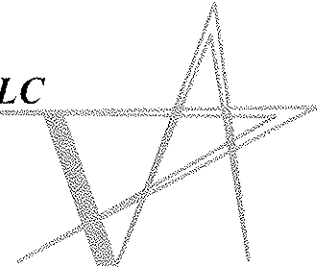


**COMMONWEALTH ENVIRONMENTAL SERVICES, LLC**

"A Native American - Woman Owned Company"



## Fax Cover Sheet

To: Senator Rand Paul,  
Senator Mitch McConnell  
Congressman Ed Whitfield

From: Gary S. Vander Boegh

Fax: (202) 228-6917  
(202) 224-2499  
(202) 225-3547

Date: 3/7/11

Phone: (270) 450- 0850

Pages: \_\_\_\_\_ Pages including the Cover Sheet

Re: William W. Walker  
File: xxx-xx-1060

CC:

Urgent     For Review     Please Comment     Please Reply     Please Recycle

**Please see attached release and information.**

**Please contact me on my cell at (270) 559-1752 if you have any questions.**

**Thanks,**

**Gary**

PRIVACY RELEASE FORM

3/7/11  
date

PLEASE RETURN THIS FORM TO:

~~Senator Mitch McConnell  
601 West Broadway, Room 630  
Louisville, Kentucky 40202  
Fax 502-582-5326~~

Senator Rand Paul

TO WHOM IT MAY CONCERN: Fax# (202) 228-6917

I am aware that the Privacy Act of 1974 prohibits the release of information in my file without my approval.

I authorize the Department of Labor  
name of Federal agency or department

to provide information on my claim/case to Senator McConnell or his staff representative designated by him.

This authorization is good until such time as a final decision is made on my case and there is no further administrative appeal available to me.

x William W Walker  
signature

145 Stongate Dr.  
Paducah, KY 42003  
address

(270) 534-5980  
telephone number

380-46-1060  
social security number

380-46-1060  
claim number (if any)

10-9-44  
date of birth

If you wish information provided to parent, child, attorney, or other interested party, please indicate below.

I authorize Gary S. Vander Boegh  
to receive information from ~~Senator McConnell~~ or his staff representative designated by him relative to my claim/case. Senator Paul

Signature, William W Walker

PRIVACY RELEASE FORM

3/7/11  
date

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Senator Mitch McConnell  
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Louisville, Kentucky 40202  
Fax 502-582-5326 D.C. fax: 202-224-2499

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Signature William W. Walker

### PRIVACY ACT FORM FOR CONGRESSMAN ED WHITFIELD

Please Print

Date 3/7/11 County McCracken

Name William Walker

Mailing Address 145 Stonegate Dr.

City Paducah State KY ZipCode 42003

Telephone Number 270-534-5980 Date of Birth 10-9-44

Social Security # 380-46-1060 Provide if used as identifying number for your claim

Other contact and/or Spouse's Name Dorothy Walker

VA Claim # \_\_\_\_\_ (this only applies to veterans with claims to the Department of Veterans Administration)

Please provide a brief description of your problem and specify how our office may be of assistance. Continue on back if necessary or use a second sheet of paper.

I have met 3 of the 5 criteria that establishes my compliance with the Chronic Beryllium Disease Statutes. However, the Department of Labor is withholding my medical benefits and compensation. In my opinion, the Department of Labor is waiting on my passing.

#### PRIVACY ACT RELEASE

I hereby authorize Congressman Ed Whitfield and those acting in his behalf, in order to help be of assistance to me, to obtain in accordance with applicable laws and regulations information pertaining specifically to this matter.

SIGN HERE: X William Woodrow Walker DATE 3/7/11

Please mail to: **Congressman Ed Whitfield**  
1403 South Main Street  
Hopkinsville, KY 42240  
Fax Number: 270-885-8598  
D.C. fax: 202-275-3547

## Amanda Stevens

---

**From:** Gary Vander Boegh  
**Sent:** Monday, March 07, 2011 10:41 AM  
**To:** Amanda Stevens (astevens@commonwealthenvironmentalservices.com); Candace Vander Boegh (candace@falconitedevelopment.com)  
**Subject:** RE: ces 0025 william walker

**From:** Gary Vander Boegh  
**Sent:** Monday, February 28, 2011 5:05 PM  
**To:** 'Bibeault, James - OWCP'; 'Lauren Adams'; Rachel Leiton (Leiton.Rachel@dol.gov); Hilda Solis (solis.hilda@dol.gov.); Jean Gross (paducah.center@rrhio.com); John Vance (vance.john@dol.gov)  
**Cc:** 'Scott\_Raab@mccconnell.senate.gov'; Patrick Foster@mccconnell.senate.gov; Ed Whitfield (john.sparkman@mail.house.gov); James Bruggers (jbruggers@louisvil.gannett.com); Mike Nartker (nartker@exchangemonitor.com); Terrie Barrie (tbarrie@yahoo.com); 'teresaromaine@yahoo.com'; Denise Brock (ocas@cdc.gov); dbnesq1@aol.com; Donna Hand (ctdhkk@aol.com); Antoinette Bonsignore (antoinettebonsignore@hotmail.com)  
**Subject:** FW: ces 0025 william walker  
**Importance:** High

Mr. Bibeault

Attached please find the medical evidence provided by Mrs. Walker. Again, as was recently found with CES LLC claimants Fannie Veits and Billy Joe Dennis, your DOL claims examiners initially deny claimants based on DOL EEOICPA bulletins and procedures that have been adopted to ensure CBD claims receive denials, after claimants have met the statutory requirements of the Energy Employee Occupational Illness Program Act! The use of more stringent bulletins and procedures to deny nuclear workers their legal entitlements is illegal, as I understand the law. Your denial of Mr. Walker CBD claim is unacceptable, especially since he is considered "Terminal per his medical records. You and Ms. Leiton have promoted a lack of training at the lower levels of your claim processing that ensures the claimant is not allowed to present his evidence in support of a claim for benefits and compensation. I list a few of examples of how your protocol has established an unfavorable atmosphere of claims denials. They are as follows:

To establish pre-I 993 CBD, the medical documentation must include at least three (3) of the following:

- characteristic chest radiographic (or computed tomography (CT)) abnormalities; **STATUTORY COMPLIANCE/CRITERIA MET**

NAME: Walker, William W.  
CHART: 7630068-07  
DOCTOR: T. Davies  
ROOM: 364-1

X-RAY REPORT

ADMITTING PROBLEM/HISTORY:  
headache, vomiting and syncope, COPD, upper

DATE:  
3/29/91

PA AND LATERAL CHEST:

~~Lung fields do appear to be hyperaerated  
pulmonary disease. There are no acute infiltrates in  
mediastinum are unremarkable.~~

IMPRESSION:

Hyperaeration consistent with COPD. No acute infiltrates seen.

- lung pathology consistent with CBD;

- a clinical course consistent with a chronic respiratory disorder; STATUTORY COMPLIANCE/ CRITERIA MET

or,

- immunologic tests showing beryllium sensitivity (e.g., skin patch test or beryllium blood test preferred).

**Excerpt of DOL CBD Denial attached**

“Based on a review of the medical evidence, the employee, and/or authorized representative, has only established 2 of the 5 criteria under the pre-I 993 Part B requirements. Specifically, the criteria met are:

1. A restrictive or obstructive lung physiology testing or diffusing lung capacity defect by evidence of severe obstructive restriction on the June 30, 2010 pulmonary function test; and,

2. A clinical course consistent with a chronic respiratory disorder by evidence of the use of oxygen supplies hypoxemia and a diagnosis of COPD6”

**The DOL Jacksonville Claims Examiner is inappropriately attempted to deny Mr. Walker’s claim as a result of the Department of Labor’s EEOICPA Director’s abuse of authority and dislike for CES, LLC representation of PGDP sick nuclear workers.**

**“END STAGE TERMINAL STATUS” HAS BEEN MET AND 3 OF 5 STATUTORY CRITERIA HAVE BEEN MET, THEREFORE MR. WALKER REQUESTS IMMEDIATE “REVERSAL OF HIS PART B AND E CLAIM DENIAL” THAT INCLUDES COMPENSATION AND MEDICAL BENEFITS THAT WILL AFFORD HIM A DOUBLE LUNG TRANSPLANT, PRIOR TO HIS CONDITION WORSENING! MADAM SOLIS - THIS REQUEST FOR REVERSAL IS MADE TO YOU PERSONALLY!**

**Gary S. Vander Boegh  
Vice President  
Commonwealth Environmental Services, LLC**

DOL “CE”

“To establish pre-I 993 CBD, the medical documentation must include at least three (3) of the following:

- characteristic chest radiographic (or computed tomography (CT)) abnormalities;
- restrictive or obstructive lung physiology testing or diffusing lung capacity defect;
- lung pathology consistent with CBD;
- a clinical course consistent with a chronic respiratory disorder; or,

- immunologic tests showing beryllium sensitivity (e.g., skin patch test or beryllium blood test preferred).”

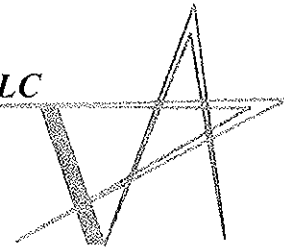


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\*\*\* FAX MULTI TX REPORT \*\*\*  
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912022253547  
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Phone: (270) 450- 0850	Pages: _____ Pages including the Cover Sheet
Re: William W. Walker File: xxx-xx-1060	CC:

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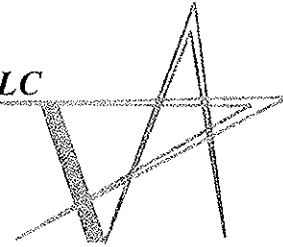
Gary

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\*\*\* TX REPORT \*\*\*  
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DEPT. ID 151  
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PGS. 8  
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