. VETERAN'S FILE NUMBER	3. VETERAN'S DATE OF BIRTH
[redacted]		

4. IF I AM NOT THE VETERAN, MY NAME IS *(First, middle initial, last)*	5. MY DATE OF BIRTH *(If I am not the Veteran)*

6. MY PREFERRED MAILING ADDRESS *(Number and street or rural route, P.O. Box, City, State, ZIP Code and Country)*

Long Beach, CA VAMC

☒ I AM EXPERIENCING HOMELESSNESS

7. MY PREFERRED TELEPHONE NUMBER *(Include Area Code)*	8. MY PREFERRED E-MAIL ADDRESS	9. MY REPRESENTATIVE'S NAME
(253) 313- 5377 (law office)	gordon.graham@va.gov	Gordon A. Graham

PART II - BOARD REVIEW OPTION *(Check only one)*

10. A Veterans Law Judge will consider your appeal in the order in which it is received, depending on which of the following review options you select. *(For additional explanation of your options, please see the attached information and instructions.)*

☒ 10A. Direct Review by a Veterans Law Judge: I do not want a Board hearing, and will not submit any additional evidence in support of my appeal. *(Choosing this option often results in the Board issuing its decision most quickly.)*

☐ 10B. Evidence Submission Reviewed by a Veterans Law Judge: I have additional evidence in support of my appeal that I will submit to the Board with my VA Form 10182 or within the 90 days of the Board's receipt of my VA Form 10182. *(Choosing this option will extend the time it takes for the Board to decide your appeal.)*

☐ 10C. Hearing with a Veterans Law Judge: I want a Board hearing and the opportunity to submit additional evidence in support of my appeal that I will provide within 90 days after my hearing. I want the hearing type below: *(Choosing this option will extend the time it takes for the Board to decide your appeal.)*

- ☐ Central Office Hearing *(I will attend in person in Washington, DC)*
- ☐ Videoconference Hearing *(I will go to a Regional Office)*
- ☐ Virtual Telehearing *(I will attend using an internet-connected device)* *(Important: **Provide your e-mail address** and Representative in Part I)*

PART III - SPECIFIC ISSUE(S) TO BE APPEALED TO A VETERANS LAW JUDGE AT THE BOARD

11. Please list each issue decided by VA that you would like to appeal. Please refer to your decision notice(s) for a list of adjudicated issues. For each issue, please identify the date of VA's decision and the area of disagreement *(e.g., service connection, disability evaluation, or effective date of award).*

☐ Check here if you are including a request for an extension of time to file the VA Form 10182 due to good cause and then attach additional sheets explaining why you believe there is good cause for the extension.

☐ Check here if you are appealing a denial of benefits by the Veterans Health Administration (VHA).

A. Specific Issue(s)	B. Date of Decision
Effective date of Special Monthly Compensation (SMC) under §§3.350(b)(3); 3.352(a)	12/30/2025
Entitlement to higher compensable rate under §4.124a DC 8004 under Duran v. McDonough precedence (30% minimum if any rating is 0%)	12/30/2025

C. Additional Issue(s)

☒ Check here if you attached additional sheets. Include the Veteran's last name and the file number. Thirteen (13)pages legal brief

PART IV - CERTIFICATION AND SIGNATURE

I CERTIFY THAT THE STATEMENTS ON THIS FORM ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

12. SIGNATURE *(Appellant or appointed representative) (Ink signature)*	13. DATE SIGNED
Gordon A. Graham VA #39029 POA E1P	3/24/2026

PENALTY: THE LAW PROVIDES SEVERE PENALTIES WHICH INCLUDE A FINE, IMPRISONMENT, OR BOTH, FOR THE WILLFUL SUBMISSION OF ANY STATEMENT OR EVIDENCE OF A MATERIAL FACT, KNOWING IT TO BE FALSE.

Gordon A. Graham #39029
14910 125th St. NW
Gig Harbor, WA 98329
(253) 313-5377

Dept. Of Veterans Affairs
Board of Veterans Appeals
Litigation and Support Group
P.O. Box 27063
Washington, DC 20038

March 24, 2025

Veteran: [redacted]
Subject: Notice of Disagreement with the 12/30/2025 Rating Decision

Before the Department of Veterans Appeals
Appellant's Legal Brief

Appellant, through his appointed representative, now files his Notice of Disagreement with the December 30, 2025, Rating Decision (RD) which failed to render a decision which granted every benefit that could be supported in law while protecting the interests of the Government under §3.103(a) (2025)-to wit:

> Entitlement to an effective date corresponding to the date of claim (3/18/2024) for Service connection for continuously prosecuted claim for aid and attendance for a heart condition based on inpatient status in a VA- contracted nursing home;
>
> Entitlement to higher level of compensation than awarded- specifically entitlement to Service Connection for Parkinsonism under §4.124a DC 8004 at the minimum rate of 30% under authority of recent Duran v. McDonough precedence.

Because appellant is proceeding *pro se* with a VA representative rather than a VA-accredited attorney, he asks for both a sympathetic reading of his informal brief and a liberal construction of his arguments. See ***Calma v. Brown***, 9 Vet.App. 11, 15 (1996); ***De Perez v. Derwinski,*** 2 Vet.App. 85, 86 (1992). In ***Andrews v. Nicholson***, 421 F.3d (2005) at 1283, the Court held "Although we have held that the duty to construe a veteran's filings sympathetically does not necessarily apply when a veteran is represented by an attorney, the assistance provided by the DAV aide is not the equivalent of legal representation."

In order to aid the Trier of Fact and their staff attorneys in adjudicating the appeal, Appellant submits a brief history of his claims for SMC and Parkinsonism to date. All dates cited, unless otherwise denoted, refer to entries in the VBMS Receipt Date.

History of the Claim

12/15/2021-- Veteran files his VAF 21-2680 seeking a&a under §3.350(b)(3).

3/18/2024-- Veteran, through his DAV VSO, submits VAF 21-526 seeking entitlement for his heart condition (not otherwise specified).

3/18/2024-- VA establishes claim EP930 for National Quality Error-Rating.

4/12/2024-- Veteran, through DAV representative, submits claim for CUE for failure to grant SMC a&a misannotated in efolder as "third party correspondence".

4/23/2024-- VA c&p exam on page 3 of 12 pages attributes heart condition to coronary artery disease (CAD) due to herbicide exposure; diagnoses 1-3 METS via interview but notes on page 11 of 12 pages in block 15A. that LVEF of 40% is "more accurate finding".

7/13/2024-- RD Decision states, *in haec verba*, "Service connection for arteriosclerotic heart disease to include coronary spam [sic], including prinzmetal's [sic] angina, hear [sic] failure with mid-range ejection fraction associated with herbicide exposure (claimed as heart condition) is granted with a 100 percent evaluation effective March 18, 2024."

8/05/2024-- RD declares Clear and Unmistakable Error (CUE) in 100% evaluation of DC 7005 and reduces rating to 30% effective 3/18/2024; defers decision on entitlement to SMC for aid and attendance.

4/30/2025-- VA calls Veteran to schedule a hearing on the CUE filing of 4/12/2024.

7/01/2025-- Veteran calls to find out why no hearing has been scheduled for his 3/18/2024 Heart contention or CUE filing; informs VA employee he cannot attend any c&ps as he is currently in a nursing home; declines hearing at BVA.

7/21/2025-- VA schedules c&p exams under EP 930 Rating Error for Renal disease and diabetes mellitus, hearing loss, heart disease; separate c&p for SMC a&a due to increase of PTSD symptomatology. Exam clarification states "All the contentions listed are increase requests"

7/31/2025-- duplicate request for c&p exams.

8/07/2025-- Veteran calls VA 800 number stating he requests hearing if SMC benefits not reversed and benefit granted including renal disease, DM II, IHD, PTSD.

8/08/2025-- VA cancels PTSD, hearing loss, renal disease, DM II, Coronary Heart exams.

11/07/2025-- Veteran's representative files VAF 21-526 and 995 to continue illegally cancelled claims via telephone for increase for PTSD, DM II residuals, Parkinson's HTN, renal disease and a&a due to DM II with peripheral neuropathy in attempt to preserve continually prosecuted claims stream of 3/18/2024.

11/14/2025-- VA again requests c&p exams pursuant to refiling for increased ratings for illegally cancelled claims.

12/10/2025-- Informal hearing with DRO establishes fact that finality of 8/05/2024 reduction of heart rating was abated by illegal cancellation of claims via telephone rather than in writing; establishes fact that CUE filing of 4/12/2024 is still a pending claim.

12/17/2025-- VA conducts c&p exams for DM II/PN of the extremities, Parkinsonism, Coronary heart condition, HTN, renal, PTSD.

12/30/2025-- RD grants, *inter alia*, increase in PTSD to 100%, increase for renal to 80%, balance impairment for Paralysis agitans at 10%, speech changes and stooped posture due to Paralysis Agitans at 0%, and SMC a&a with incorrect effective dates of 11/07/2025; defers heart condition and fails to address pending CUE claim from 4/12/2024.

1/06/2026-- VA cancels EP 930 National Quality Error- Rating claim.

This Appeal ensues.

The Legal Landscape

In ***Akles v. Derwinski,*** 1 Vet.App. 118, 121 (1991), the Court noted VA's policy to consider SMC where applicable). See also ***Bradley v. Peake***, 22 Vet. App. 280 (2008) ("Accordingly, any effective date must be based on that point in time when the evidence first supported an award of SMC, which may be well before Mr. Bradley raised the issue of his entitlement thereto. See 38 U.S.C. §§ 5110(a), 1114(s); 38 C.F.R. § 3.400(o) (2008)".

In ***Moreira v. Principi***, 3 Vet.App. 522, 524 (1992) the Court held SMC is available when, "as the result of service-connected disability," a veteran suffers additional hardships above and beyond those contemplated by VA's schedule for rating disabilities. See 38 U.S.C. § 1114(k)-(s). The rate of SMC "varies according to the nature of the veteran's service-connected disabilities."

In ***Duran v. McDonough***, 36 Vet. App. 230, 236 (2023), the Court held that entitlement to the minimum rating under DC 8004 remains "even when ascertainable manifestation ratings under other Diagnostic Codes combine for a total rating in excess of 30 percent, the basis for the minimum rating under DC 8004 remains as long as there is at least one ascertainable manifestation of Parkinson's disease that is not compensable under any other DC." Id.

§ 3.400 General.

Except as otherwise provided, the effective date of an evaluation and award of pension, compensation, or dependency and indemnity compensation based on an initial claim or supplemental claim will be the date of receipt of the claim or the date entitlement arose, whichever is later

(o) Increases (38 U.S.C. 5110(a) and 5110(b)(2), Pub. L. 94-71, 89 Stat. 395; §§ 3.109, 3.156, 3.157 —

(2) Disability compensation. Earliest date as of which it is factually ascertainable based on all evidence of record that an increase in disability had occurred if a complete claim or intent to file a claim is received within 1 year from such date, otherwise, date of receipt of claim. When medical records indicate an increase in a disability, receipt of such medical records may be used to establish effective date(s) for retroactive benefits based on facts found of an increase in a disability only if a complete claim or intent to file a claim for an increase is received within 1 year of the date of the report of examination, hospitalization, or medical treatment. The provisions of this paragraph apply only when such reports relate to examination or treatment of a disability for which service-connection has previously been established.

§ 3.401(a) Veterans. Awards of pension or compensation payable to or for a veteran will be effective as follows: (a) Aid and attendance and housebound benefits.

(1) Except as provided in § 3.400(o)(2), the date of receipt of claim or date entitlement arose, whichever is later. However, when an award of pension or compensation based on an original or supplemental claim is effective for a period prior to the date of receipt of the claim, any additional pension or compensation payable **by reason of need for aid and attendance** or housebound status shall also be awarded for any part of the award's retroactive period for which entitlement to the additional benefit is established. (emphasis added)

3.2500(d) states

(d) Voluntary withdrawal. A claimant may withdraw a supplemental claim or a request for a higher-level review at any time before VA renders a decision on the issue. A claimant **must submit in writing or through electronic submission in a manner prescribed by the Secretary** any notice of withdrawal of an issue under the selected review option to the agency of original jurisdiction. The withdrawal will be effective the date VA receives it. A claimant may withdraw an appeal to the Board of Veteran's Appeals as prescribed in § 20.205. (emphasis added).

In ***AB v. Brown***, 6 Vet. App. 35, 38 (1993), the Court held applicable law mandates that when a veteran seeks an original or increased rating, it will generally be presumed that the maximum benefit allowed by law and regulation is sought, and it follows that such a claim remains in controversy where less than the maximum benefit available is awarded. See also §3.103(a).

In ***Bradley v. Peake***, 22 Vet. App. 280 (2008), the Court held "Accordingly, any effective date must be based on that point in time when the evidence first supported an award of SMC, which may be well before Mr. Bradley raised the issue of his entitlement thereto." See 38 U.S.C. §§ 5110(a), 1114(s); 38 C.F.R. § 3.400(o) (2008).

Discussion

The Appellant indisputably served in Vietnam. That much is confirmed. Ergo, there can be no discussion as to whether he was, or was not, exposed to herbicides. In addition, the date of a claim is determined by the date filed with certain codicils allowing for SMC when the medical evidence first supports the entitlement. In addition, it is an inferred claim when the Veteran suffers additional hardships above and beyond those contemplated by VA's schedule for rating disabilities. ***Moreira*** *supra*.

However, VA has never contended that SMC at the L rate under §3.350(b)(3) is *not* for application when a Veteran is an inpatient in a VA-approved nursing home. In point of fact, 38 USC §1114(l) speaks of this entitlement in the plural -i.e., with such significant **disabilities** as to be in need of regular aid and attendance. (emphasis added).

The Appellant has languished in several nursing homes over the last three or four years and has been unable to assert his rights to an inferred entitlement to aid and attendance (a&a) during this time. Unarguably, the medical records show his gradual descent into severe health issues all the while unable to attend any c&p exams. ***Akles*** *supra*.

Until his present representative accepted his Power of Attorney, no one accredited was amenable to providing assistance claiming he had achieved the highest and best rating possible. VA has repeatedly denied his attempts to attain a&a waving the M 21 banner of Part VIII, subpart IV.4.A.1.a. to deny claims for SMC. As the Trier of Fact is more than aware, irrespective of there being no obligation to recognize these adjudicational instructions, the regulation §3.350(i) is the only one regarding SMC that has a specific requirement for a single rating of 100% or an equivalent rating of Total Disability due to Individual Unemployability (TDIU). See ***Overton v. Wilkie***, 30 Vet. App. 257, 263 (2018); ***Bradley*** *supra*.

Here, in the instant case, the Appellant avers he has been an inpatient in no less than three nursing homes in the last four years including the Long Beach VAMC. His longstanding PTSD with AUD rating of 70%, combined with his severe DM II with PN residuals clearly and unmistakably reveal an inferred need for a&a.

Oddly, as many times as the Veteran has applied for, and been denied, entitlement to SMC based on his 70% rating for PTSD (100% at TDIU), no one with the foresight to infer, made any attempt to schedule the Appellant for a c&p to determine if his PTSD with alcohol use disorder might be a prime reason for his

need for a&a. No one that is, until this representative made a concerted effort to place it in contention front and center in the fall of 2025.

One thing that stands out is the Secretary's choice of reverting back to the old DC 7005 application of the Left ventricular Ejection Fraction (LVEF) as the method to rate Appellant's heart on July 13, 2024. This clearly and unmistakably contradicts the newer METS measurement and would appear to be impermissible under §4.104 DC 7005. Based on that, Appellant contends it is not probative for rating purposes.

In ***Ingram v. Nicholson***, 21 Vet. App. 232, 256-57 (2007), the Court held "It is the pro se claimant who knows that symptoms he is experiencing and that causing him disability...[and] it is the Secretary who knows the provisions of title 38 and can evaluate whether there is a potential under the law to compensate an averred disability based on a sympathetic reading of the material in a pro se submission." A claimant may satisfy this requirement by referring to a body part or system that is disabled or by describing symptoms of the disability.

The Appellant has no medical training so it would be illogical to suggest he diagnose himself or opine as to that which ails him and causes his need for a&a. The December 23, 2025, psych review is the first such foray to ascertain the Appellant's mental disposition for almost 25 years. Considering the VA's normal proclivity to require a c&p at the time one apples for TDIU, surprisingly, there has been no investigation whatsoever in this regard since before 2002.

Appellant submits he has continuously pursued his claim for SMC a&a without surcease for over five years. In all that time, the only disease process which could possibly qualify for a&a was singularly the only disease process studiously ignored as a possible qualifier using the Secretary's M 21 dicta mentioned earlier. See ***Jandreau v. Nicholson***, 492 F.3d 1372, 1377 (Fed. Cir. 2007) (noting general competence of laypersons to testify as to symptoms but not medical diagnoses).

Instead, he was induced by poor legal representation to seek a&a for diseases and injuries which were not service connected. In ***Clemons v. Shinseki***, 23 Vet. App. 1, 5 (2009), the Court held a claimant "[does] not file a claim to receive benefits only for a particular diagnosis, but for the affliction his . . . condition, whatever that is, causes him." Consequently, VA "should construe a claim based on the reasonable expectations of the non-expert, self-represented claimant and the evidence developed in processing that claim," taking into consideration "the claimant's description of the claim; the symptoms the claimant describes; and the information the claimant submits or that the Secretary obtains in support of the claim." VA commits error "when it fail[s] to weigh and assess the nature of the current condition the appellant suffer[s] when determining the breadth of the claim before it." Id. at 6.

In ***Comer v. Peake***, 552 F.3d 1362,1369 (Fed.Cir.2009), the Court enunciated "The VA disability compensation system is not meant to be a trap for the unwary, or a stratagem to deny compensation to a veteran who has a valid claim, but who may be unaware of the various forms of compensation available to him."). Moreover, in ***Barrett v. Nicholson***, 466 F.3d 1038, 1044 (Fed.Cir.2006), the court held "The government's interest in veterans cases is not that it shall win, but rather that justice shall be done, that all veterans so entitled receive the benefits due to them."

Appellant's plight is a page right out of Comer and Barrett. He is divorced, estranged from his children for decades due to the severity of his major mental disorder, as well as unable to ambulate, drive or attend c&p examinations. Somehow, for the last ten years, this has escaped the VA Examiners. His claims file is littered with c&p cancellations due to the inability to attend them and regardless of his cries for help, VA has provided little consideration or sympathy for his circumstances.

Appellant does not dispute that the VA process is a two-way street with concomitant responsibilities to comply with the process of determining eligibility, but the Secretary has been in constructive possession of copious data that shows the Appellant's need for a&a for over 8 years. I need not point out that

this entitlement is an inferred ancillary one which can be discerned by the medical evidence of record. The mere fact that the Veteran is a frequent inpatient in nursing homes should be a dead giveaway as to his need for a higher level of care.

Application of Duran v. McDonough

When this representative first began his longitudinal review of the Appellant's claims files, one thing stood out- the recent, frequent mention of Parkinson's or Parkinsonism. A careful review showed no one had bothered to file him for this progressively debilitating disease in spite of his complaints. A c&p was conducted and due to the fact that he shares a comorbidity of peripheral neuropathy due to DM II, the Secretary appears to find tension with pyramiding as Parkinson's residuals of peripheral tremors and weakness share the same diagnostic codes. This has effectively precluded accurate assessments of loss of use of the extremities to either. It should be noted that the Appellant ambulates via a motorized wheelchair due to his loss of use of the lower extremities.

More to the point, the Duran decision clarified the notes before and after §4.124a DCs 8000 to 8025 to remove any ambiguity. Thus, we know that, legally speaking, Appellant's ratings for Parkinsonism (or Parkinson's) cannot stand as is. Perhaps some would argue that the newer diagnostic code of DC 8026 is inapplicable to Duran precedence. However, a cursory examination of the most recent Rating Decision code sheet accompanying the December 30, 2025, RD clearly and unmistakably rates him under DC 8004 which is assigned solely to Paralysis Agitans. See page 3 of 7 pages DC 8004-6204 "balance impairment as a residual of Parkinsonism" at 10%; DC 8004-6516 "Speech changes as residual of Parkinsonism" at 0%; DC 8004-8211 "Stooped posture as residual of Parkinsonism".

Reasonable minds can only concur that the Secretary knows how to write regulations and assigns the proper diagnostic codes to the diseases described in Part 4 of the VASRD. This clearly falls into the realm of the presumption of

regularity. In ***Sickels v. Shinseki***, 643 F.3d, 1362, 1365-66 (Fed. Cir. 2011), the Court held that the Board is "entitled to assume" the competency of a VA examiner and the adequacy of a VA opinion without "demonstrating why the medical examiners' reports were competent and sufficiently informed"). See also ***Ashley v. Derwinski,*** 2 Vet.App. 307, 308 (1992) (quoting ***United States v. Chem. Found., Inc.***, 272 U.S. 1 (1926)) "[t]here is a presumption of regularity under which it is presumed that government officials 'have properly discharged their official duties.'"

Using this yardstick, it would seem that the absence of a 30% minimum rating for DC 8004 flies in the face of Duran precedence in light of not one but two zero percent ratings for speech changes and stooped posture-both clearly under DC 8004. Appellant prays for relief from the Trier of Fact from this oversight.

Conclusion

Wherefore, Appellant prays for an earlier effective date for his entitlement to SMC under §3.350(b)(3) for aid and attendance which comports with his continuously pursued claims stream beginning most recently on March 18, 2024, when he first sought service connection for his herbicide-related presumptive heart condition under §3.309(e).

Moreover, Appellant seeks to reinstate his legitimate claims for increase of renal disease, diabetes mellitus with bilateral upper and lower peripheral neuropathy and hearing loss established under the EP 930 which were cancelled unceremoniously by the VA via a telephone call on August 7, 2025, effectively eradicating the correct effective date of claim in violation of regulation. (3.2500(d).

Appellant feels the appeal is in equipoise and asks for the time-honored pro-Veteran canon of statutory construction most recently espoused in ***Henderson v. Shinseki,*** 562 U.S. 428,441 (2011) ("We have long applied the

canon that provisions for benefits to members of the Armed Services are to be construed in the beneficiaries' favor.").

In ***Wise v. Shinseki***, 26 Vet. App. 517,531(2014), the Court held that the benefit of the doubt rule is a unique standard of proof, and "the nation, "in recognition of our debt to our Veterans" has taken upon itself the risk of error in awarding such benefits."

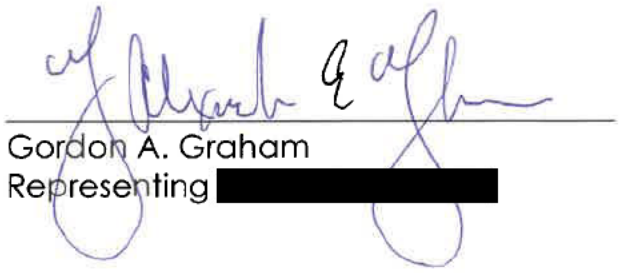
The pro-Veteran canon instructs that provisions providing benefits to veterans should be liberally construed in the veterans' favor, with any interpretative doubt resolved to their benefit. See, e.g., ***King v. St. Vincent's Hosp.***, 502 U.S. 215, 220 (1991).

The Supreme Court first articulated this canon in ***Boone v. Lightner*** to reflect the sound policy that we must "protect those who have been obliged to drop their own affairs to take up the burdens of the nation." 319 U.S. 561, 575 (

Lastly, in ***Fishgold vs. Sullivan Drydock & Repair Corp.***, 328 U.S. 275, 66 S. Ct. 1105 (1946) the Supreme Court declared that veterans laws are "to be liberally construed for the benefit of those who left private life to serve their country in its hour of great need," and the Court showed us how to do so—"construe the separate provisions of the [law]as parts of an organic whole and give each as liberal a construction for the benefit of the veteran as a harmonious interplay of the separate provisions permits." The slipping stems from two words in an oft cited pro-veteran canon case, ***Brown vs. Gardner***, 115 S. Ct. 552,130 (1994 : "interpretive doubt."

Appellant honorably and voluntarily served his Country when she called. He now asks for the same consideration as his disabilities are considered terminal illnesses.

Respectfully submitted,



Gordon A. Graham
Representing [redacted]

The above legal brief is the sole work product of Appellant's representative and contains no AI-generated dialogue, plagiarized content or "unicorn" legal cites.

[redacted]

WAIVER OF TIME TO SELECT A DIFFERENT BOARD REVIEW OPTION

If you are waiving any remaining time to select a different Board review option, please check the option below.

X
_____ I ***waive*** my right to select a different Board review option. ***Please review my appeal as soon as possible.***

Signature
Gordon A. Graham #39029 E1P
Counsel for [redacted]

3/24/2026
Date

Mail or fax this form to:

Board of Veterans'
Appeals P.O. Box 27063
Washington, DC 20038

Fax: 1-844-678-8979