



# Department of Veterans Affairs

## REPORT OF CONTACT

(NOTE: This form must be filled out in ink or on typewriter, as it becomes a permanent record in veterans' folders.)

VA OFFICE

VFW

IDENTIFICATION NOS., (C, XC, SS, XSS, V, K, etc.)

[REDACTED]

LAST NAME - FIRST NAME - MIDDLE NAME OF VETERAN (Type or print)

Thundahil, Christina

DATE OF CONTACT

03-17-09

ADDRESS OF VETERAN

[REDACTED]

TELEPHONE NO. OF VETERAN (Include Area Code)

Home: [REDACTED]

Work:

PERSON CONTACTED

same

TYPE OF CONTACT (Check)

PERSONAL

TELEPHONE

ADDRESS OF PERSON CONTACTED

TELEPHONE NO. OF PERSON CONTACTED (Include Area Code)

BRIEF STATEMENT OF INFORMATION REQUESTED AND GIVEN

This is a letter in support of a claim filed for Christina Clark Thundathil, claim # [REDACTED]. I work in VFW Service office and I have spoken with Christina on several occasions.

The attached information shows this event happened in service. She lost her rank and was released on a General Discharge because she filed charges. After the hearing there was insufficient evidence to prove rape.

If you read the investigatative report by the chief of Mental health services she belived Pvt. Clark (Thundathil) exhibited common symptoms of someone who had been raped.

To this day she has problems maintaning a social relationship with people. It bothers her when people ask why she got out the service she doesn't know the proper answer.

Talking to her I believe she will always have psychological problems from this event. Please help to expedite this claim in a correct manner.

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DIVISION OR SECTION

VFW

EXECUTED BY (Signature and title)

[REDACTED]

Claims Consultant