

Great Plains Veterans Services Center

"Veterans helping Veterans for a better future"

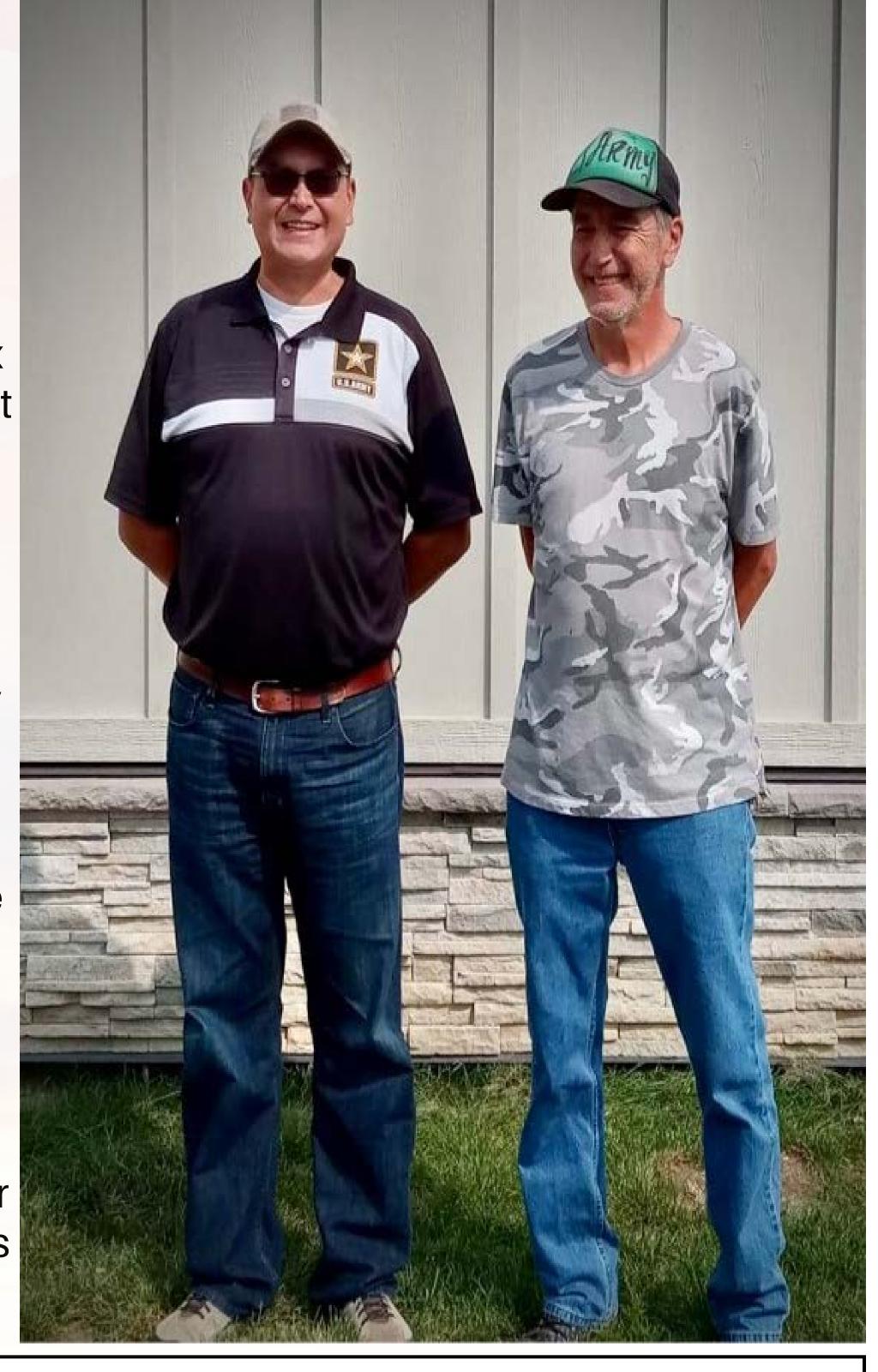
GREAT PLAINS VETERANS SERVICES CENTER WAS AWARDED VA SUICIDE PREVENTION GRANT

Staff Sergeant Parker Gordon Fox SUICIDE PREVENTION GRANT RECIPIENT

Great Plains Veterans Services Center formerly Rocky Boy Veterans Center was awarded a VA suicide prevention grant. A grant to support local suicide prevention efforts for Veterans and their families. Great Plains Veterans Services Center (GPVSC) is working with the U.S. Department of Veterans Affairs (VA) to prevent Veteran suicide in Montana counties specified by the grant. Great Plains Veterans Services Center recently received \$650,000 from VA to support its mission through the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP), a three-year program that provides funding to community-based organizations with innovative ideas for preventing Veteran suicide.

"Veterans are our "neighbors" brothers and sisters, and we are committed to ensuring they have the care they need in their community. When it's the darkest, we want our fellow Veterans to know there is hope," said Chauncey Parker, Executive Director. With its SSG Fox SPGP award, GPVSC plans to mitigate Veteran suicide by providing Veteran outreach, case management, direct assistance, referral services, counseling, DD Form 214 retrieval, employment services and support for any issue that affects the quality of life and mental health of Veterans.

Our service area under this program will be Blaine, Chouteau, Glacier, Hill, and Phillips Counties to include the Rocky Boy's, Ft. Belknap, and Blackfeet reservations. We hold to our mission statement, "Veterans helping Veterans for a better future". This program will bolster our objectives in supporting our Veterans and Service Members by helping them obtain the care and benefits they have earned through their service to this country.



October 2022

NEWSLETTER

G.P.V.S.C STAFF

Executive Veterans Director Service Driver Chauncey Parker Rocky Boy Office Weston Sutherland

Administrative Manager

John Gardipee, Sr. **Veterans Transportation**

Supervisor

Veterans Transportation Browning Office Manager

Shane Sinclair

Transition Assistance

Thomas Lewis

Browning Office Coordinator Matt Webber John Gardipee, Jr.

Communications Specialist

Becky Lewis

Finance Manager

Marianne Capellen

Finance Clerk/HR Assistant

Cassie Morsette

Elderly Veterans Outreach

Coordinator

Donald Meyers

Veterans Outreach

Coordinator

Niles Wolf Chief

Louis Pollock

Veterans Transportation

Veterans Service Drivers

Supervisor

Ft. Belknap Office

François Nelis

Veterans Service Driver

Rocky Boy / Ft.Belknap

Keith Billy

Veterans Services Driver

Scobey Office

Marshall York

Graphic Designer

Amber Lewis

American Legion Post 67 Meeting

At Northern Winz Casino 11275 US-87, Box Elder, MT 59521

> Tuesday October 11th

Support the Great Plains Veterans Services Center and Donate



Non- Veteran-

\$23.00

Veteran-

\$18.00

American Legion Post Member-

\$15.00



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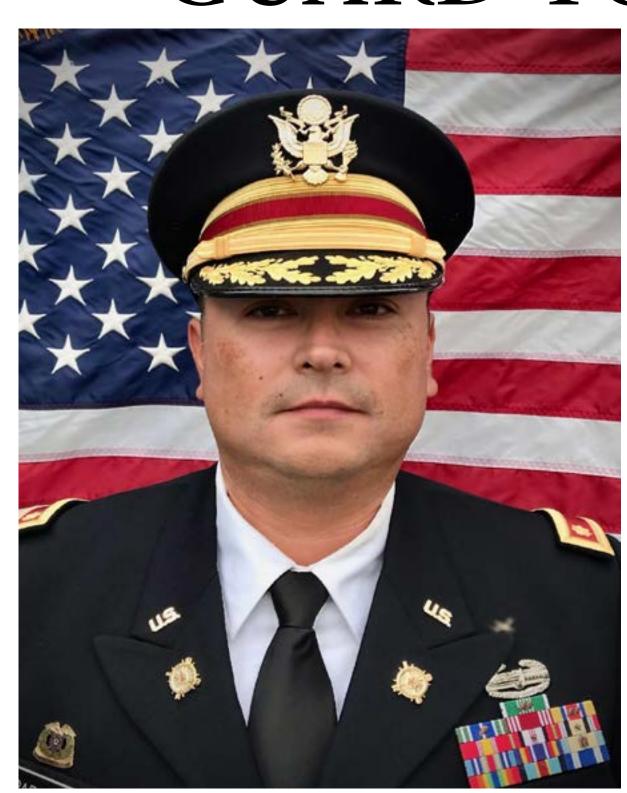
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CHAUNCEY PARKER RETIRES FROM THE NATIONAL GUARD TO FOCUS MORE TIME ON THE VETERANS



Chauncey Parker is an enrolled member of the Chippewa-Cree Tribe of the Rocky Boy's Indian Reservation in North Central College ROTC program in 2007 and Montana. Raised in Rocky Boy and attended schools in Rocky Boy and Havre, 639th CSSC in Libby, MT. graduated from Havre High School in 2001. Graduated from Carroll College in 2007 with a B.A. in Political Science. From support of Operation Iraqi Freedom 2010-2015 worked under the Chippewa-Cree Veterans Business Outreach Center

program. Later, Co-founded the Great Plains Veterans Services Center, formally the Rocky Boy Veterans Center in 2015 and served on the Board of Directors until 2016. In December of 2016 he was hired as the Executive Director for the Great Plains Veterans Services Center and continues to serve in this role.

Chauncey's career started by enlisting in 2001 as a Petroleum Supply Specialist. His first duty assignment was with the 443rd Petroleum Supply Company. In 2003, Chauncey was assigned to and deployed with the 639th CSSC in support of Operation Iraqi Freedom II. In 2005 he enrolled in the Carroll College ROTC program. Chauncey commissioned as a Second Lieutenant from the Carroll assigned as a Platoon Leader with the

In 2009, he deployed with the 639th in and served as the Camp Liberty Supply Support Activity and Bottle Water Plant

OIC. In 2011, he was assigned to the 495th CSSB and served as the Support Operations Supply Management Officer. Chauncey waspromoted to Captain and deployed with the 495th CSSB in 2012 in support of Operation Enduring Freedom and served as the Kandahar Central Issue Facility Accountable Officer. He served as the 639th CSSC Commander, headquartered in Havre, MT from 2015-2017.

Chauncey was then assigned to the Joint Forces Headquarters G-4 staff for the Montana National Guard and served as the Tech Ops Branch Officer. In 2018, Chauncey was promoted to Major in 2018. Retired from the Montana National Guard in June 2022 after 21 years of service.

MAJ Parker's decorations include the Army Commendation Medal with 2 Bronze Oak Leaf Clusters, Army Achievement Medal with Bronze Oak Leaf Cluster, Army Reserve Components Achievement Medal with 2 Bronze Oak Leaf Clusters, National Defense

Service Medal, Global War on Terrorism Expeditionary Medal, Global War on Terrorism Service Medal, Iraq Campaign Medal with Campaign Star, Afghanistan Campaign Medal with Campaign Star Armed Forces Reserve Medal with Bronze 'M' Device, the Army Service Ribbon, the Overseas Service Ribbon with numeral 3, as well as numerous State National Guard ribbons and awards.

As a tribute to his many years of service, his parents, Robert and Janice Parker organized a luncheon honoring him for his Army retirement. Chauncey's official retirement ceremony is to take place in mid October 2022.

Chauncey is valued for his hardwork, commitment, and dedication to our Veterans.

On behalf of everyone at GPVSC, we would like to thank you for your service to this great nation.

VETERANS CENTER NATIVE AMERICAN WEEK WAS A SUCCESS

Great Plains Veterans Services Center hosted a community meal on Wednesday, September 28. This donor appreciation event was to celebrate Native American week, while thanking the Chippewa Cree Tribe for their donation to GPVSC. 2022 has been a very exciting year for GPVSC and we have witnessed the community come together in support of our fellow veterans. Our future is bright because of donors like the Chippewa Cree Tribe. We served over 150 guests and enjoyed the afternoon with fellowship and camaraderie. In conjunction with a meal, GPVSC had a very successful fundraiser for the Paul Gopher Memorial Handgame Tournament.

Paul was a Marine Corps Veteran, one of our first drivers under Highly Rural Transportation Grant, and an Honor Guard Member. He was always willing to help with anything the organization was doing. Paul was diagnosed with ALS and unfortunatley, passed due to the disease. Co-Founders Chauncey Parker and John Gardipee, Sr. wanted him to be remembered in a special way. It seemed fitting to memorialize him by honoring his love for Handgames.

Great Plains Veterans Services Center would like to thank all of our Dunk Volunteers and everyone who came out to have a great time!



Veterans.

IDENTIFYING OPPORTUNITIES TO ADVANCE BREAST HEALTH FOR WOMEN VETERANS

For Congresswoman Debbie Wasserman Schultz, the fight against breast cancer is both personal and professional. In 2007, the Congresswoman was diagnosed with the disease and privately fought her battle for 15 months.3 Now 14 years cancer-free, her survivorship journey continues in her role as a breast cancer screening programs, leading leading policy maker and advocate for young women and their access to the tools needed to detect, fight, and survive breast cancer.

The PALS Act ensures that women continue to have access to annual screening mammography starting at age 40, despite the USPSTF's widely debated decision to advise women to begin biennial breast cancer screenings at age 50. Many women face barriers to breast cancer screening, including delayed care due to the COVID-19 pandemic, anxiety and fear, lack of information, and the deprioritization of their own health needs. Misguided recommendations are just one more harmful barrier that threaten access and early detection.

As the Chairwoman of the Military Construction, Veterans Affairs and Related Agencies Appropriations subcommittee, Congresswoman Wasserman Schultz has overseen a nearly 33 percent increase in VA funding for gender-specific care and services for Women Veterans. In conjunction with VA's trust-building campaigns to raise awareness of the identities and contributions of Women Veterans, this historic increase in funding demonstrates the high priority to serve this patient population.

Congresswoman Julia Brownley is another leader in Congress passionate about these issues. In 2019, the Congresswoman founded the Women Veterans Task Force (WVTF), a task force within the House Veterans' Affairs Committee whose mission is to increase the visibility of the 2 million women who have served, develop policy specifically focused on supporting Women Veterans, and create equity in the provisions of their benefits and services. Since its enactment, the WVTF has channeled the insights of topical experts and advocates into several pieces of significant legislation.

Signed into law in January 2021, the Deborah Sampson Act is a bipartisan, bicameral effort to eliminate barriers to care and services for Women Veterans and provide VA with the appropriate tools and resources. The bill's namesake, Deborah Sampson, is widely regarded as the earliest example of a woman serving in the US military.6 Sampson disguised herself as a man to join the Patriot forces in the American Revolution and received an honorable discharge in October 1783. As the role of women in the military has significantly expanded since the 1700s, so have the introduction of unique health risks caused in part by their service. Veterans who served in Iraq and Afghanistan are presumed to have been exposed to a range of environmental and chemical hazards that carry potential health risks. While more research on impacts of toxic exposures is needed, legislators and VSOs are finding ways to bridge the gap between Veterans' exposures and their eligibility for screening per clinical guidelines.

It is estimated that 40 percent of US women have dense breast tissue,14 and it is well known as a clinical challenge associated with a higher risk of breast cancer.15 Patient experience has also become a top priority in to adoption of on-device features, or mobile mammography programs that can make screening more convenient.

The legislative process requires the participation of stakeholder organizations that amplify the dynamic voices of their constituents to influence policy and impact

Stakeholder organizations amplify voices and advocate for change. Over 30 nationally recognized breast cancer patient and advocacy identified three key areas of opportunity for organizations exist, and countless state-based and local groups serve those impacted by breast cancer. Services offered include peerto-peer support, investment in research, and financial support for screening, treatment, and ancillary costs. For many women and their communities, these organizations are an invaluable component throughout the breast cancer journey.

The Young Survival Coalition (YSC) is uniquely focused on young adults affected by the disease and seeks to address their needs, amplify their voices, and improve their overall and authorized when necessary. "[Women quality of life. Founded by a group of women all diagnosed with breast cancer before age 40, YSC grew into an international movement, offering community support and educational resources that articulate the impact of breast cancer on young adults.16 During the panel discussion, Mary Ajango shared, "We often hear 'I'm the youngest person in the waiting room, the youngest person in the support group.' At YSC, our mission is to educate and empower these young adults impacted by breast cancer, especially as they will experience many long and Servicewomenfocused organizations include the Women Veterans Interactive Foundation and the Service Women's Action term health impacts due to their treatment for the rest of their lives."

Ashleigh Byrnes of DAV speaks regularly with Women Veterans about their healthcare experiences. "To the credit of VA, women rave about the care that they are receiving there and their providers. That being said, there are still some who are experiencing issues accessing services, like breast cancer screening and care coordination, inside and outside of the system." As not every VA medical facility offers breast cancer screening services, eligible Women Veterans may seek the service through contracted community providers.

For Ashleigh, the topic of military service and exposures is a personal one. A Marine Corps Veteran who deployed overseas to locations with known burn pits, she has yet to reach the eligible screening age per ACS guidelines and worries about the gap years between then and her exposures. She is encouraged by the introduction of the SERVICE Act, but still believes that clinical guidelines should be revisited and for Veterans, their individual experience and exposures need to

be considered. Making continued progress in the provision of health care and services for Women Veterans will be a focus for VA, legislators, and stakeholder organizations for many years to come.

We know that the VA knows Women Veterans best. It is important that we focus on education for community providers and ensure that when they are treating Women Veterans, they understand the unique needs of this population. Many women are not asked about a history of military service and exposure, which are such important factors in your overall health profile.

3 areas of opportunity to advance breast care for Women Veterans Throughout this discussion, the panelists the advancement of breast care for Women

1. Continue funding programs for Women Veterans

Efforts by VA to create and strengthen gender-specific services and programs, Congress' introduction of key legislation, and the grassroots work of stakeholder organizations collectively demonstrate sincere efforts to build trust among Women Veterans. To ensure sustained progress, these programs must continue to be funded Veterans] appreciate being seen, heard, and understood," Ashleigh says. "Any investment we can make in building that trust goes a long way."

2. Close research gaps for Women and Minority Veterans

The James J. Peters VA Medical Center in Bronx, NY and the Washington, DC VA Medical Center ran a pilot study, published in May 2021, using a breast cancer screening questionnaire to collect data from Women Veterans.20 Upon completion of a multiple choice questionnaire and calculation of a fiveyear and lifetime risk of invasive breast cancer using the Gail breast cancer risk assessment tool, a population of 99 Women Veterans at high risk of breast cancer was identified.

The screened population in this study, believed to be the only oncology study with a sample size participation of 60 percent Black Women Veterans, showed that nearly three times as many Women Veterans were at an increased risk for breast cancer when compared with historical averages in US women. In the final paragraph of the study, the authors drew the conclusion that although Women Veterans comprise a small subpopulation of women in the United States, they are an untapped resource for research collaboration and that the connection between breast cancer, epigenetics, and military service-related exposures could be an important area of analysis as rates of the disease continue to rise among Veterans. As we reflect on the expanding role of women in the military, from Deborah Sampson serving in disguise to their inclusion in combat positions, more research must be done to enable breakthroughs in gender-specific care design and delivery.

3. Educate and empower Women Veterans to be their best advocates When it comes to breast cancer, it is critical to understand personal risk factors. Though early detection through annual mammograms decreases mortality for women with breast cancer, women with additional risk factors are placed at a higher-than-average risk for developing the disease.21 Those risk factors include known genetic predisposition, strong family histories, prior exposure to radiation therapy, dense breast tissue, and perpetuated socioeconomic inequities. As previously discussed, Women Veterans may be at an even greater risk for the disease due to toxic exposures experienced during their military service. Knowing personal risk factors better prepares women for conversations with health care providers and puts them in an educated and empowered position. Women Veterans who seek breast imaging services outside of VA should be prepared with this information, as community providers may not be as familiar with their unique needs as their VA counterparts.

Breast cancer patient advocacy groups and VSOs connect those impacted by breast cancer and Veterans, respectively, with a breadth of resources and support across the long and complex journey ahead. With different groups representing unique needs by gender, age, race, and more, there is a diverse array of options that seek to recognize individuals for who they are. Many of these organizations offer community building opportunities and venues to connect with peers. For Veterans, participating in these spaces might rekindle the feelings of connection and camaraderie that may be missing upon transition from military service.

With over 700 Women Veterans diagnosed with breast cancer every year, VA continues to expand the availability of breast imaging services across the enterprise and enable access to precision oncology services and clinical trials.2

Finally, the COVID-19 pandemic disrupted access to care in ways that will be studied for years to come. Screening mammograms and diagnostic services were delayed, and disparities in care delivery to racial and ethnic minorities were exposed, stoking alarm despite their longstanding existence.22 While the work to remedy those inequities shall remain a global health priority, anyone who missed a screening mammogram or diagnostic exam due to COVID-19 should reschedule those appointments and regain the benefit of early detection.

Working together to create a new standard of care for Women Veterans The insights gained in this discussion of access to breast cancer screening for Women Veterans offer a constructive path forward for all engaged in the delivery of care for our women who serve. As the population of Women Veterans continues to rise, so should the understanding of their unique health considerations and the creation of innovative ways to serve and support them. GE Healthcare is honored to have convened these thought leaders and believes that this population must remain a priority for all.

BILL INCREASING VETERANS' ACCESS TO BREAST CANCER SCREENING

VA uses the American Cancer Society's breast cancer screening guidelines and recommends that all women begin getting yearly mammograms by age 45 and every other year at age 55.

You may also choose to start screening with yearly mammograms at age 40, or even earlier, if you have additional risk factors, such as certain genetic mutations, a family history of breast cancer, or other specific concerns.

VA recommends that you take the actions below at each age milestone:

Age 40: Talk with your VA primary care provider about the right time to begin screening

By age 45: Begin yearly mammograms Age 55: Get mammograms every other year or continue annually depending on your preference and risk factors

What services does VA provide for Breast Health?

Every VA facility has a Women Veterans Program Manager and Women's Health Primary Care Providers to ensure women Veterans have access to appropriate care and treatment. They will connect you with their clinical teams to coordinate all the services you may need.

Breast care resources available through VA include:

- Breast ultrasounds and MRI
- Breast biopsy and surgery
- Genetic counseling and testing
- Cancer diagnosis and treatment We offer mammograms on-site at over 65 VA facilities, and for those women receiving care at sites without mammography, we offer screening at conveniently located community facilities. We also have mammogram coordinators, who track those cancer and other cancers in the military women who are due for mammogram, follow-up on abnormal results, and help our patients navigate through the breast cancer

VA exceeds the private sector in mammography screening rates.

screening process.

For women diagnosed with breast cancer,

we offer full-service oncology treatment that American Veterans, the American Legion, includes imaging, surgery, chemotherapy, radiation, and other advanced state of the art treatments as needed, either on site, or referred into the community. VA patients are eligible for enrollment into clinical trials.

We are also excited to be standing up a Breast Cancer System of Excellence across the entire enterprise with nationally recognized, expert consultative services through electronic-consultation, telehealth, and a virtual tumor board, including partnership with VA and non-VA research entities.

How do I access services for Breast Health at • Compile a series of reports and studies, VA?

If you have concerns about your breast health, start by having a conversation with your VA primary care provider. They can get you set up with a mammogram or any other necessary screening. If you do not have a primary care provider, call the Women Veterans Program Manager at your local VA. All VA medical centers have Women Veterans Program Managers to help women Veterans access VA benefits and health care services. Find the VA medical center nearest you or call 1-877-222-8387. Bipartisan legislation requiring the VA to make multiple improvements to its breast cancer screening and research capabilities passed the Senate on March 23 by a unanimous voice vote and will move to the House for consideration.

The Making Advances in Mammography and Medical Options (MAMMO) for Veterans Act (S. 2533) "provides the lifesaving screening, treatment, and care for veterans diagnosed with breast cancer when the need has never been more urgent given the significantly higher risk of breast population," said MOAA President and CEO Lt. Gen. Dana T. Atkins, USAF (Ret). "We thank the Senate for making the bill a priority. MOAA urges the House to take up the bill and get it passed without delay."

Other veterans advocacy groups joining MOAA in support of the legislation include Veterans of Foreign Wars, Disabled and Paralyzed Veterans of America. The House version of the legislation (H.R. 4794) was introduced in July and has 17 cosponsors.

If enacted, the bill would require the VA to:

- Launch a pilot program providing telemammography to veterans in states where the department doesn't offer mammograms or where access to the tests is limited.
- Upgrade its breast imaging facilities to use digital breast tomosynthesis – better known as 3-D breast imaging – within two
- including the feasibility of studying genetic testing for the breast cancer gene among veterans, access to mammography services for paralyzed and disabled veterans, and an overall report on veterans' access to, and quality of, VA mammography screenings.

Sen. Jon Tester (D-Mont.), chair of the Senate Committee on Veterans' Affairs, led a bipartisan group of sponsors in the Senate, to include Sens. John Boozman (R-Ark.), Susan Collins (R-Maine), and Mazie Hirono (D-Hawaii).

The bill "will improve women veterans" access to breast cancer screening and treatment, lead to earlier detection of cancers, and save more lives," Tester said after its Senate passage. "We've got to keep delivering veterans the tools they need to fight breast cancer, and I encourage my House colleagues to pass this bill without any delay."

Boozman said the bill's improvements, which include a partnership between the VA and the National Cancer Institute, "will help us provide lifesaving prevention and treatment to veterans who are at a higher risk of developing breast cancer. Taking full advantage of the VA's unique capabilities and resources will help veterans get the best care available."

THANK YOU FOR ALL YOUR CONTINUED SUPPORT!

LOCAL PHOTOGRAPHER CREATES LIFESTYLE PORTRAIT PROJECT TO SHOWCASE VETERAN IN THEIR ELEMENTS

Jason Geer, a local photographer, is working on a project to help preserve Veteran history and create a visual archive of veterans and their passions, in hopes to dispel many of the stereotypes associated with being a Veteran.

The Veterans Lifestyle Portrait Project is a project to showcase veterans doing something they are passionate about. It can be a hobby, activity, people, and if passion isn't the right context, it can be something or an activity that brings joy to their life. Jason is looking for 5 more veterans to participate in this project. He already has 20 with a goal of 25 but the deadline for getting portraits completed will be October 9th.

Jason and the Veteran will have a pre-shoot meeting and brainstorm 1-3 different portrait ideas, location, and any props to help tell the story. If the veteran wants, they can have something from their service displayed in the portrait that would help identify which branch they served in, it can be an obvious or a very subtle item that creates a little mystery for the viewer. This is completely optional and up to the veteran.

Other than the Veteran's time, there is no cost for them to participate. Framed prints will be available for purchase after the show. Any items not purchased will be moved to the Veteran's Lounge at MSU-Northern.

The show will be at Crawfords Distillery, formerly the VFW, in Havre on Veterans Day, November 11th, 2022 during their normal business hours.

TIPS FOR COMBAT VETERANS AND MILITARY FAMILIES ON HALLOWEEN... STAY SAFE AND HAVE FUN

October 31, and the days that lead up to Halloween, hold memories from our childhood. We would wear our carefully-planned costumes and walk with our friends and/or parents from house to house, receiving our favorite sweets and some of our not-so-favorite ones as well.

As the night came to an end and all the candy bowls were emptied, we would count and sort our treasure-filled sacks and buckets. With candy surrounding our sprawled bodies on the living room floor, we would begin the inevitable candy trade and safety check, shortly followed by empty wrappers and aching bellies.

Today as parents, we want our children to enjoy Halloween as we did. So, we keep a watchful eye • DIG OUT YOUR HANDY-DANDY REFLECthroughout the night and are sure to check their TIVE PT BELT. candy for impurities, and perhaps skim a few of Who knew those "trendy" issued reflective safeour favorites off the top.

Every year, families walk from house to house repeating the timeless phrase, "Trick or Treat," followed with, "Thank you. Happy Halloween!" But this holiday doesn't always play out the same way for a veteran, combat warrior or caregiver. I admit that Halloween is a difficult time for me personally. The added stresses can feel more like a trick than a treat, especially as a parent.

TIPS TO KEEP THIS HOLIDAY LESS SPOOKY AND MORE FUN.

• LEAVE A BOWL OF CANDY AT THE FRONT DOOR OR END OF THE DRIVE-WAY.

I do not enjoy complete strangers approaching my family's home, and I definitely do not en-

joy them being disguised. To counter this, my family and I simply leave a giant bowl of candy at the end of the driveway while we go house to house.

• PLAN YOUR TRICK-OR-TREATING ROUTE.

Our children enjoy dressing up and strolling around our neighborhood to admire others' costumes and decorated houses, I do not hinder their enjoyment because of my paranoia or discomfort. Rather, I prepare for the evening. I make a plan as to what route we will wall, which houses to avoid and which houses are a must to visit.

ty belts would be so useful! I dig out my reflective gear to illuminate my family in the darkness of night, and be sure to walk with a battle buddy family, who carries like-minded morals and behaviors.

• TALK ABOUT YOUR TRICK-OR-TREAT-ING GAME PLAN AS A FAMILY.

Every Halloween is successful for our family, because we prepare for it. My wife prepares our children with do's and dont's, and helps me prepare for what we are getting ready to do. She will walk with the children to the front doors of homes, so that I may keep an eye from the street and still witness the joy that consumes our children.

• CHECK YOUR CHILDREN'S CANDY AT THE END OF THE EVENING. We always inspect our children's candy. A few

things I look for include open/unwrapped candy, unusual discoloration, torn wrappers, and anything that just doesn't look right. If it doesn't pass inspection, we toss it! We also throw away homemade treats, unless we personally know the family who distributed them.

With some planning and mindful measures, we can all have fun this Halloween. Now be safe, be vigilant, and make some memories.





Instructions:

Suduko puzzles require you to find the missing numbers in a 9x9 grid, with that grid itself divided into 9 square grids of 3x3.

You can't just add any numbers though. There are rules that make solvingo the puzzle challenging.

To solve a Suduko, look for open spaces where its row, colomn and square already have enough other numbers filled in to tell you the correct value. The more squares you fill in, the easier the puzzle is to finish!

A number can only occur once in a row, column, or square.

9	8	1	3	6	5	2	7	4	+
7	6	5	4	8	2	3	1	9	
2	4	3	1	7	9	8	5	Ь	h
1	9	2	6	3	4	7	8	5	П
4	3	7	5	2	8	9	6	1	J
8	5	6	9	1	7	4	3	2	
3	2	4	7	5	6	1	9	8	
5	1	8	2	9	3	6	4	7	
6	7	9	8	4	1	5	2	3	

September's Answers

2	1	9	5	4	3	6	7	8
5	4	3	8	7	6	9	1	2
8	7	6	2	1	9	3	4	5
4	3	2	7	6	5	8	9	1
7	6	5	1	9	8	2	3	4
1	9	8	4	3	2	5	6	7
3	2	1	6	5	4	7	8	9
6	5	4	9	8	7	1	2	3
9	8	7	3	2	1	4	5	6

October's 2022 Suduko Puzzle

Answer in November's Newsletter

2		9				6		
	4		8	7			1	2
8				1	9		4	
	3		7			8		1
	6	5			8		3	
1				3				7
			6	5		7		9
6		4					2	
	8		3		1	4	5	

CHECK CASHING SERVICES

Unload Debit Card, Bill Pay, Buy Bitcoin



DEBIT CARD SERVICES

Cash withdrawal fees: Post 67 Member: \$1 Veterans: \$1.50 Non-Veteran: \$2.50



CHECK CASHING SERVICES

Fees:

Post 67 Member: 1% Veteran: 1.5% Non-Veteran: 2%



BILL PAY SERVICES

Fees **Veteran: FREE** Non-Veteran: \$3.50 Same Day Venders: **Hill County Electric Triangle Communications**

Other venders allow 1-3 days posting time to your account

CHECK CASHING POLICIES

- NO MONEY ORDERS
- ✓ WE CASH CANADIAN **CHECKS UP TO \$500**
- ✓ US GOVERNMENT CHECKS CAN ONLY BE CASHED BY THE INDIVIDUAL TO

CHECK CASHING HOURS:

WHOM THE CHECK IS ISSUED

MON-FRI: 8:30am - 4:00pm

SAT-SUN: CLOSED



"BECAUSE I WANT TO KEEP MY **CULTURE AND TRADITIONS ALIVE"**

ALWAYS BUCKLE UP AND DON'T BE AFRAID TO ASK OTHERS TO DO THE SAME

When you don't buckle up, you endanger more than just your own life. Drivers and passengers often don't consider how unbuckled occupants can be firrewn at high speed. during a crash and can cause serious harm or even death, not only to themselves but to others in the vehicle. That's why it's so important to backle up and ireist others do the same



/ SafeOnAllRoads

NON-PROFITS PROVIDING TRANSPORTATION TO VETS STRUGGLE WITH RISING GAS PRICES

Great Plains Veterans Services Center is a nonprofit that provides safe, and reliable transportation services to all Veterans in seventeen counties across Montana while also offering direct services to all Veterans on the Rocky Boy, Fort Belknap, and Blackfeet Indian Reservations.

With gas prices on the rise everyone is feeling it, especially non-profits. Many with their current years budget in place and struggle to continue providing their services on the current plan. It can be challenging to budget from a non-profit's perspective, because every penny is accountable, the fluctuating fuel costs has been hard to account for.

"It is impacting our ability to serve the way we want to and know is needed. Anxiety comes with knowing all the community members needing assistance and trying to stretch our funds out as far as we can," said Thomas Lewis, GPVSC's Transportation Manager.

On average companies are having to increase the current fuel budget by 50% and in some cases that still isn't enough.

Montana Veterans rely on GPVSC to provide transportation, so fundraising and donations will be crucial to help absorb the rising costs of fuel to ensure their services continue to expand to help Veterans all over Montana.

GPVSC has vehicles that they use to service all 17 counties across Montana, driving both locally and out of state to take Veterans where they need to go.

They provide Veteran outreach, case management, direct assistance, referral services, counseling, DD Form 214 retrieval, employment services and support for any issue that affects the quality of life and mental health of our Veterans.



DIVORCED AFTER RETIREMENT?.. CHANGES TO BEGIN 2023

Recently, Congress has made changes to the Survivor Benefit plan (SBP) to phase out the offset for surviving spouses who are also receiving Dependency and Indemnity Compensation (DIC) from the Department of Veteran Affairs (VA).

On Jan 1, 2023 the SBP-DIC offset will be fully eliminated. That means that the SBP payments will no longer be offset (reduced) by DIC. Spouses will receive full SBP (issued by DFAS) and full DIC (issued from the VA).

So, if you have been divorced since retiring, you need to take a moment to carefully check your Survivor Benefit Plan (SBP) participation status. Under the law, SBP coverage for a spouse ends with a divorce. Coverage from a former spouse does not continue after the divorce unless certain actions are taken.

To continue SBP coverage for a former spouse, either

The Retiree must voluntarily request coverage by continued for the In some instances, Spouse SBP premium deductions were former spouse. (or)

The former spouse must request the coverage (but she/he may do so only if a court order requires coverage). Certain time limits and other conditions apply.

If those actions were not taken, the coverage for the former spouse Line. has ended. This could have important consequences for your

survivors.

To check you SBP coverage status, review your Retiree Account Statement (RAS) carefully. Make sure that the "SBP Coverage Type" properly reflects "former spouse" or "Spouse" (as applicable for your individual circumstances).

If your RAS looks like this, coverage for a former spouse is in place:

SBP COVERAGE TYPE:	FORMER SPOUSE	ANNUITY BASE AMOUNT:	5 263 36
SPOUSE ONLY COST:	1. See attitude a see the section of	SPOUSE DOB:	JUL 18, 1961

If your RAS looks like this, your former spouse is **NOT** being covered by the SBP even if her/his DOB is listed:

SBP COVERAGE TYPE:	SPOUSE ONLY	ANNUITY BASE AMOUNT:	5,263.36
SPOUSE ONLY COST:	342.12	SPOUSE DOB:	JUL 18, 196

In some instances, Spouse SBP premium deductions were continued after a divorce but because required actions were not taken, the former spouse was not properly covered, preventing payment of an SBP Annuity.

More information can be found at www.dfas.mil/SBPforspouse or by calling the Defence Finance and Accounting Customer Service Line.

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October 2022



A representative from the Great Falls Vet Center will be at the office a couple times a month to answer any VA related questions, aid in enrollment, and offer counselling services for eligible Veterans. The representative will also be available to answer questions about benefits and services.

For more information or to schedule and appointment Call Rich or Becky at (406) 452-9048

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Nati	ona	Br	east	Can	cer	1
A	War	ene	SSM	ont		
2	3 All GPVSC	4	5	VET CENTER	7	8
	Offices Closed			10am-3pm	GPVSC Weekly Raffle Drawing	
9	10	VET CENTER 10am-3pm	12	13	14	15
	Columbus Day	American Legion Post 67 Meeting 6pm		U.S. Navy Birthday	GPVSC Weekly Raffle Drawing	
16	17	18 VET	19	20	21	22
		CENTER 10am-3pm			GPVSC Weekly Raffle Drawing	
23	24	VET CENTER 10am-3pm	26	27	28	29
Happy Birthday Marianne		Happy Birthday Harold	Day of the Deployed	Navy Day	GPVSC Weekly Raffle Drawing	
30	31		2	3	4	5
	Halloween					Homemade_

WARRIORS CURRENTLY
SERVING IN THE
ARMED FORCES

<u>ARMY</u>

Royce Bird
Forest Doney
Richard Lujan
Justin Murphy Small
Orion Wolf Chief
Shane Ketchum
Leo Johnson

<u>NAVY</u>

Kristen LaMere Jessica Stump

<u>AIRFORCE</u>

Trey Henderson Maia Henderson

NATIONAL GUARD/ RESERVE

Chauncey Parker
Charles Parker
Dominic Pullin
Jonas Rockett

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ROCKY BOY COMMUNITY SHOWCASE



William Paul Cummins was born on October 29th 1949, at his grandmothers, Little Sun, home in Rocky Boy to Lucille Windy Boy and Richard Walker Cummins Jr.

When he was 17 years old, he enlisted into the military and joined the US Marine Corp on December 19th 1969. Completed basic training in San Diego, Ca MCRD and Advanced Individual Training at Camp Pendleton, CA. Upon completion he was assigned to the 3rd Marin Division as an Infantry Man 0331.

Before being sent to Vietnam he was granted a 13 day leave to go home and say his farewells to friends and family. He reported back, and began the process for being sent overseas. "I was given a lot of shots before being sent over there," said William Paul.

William Paul recalls before making it to Vietnam, they were rerouted through Okinawa and the Philippines for a 20day Survival Training. They arrived in Saigon in full gear and the heat was almost unbearable.

Working out in the brush, as they called "grunts", he was assigned a 50-caliber and a 45-caliber side arm. He and his troops spent 11 months in the brush patrolling from their camp.

"During this time, I was exposed to Agent Orange. We were ambushed from time to time, I have a lot of respect for the Vietcong, they were tough and welldisciplined soldiers," explained William Paul.

While serving, William Paul met up with some local soldiers, including Spud Denny and Tumsey St. Pierre.

William Paul returned home and was discharged as an E-3 on January 19, 1973. Upon discharge, William Paul celebrated his separation of service by a 7 month hiatius. Later, William Paul married and now has 7 grown children.

He began a career in law enforcement with the Tribal Police. He served under Fort. Belknap, Red Lake, Browning, Crow, and Rocky Boy Indian Reservations.

His home became a safe haven for at-risk children, allowing him to provide and cook for them which he really enjoyed.

William Paul reflects, "My military experience influenced my life greatly, I learned a lot and gained a bunch of respect for the US Marine Corp. It prepared and taught me to be independent, adapt, overcome, improvise, and problem solve." In closing William Paul has one final message... "OORAH!"

★ VOTEFOR COUNCIL★ CHARLENE BIG KNIFE

I am from Big Knife Coulee. My father is the late Joe Big Knife. My mother is Roberta Flying Big Knife. Rocky Boy is my home.

I decided to run for Council because I believe I can be an effective leader. I have worked most of my life for the Chippewa Cree Tribe. Most recently in key positions within finance. I am familiar with all the funding sources of the Tribe. I have witnessed many positive changes since 2016 within the Tribal Government and organization.

I want to make a difference for our Reservation. I firmly believe that women can empower our community and each other. I want to ensure that our Elders are not forgotten, and our children have a place to call home for a long time. We must protect our resources. We cannot improve our past, but we can work for our future. We start by making every day count. I will be a voice and be present, if elected. I would appreciate your vote.

Thank you.

Charlene Big Knife

HAYSTACKSTRONG

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OCTOBER 26 MARKS THE NATIONAL DAY OF THE DEPLOYED

This day honors all service members who have been deployed in service of our country. The day also acknowledges the sacrifices that military families make during deployment.

The first National Day of the Deployed was observed in 2006, when North Dakota announced a proclamation for the day, thanks to Shelle Michaeles Aberle, who petitioned Governor John Hoevento with the idea. October 26 was chosen for the date in honor of Shelle's cousin, LTC David Hosna, who had been deployed to Iraq (the day was Hosna's birthday).

By 2012, every state in the US was observing this day. If you're honoring those who have been been deployed, it is recommended to post to social media including the hashtag

#DayOfTheDeployed.

If you're looking to support service members on this day of recognition, check with local veterans service organizations, or, if you live near a military base, contact the base's Family Resource Center. For more tips, see Military.com's Easy Ways to Support Our Troops and Their Families.

If you are a deploying service member or military family member, visit Military.com's Deployment Center for additional resources and guides to aid you before, during and after deployment. You can also visit MilitaryOneSource's Deployment Resources for Families page.



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