

IN THE UNITED STATES COURT OF APPEALS
FOR VETERANS CLAIMS

WAYNE HUNT,

Appellant,

v.

DENIS MCDONOUGH,
Secretary of Veterans Affairs,

Appellee.

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Vet. App. No. 21-1289

**APPELLANT’S UNOPPOSED MOTION FOR A 45-DAY EXTENSION OF TIME,
UNTIL AUGUST 21, 2023**

Pursuant to U.S. Vet. App. Rules 26 and 45(g), the undersigned counsel respectfully requests a 45-day extension of time.

Appellant Wayne Hunt passed away on October 24, 2022. Undersigned counsel learned of Appellants death on or around April 21, 2023. At the time undersigned counsel learned of Appellant’s death, settlement conversations were ongoing with Appellee’s counsel to grant Appellant veteran status. Undersigned counsel requested and received a copy of Appellant’s death certificate. (Exhibit A.) The death certificate provided the name of Appellant’s next-of-kin – Margaret Taylor. Undersigned counsel then requested a 45-day extension of time to contact Ms. Taylor. Within the allotted time, undersigned counsel spoke with Ms. Taylor, who is over the age of 18 and, despite her efforts, did not bear the last costs and expenses; therefore, she is not an eligible accrued-benefits claimant.

Additional time is needed for research and preparation of all possible arguments, including the potential of a posthumous award of veteran status. Because Appellant's next-of-kin is not an eligible accrued-benefits claimant, there are no monetary benefits at issue that would be negatively impacted by the extension. Therefore, undersigned counsel respectfully requests an additional 45-day extension to respond comprehensively to and resolve all matters in the Court's May 4, 2023 Order.

Since the Court's October 4, 2022 Per Curiam Order requesting substitute briefing, the undersigned counsel has received 45 days extension time. Appellee has received 45 days extension time. Prior to the Court's October 4, 2022 Per Curiam Order, Appellant's prior counsel received 30 days of extension time and Appellee received 45 days of extension time.

Appellee's counsel has indicated they are unopposed to this motion.

WHEREFORE, the undersigned counsel respectfully moves the Court for a 45-day extension of time, from July 7, 2023 to August 21, 2023.

Respectfully submitted,

/s/ Ashlyn M. Anderson-Keelin
ASHLYN M. ANDERSON-KEELIN
Supervising Attorney
The Bob Parsons Veterans Advocacy Clinic
University of Baltimore School of Law
1420 N. Charles St.
Baltimore, MD 21201
(410) 837-6723

Exhibit A:
Wayne Hunt's Death Certificate

CERTIFICATE OF VITAL RECORD

VERIFY PRESENCE OF WATERMARK

HOLD TO LIGHT TO VIEW

The Commonwealth of Massachusetts

1288373



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Commonwealth of Massachusetts
Registry of Vital Records and Statistics
CERTIFICATE OF DEATH

106/184

State File # **2022 052521**
Registered # **6896**

07012019

DECEDENT	Place of Death 17 COURT STREET, BOSTON, MA	
	Date of Death OCTOBER 24, 2022	Age 76 YRS Sex MALE
	Current Name HUNT, WAYNE ROBERT	
	Surname at Birth or Adoption HUNT	SSN [REDACTED] 6784
	AKA —	
	Date of Birth [REDACTED] 1946	Birthplace ALBANY, NEW YORK
	Residence 17 COURT STREET, BOSTON, MASSACHUSETTS 02108	
	Race WHITE	Education 9TH - 12TH GRADE, NO DIPLOMA
	Marital Status NEVER MARRIED	Occupation/Industry TRUCK DRIVER/COMMERCIAL DRIVER
	Last Spouse — Last, First, Middle (Surname at Birth or Adoption) —	
Decedent: U.S. Veteran (Most Recent) —		
Parent Name — Last, First Middle (Surname at Birth or Adoption) UNKNOWN		
Birthplace UNKNOWN		
Parent Name — Last, First Middle (Surname at Birth or Adoption) UNKNOWN		
Birthplace UNKNOWN		
MEDICAL CERTIFIER	Part I. Cause of Death — Sequentially list immediate cause then antecedent causes then underlying cause	
	a. Immediate Cause (Final condition resulting in death) PARSONAGE - TURNER SYNDROME	
	b. Due to or as a consequence of: — YRS.	
	c. Due to or as a consequence of: —	
	d. Due to or as a consequence of: —	
	Part II. Other significant conditions contributing to death but not resulting in underlying cause —	
	Manner of Death: NATURAL	
	Time of Death: 11:23 AM	
	Result of Injury: NO	
	Certifier MARGARET SEATER, DO Lic # 249322	
Addr. 251 CAUSEWAY STREET, BOSTON, MASSACHUSETTS 02114		
DISPOSITION	Funeral Licensee/ Designee WILLIAM F SPENCER, JR Lic # 5995	
	Facility Addr. WM. F. SPENCER FUNERAL SERVICE, BOSTON, MASSACHUSETTS	
	Immediate Disposition BURIAL	
	Date of Immediate Disposition NOVEMBER 03, 2022	
	Place/Address MASSACHUSETTS NATIONAL CEMETERY, CONNERY AVENUE, BOURNE, MASSACHUSETTS 02532	
	Date of Record NOVEMBER 02, 2022	 REGISTRAR, CITY OF BOSTON
Date of Amendment —		

DATE ISSUED: **APRIL 20, 2023**

I, the undersigned, hereby certify that I am the Registrar of the City of Boston; that as such I have custody of the records of birth, marriage, and death required by law to be kept in my office; and I do hereby certify that the above is a true copy from said records, as held in the Commonwealth's central vital records information repository.

Patricia McMahon

Registrar
City of Boston

VOID WITHOUT WATERMARK OR IF ALTERED OR ERASED

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HUNT

SFN: 2022 052521

BOSTON 6896

BOSTON

STATE VOL/PG: 106/184 OPEN

<i>If U.S. war veteran, specify war/conflict(s)</i> —			
<i>Branch of military (most recent)</i> —		<i>Rank/organization/outfit(most recent)</i> —	
<i>Date entered(most recent)</i> —		<i>Date Discharged (most recent)</i> —	
		<i>Service Number(most recent)</i> —	
<i>Place of Death Type</i> DECEDENT'S RESIDENCE		<i>Date of Pronouncement</i> —	
		<i>Time of Pronouncement</i> —	
<i>RN/PA Pronouncement?</i> NO		<i>Name of RN/PA Pronouncing Death</i> —	
		<i>Lic #</i> —	
<i>RN/PA Employing Agency or Institution</i> —		<i>Name of Physician or Medical Examiner notified</i> —	
<i>Was M.E. Notified?</i> YES		<i>Provider in charge of patient's care, if not certifier</i> —	
<i>Autopsy Performed?</i> NO		<i>Findings available for Cause?</i> —	
		<i>Tobacco contribute to death?</i> UNKNOWN	
		<i>Pregnancy Status, if female</i> —	
<i>Date of Injury</i> —		<i>Time of Injury</i> —	
		<i>Injury at Work?</i> —	
		<i>If Transportation Injury, specify:</i> —	
<i>Place of Injury</i> —		<i>Location/Address of Injury:</i> —	
<i>Describe How Injury Occurred</i> —			
<i>Expanded Race:</i> WHITE			
<i>Ethnicity:</i> AMERICAN			
<i>Informant Name</i> MARGARET — TAYLOR		<i>Relationship</i> DAUGHTER	
<i>Addr:</i> 13 FALLON APARTMENTS, APT. # 13, TROY, NEW YORK 12180			
<i>Date Disposition Permit Issued:</i> NOVEMBER 02, 2022		<i>Board of Health Agent</i> PAUL SHOEMAKER	
<i>State Tracking No.</i> 052521		<i>Local Permit No.</i> B22052521	

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DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARK.

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