

## Additional Information

1. Veteran/beneficiary's first name:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

1. Veteran/beneficiary's last name:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

10. Date(s) of treatment by doctor(s) Line 1:

1-4-1991 for a month

10. Date(s) of treatment by doctor(s) Line 2:

From 1/1/2001 until 1-15-05

11. Name and address of doctor(s) Line 1:

Doctor Care A

123 Main Street 1B

Baltimore MD 21200-1111

USA

11. Name and address of doctor(s) Line 2:

Doctor Care B

123 Main Street 1B

Baltimore MD 21200-1111

USA

12. Name and address of hospital Line 1:

Hospital Care A

123 Main Street 1B

Baltimore MD 21200-1111

USA

12. Name and address of hospital Line 2:

Hospital Care B

123 Main Street 1B

Baltimore MD 21200-1111

USA

13. Date(s) of hospitalization Line 1:

From this date to that date

13. Date(s) of hospitalization Line 2:

From 1/1/1999 until 2003

18A. Previous employer Line 1:

Name: Employer A

Address: 123 Main Street, 1B, Baltimore, MD, 21200-1111, USA

Dates of Employment: from: 1991-01-01 to: 1992-01-01

Type of Work: work

Hours Per Week: 40

Time Lost From Illness: 2 months

Highest Gross Earnings Per Month: 4000

18A. Previous employer Line 2:

Name: Employer B

Address: 123 Main Street, 1C, Baltimore, MD, 21200-1111, USA

Dates of Employment: from: 1992-01-01 to: 1993-01-01

Type of Work: work  
Hours Per Week: 40  
Time Lost From Illness: 1 months  
Highest Gross Earnings Per Month: 2000

18A. Previous employer Line 3:

Name: Employer F  
Address: 123 Main Street, 1C, Baltimore, MD, 21200-1111, USA  
Dates of Employment: from: 1992-01-01 to: 1993-01-01  
Type of Work: work  
Hours Per Week: 40  
Time Lost From Illness: 1 months  
Highest Gross Earnings Per Month: 2000

18A. Previous employer Line 4:

Name: Employer G  
Address: 123 Main Street, 1C, Baltimore, MD, 21200-1111, USA  
Dates of Employment: from: 1992-01-01 to: 1993-01-01  
Type of Work: work  
Hours Per Week: 40  
Time Lost From Illness: 1 months  
Highest Gross Earnings Per Month: 2000

18A. Previous employer Line 5:

Name: Employer H  
Address: 123 Main Street, 1C, Baltimore, MD, 21200-1111, USA  
Dates of Employment: from: 1992-01-01 to: 1993-01-01  
Type of Work: work  
Hours Per Week: 40  
Time Lost From Illness: 1 months  
Highest Gross Earnings Per Month: 2000

18A. Previous employer Line 6:

Name: Employer I  
Address: 123 Main Street, 1C, Baltimore, MD, 21200-1111, USA  
Dates of Employment: from: 1992-01-01 to: 1993-01-01  
Type of Work: work  
Hours Per Week: 40  
Time Lost From Illness: 1 months  
Highest Gross Earnings Per Month: 2000

22A. Employer applied to for work since unemployment Line 1:

Name: Employer C  
Address: 123 Main Street, 1D, Baltimore, MD, 21200-1111, USA  
Type of Work: work  
Date Applied: 1997-1-1

22A. Employer applied to for work since unemployment Line 2:

Name: Employer D  
Address: 123 Main Street, 1E, Baltimore, MD, 21200-1111, USA  
Type of Work: work  
Date Applied: 1997-1-1

22A. Employer applied to for work since unemployment Line 3:

Name: Employer J  
Address: 123 Main Street, 1E, Baltimore, MD, 21200-1111, USA

Type of Work: work  
Date Applied: 1997-1-1

22A. Employer applied to for work since unemployment Line 4:  
Name: Employer K  
Address: 123 Main Street, 1E, Baltimore, MD, 21200-1111, USA  
Type of Work: work  
Date Applied: 1997-1-1

22A. Employer applied to for work since unemployment Line 5:  
Name: Employer L  
Address: 123 Main Street, 1E, Baltimore, MD, 21200-1111, USA  
Type of Work: work  
Date Applied: 1997-1-1

24B. Type of education or training prior to unemployability Line 1:  
Other Education A  
from: 1992-1-1 to: 1993-1-1

24B. Type of education or training prior to unemployability Line 2:  
Other Education B  
from: 2001-1-1 to: 2002-1-1

25B. Other education or training after unemployability Line 1:  
Other Education A  
from: 1992-1-1 to: 1993-1-1

25B. Other education or training after unemployability Line 2:  
Other Education B  
from: 2001-1-1 to: 2002-1-1