## **Additional Information**

Additional information
1A. Veteran/service member's name. first name: <b>XXXXXXXXXXXX</b>
9A. Traumatic event(s) information Line 1: <b>Event Number: 1</b>
Event Description:
Lorem ipsum dolor sit amet.
Event Location:
abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Event Date:
Summer of '70
9A. Traumatic event(s) information Line 2: <b>Event Number: 2</b>
Event Description:
Lorem ipsum dolor sit amet.
Event Location:
abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Event Date:
June 2007
9A. Traumatic event(s) information Line 3: <b>Event Number: 3</b>
Event Description:
Lorem ipsum dolor sit amet
Event Location:
abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Event Date:
February 14, 2020
9A. Traumatic event(s) information Line 4: <b>Event Number: 4</b>
Event Description:

Lorem ipsum dolor sit amet
Event Location:
abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Event Date:
Autumn of 1995
9A. Traumatic event(s) information Line 5: <b>Event Number: 5</b>
<b>Event Description:</b>
Lorem ipsum dolor sit amet.
Event Location:
abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Event Date:
Winter of '68
9A. Traumatic event(s) information Line 6: <b>Event Number: 6</b>
<b>Event Description:</b>
Lorem ipsum dolor sit amet.
Event Location:
abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Event Date:
Spring of '72
9A. Traumatic event(s) information Line 7: <b>Event Number: 7</b>
<b>Event Description:</b>
Lorem ipsum dolor sit amet.
Event Location:
abcdefghijklmn opqrstuvwxyz1234a bpqrstuvwxyz1234a
Event Date:
Summer of '69

13C. Treatment information Line 1:

**Treatment Information Number: 1** 

**Treatment Facility Name and Location:** 

Walter Reed, Bethesda, MD

Treatment Date: 02-2014

13C. Treatment information Line 2: **Treatment Information Number: 2** 

**Treatment Facility Name and Location:** 

Cedarwood Behavioral Health Center, 4321 Oak Ridge Rd, Maplewood, MN

**Treatment Date: XX-2024** 

13C. Treatment information Line 3: **Treatment Information Number: 3** 

**Treatment Facility Name and Location:** 

Silver Oak Recovery Center, 745 Greenfield Avenue, Clearwater, FL

**Treatment Date: Don't have date** 

13C. Treatment information Line 4: **Treatment Information Number: 4** 

**Treatment Facility Name and Location:** 

Silver Oak Recovery Center, 745 Greenfield Avenue, Clearwater, FL

**Treatment Date: Don't have date**