Sheltering Operations

















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'NIGHTMARE'



David Keifer, leads his sister and son through flooded streets in New Orleans today.

Rescuers, residents struggle

Katrina death toll estimated to be at least 120

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- Superdome refugees moving to Astrodome
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Family faces uncertain future (2:23)



A survivor's story (3:25)



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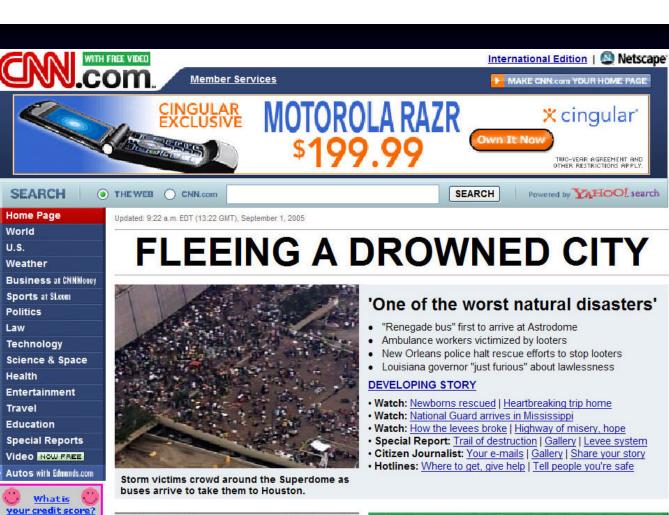
Markets: 1:34 p.m. ET, Aug 31

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ON CNN TV

Continuing coverage

Areas declared disaster zones in the aftermath of Katrina



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Neonatal evacuations (2:21)



Katrina's military challenge



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American Morning

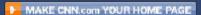
Feds fan out in storm recovery efforts as the desperation





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HEALTH

Hospitals struggle in Katrina flooding

Wednesday, August 31, 2005; Posted: 12:20 p.m. EDT (16:20 GMT)

NEW ORLEANS, Louisiana (AP) --As floodwaters rose around Charity Hospital in New Orleans, the rescuers needed their own rescuing.

Charity's backup generator was running out of diesel fuel. Nurses hand-pumped ventilators for patients who could not breathe. Doctors canoed supplies in from three nearby hospitals.

"It's like being in a Third World country. We're trying to work without power. Everyone knows we're all in this together. We're just trying to stay alive." said Mitch Handrich, a registered nurse manager at the hospital -- Louisiana's biggest. (See video of what the city faces with dwindling food and growing contamination -- 2:18)

Hospitals across the city faced deteriorating conditions Tuesday after two levees broke. sending water coursing through the streets of the Big Easy. An estimated 80 percent of the below-sea-level city was under water, up to 20 feet (6 meters) deep in places, with miles (kilometers) and miles (kilometers) of



A Tulane nurse carries a pediatric patient from an evacuation helicopter in Alexandria, Louisiana on Tuesday.

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POLITICS

FEMA goes into disaster mode for Katrina

Bush readies federal government for relief effort

Monday, August 29, 2005; Posted: 1:42 p.m. EDT (17:42 GMT)

WASHINGTON (AP) -- The Federal Emergency Management Agency went into disaster mode as it and other federal agencies prepared to deal with the aftermath of Hurricane Katrina.

"I want the folks there on our Gulf Coast to know that the federal government is prepared to help you when the storm passes," President Bush said during a Medicare speech in El Mirage, Arizona. "In the meantime America will pray, pray for the health and the safety of all our citizens.

"Our Gulf Coast is getting hit and hit hard,"
Bush said. "I urge the citizens there in the
region to continue to listen to the local
authorities. Don't abandon your shelters until
you're given clearance by the local
authorities. Take precautions because this is
a dangerous storm."



Hurricane specialist Stacy Stewart conducts a coordinating conference call from the National Hurricane Center Monday.

Image:

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We heard that the Buses were Coming

The Thursday after the Storm:

We were told to expect as many as 25,000 evacuees and hundreds of buses within 24 hours













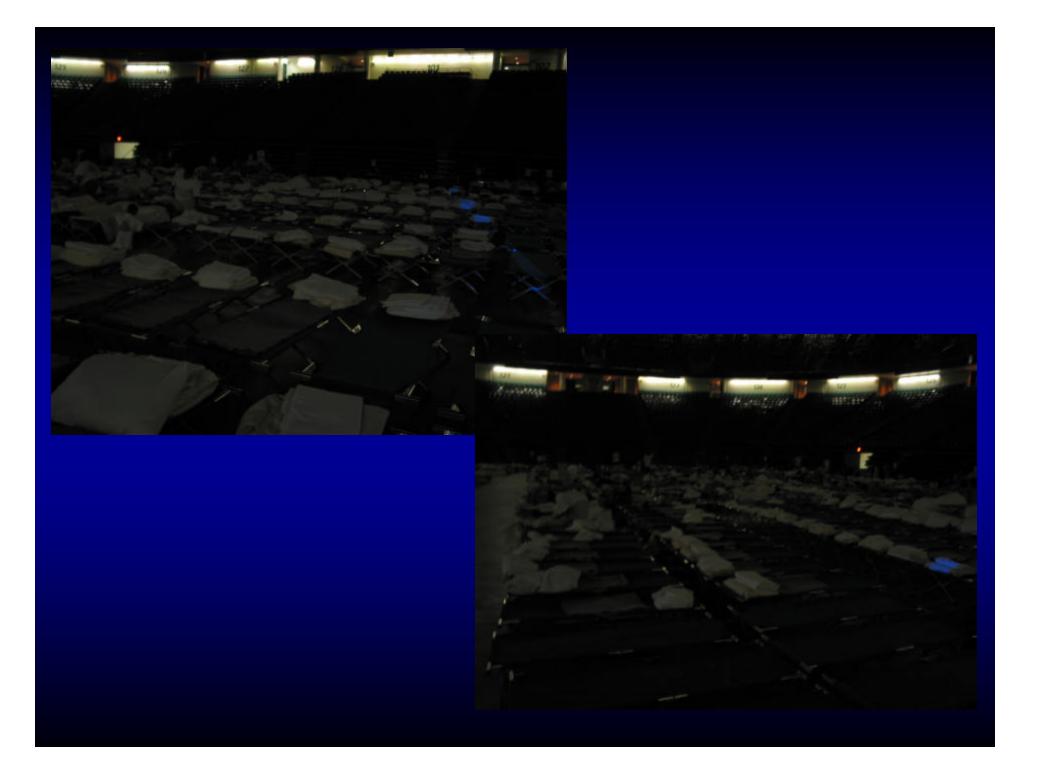




Dallas Evacuee Clinics for Hurricane Katrina

Operated initially at Reunion Arena only

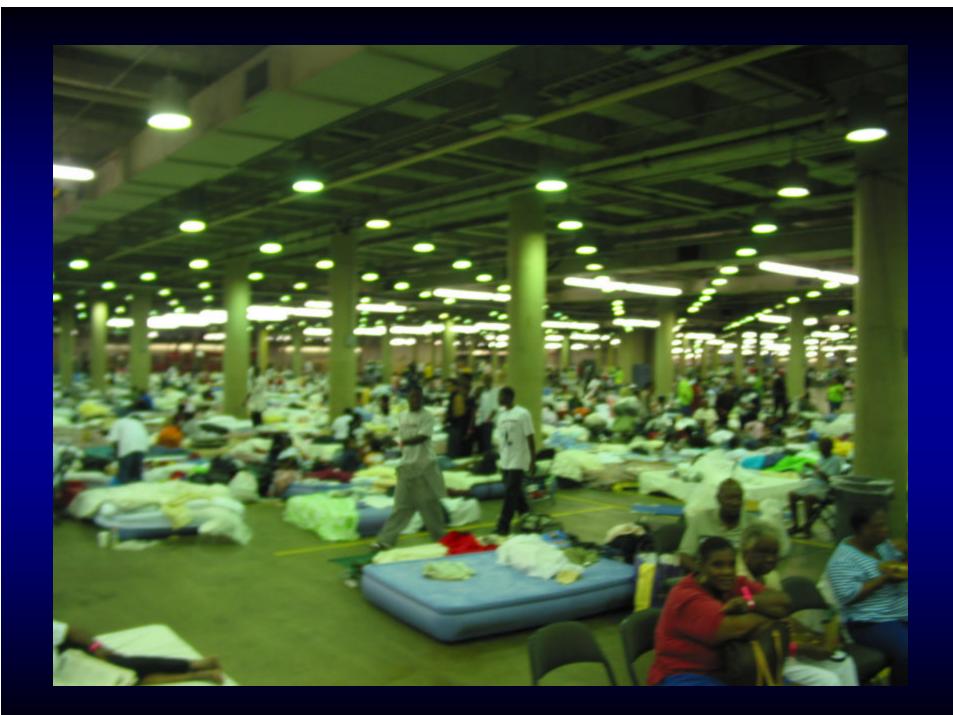
Day 5 we opened the Dallas Convention Center Medical Command Center











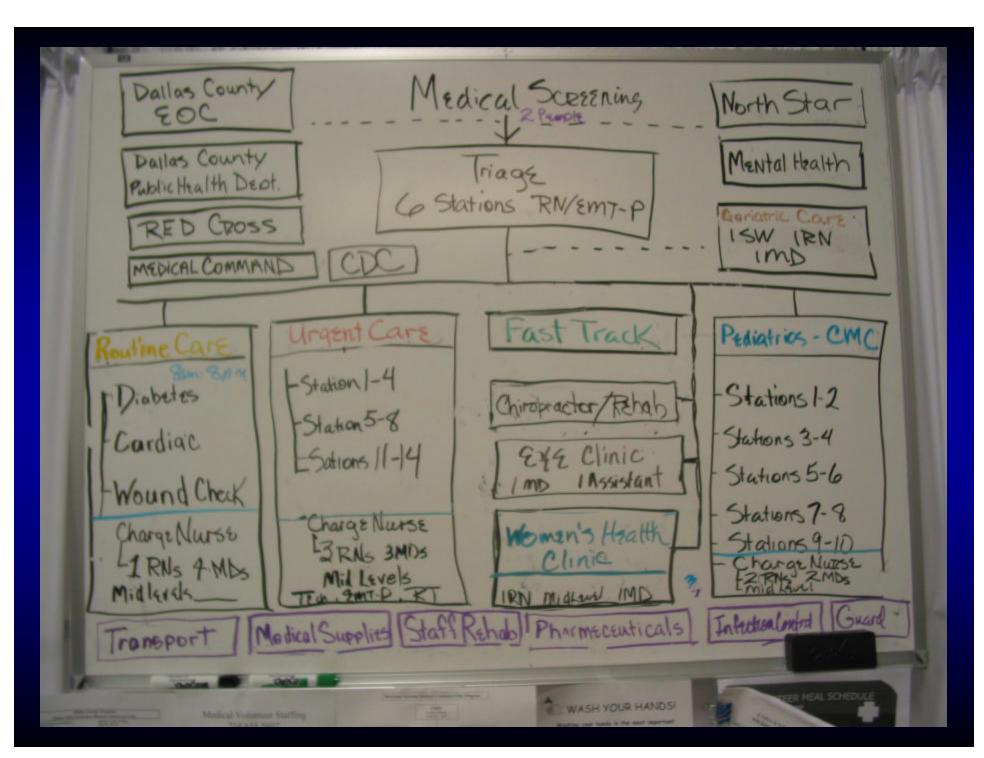
Within 24 hours

The Medical Team:

Designed the Medical Center at DCC
Arranged for Curtains, Cots, Supplies
Established the Medical Coverage
Got it started as the buses rolled in

The Convention Center CMO

25 Bed Facility **Urgent Care Routine Care Isolation** Mental Health OB/Gyn **Optometry / Dental** Volunteer Rehab

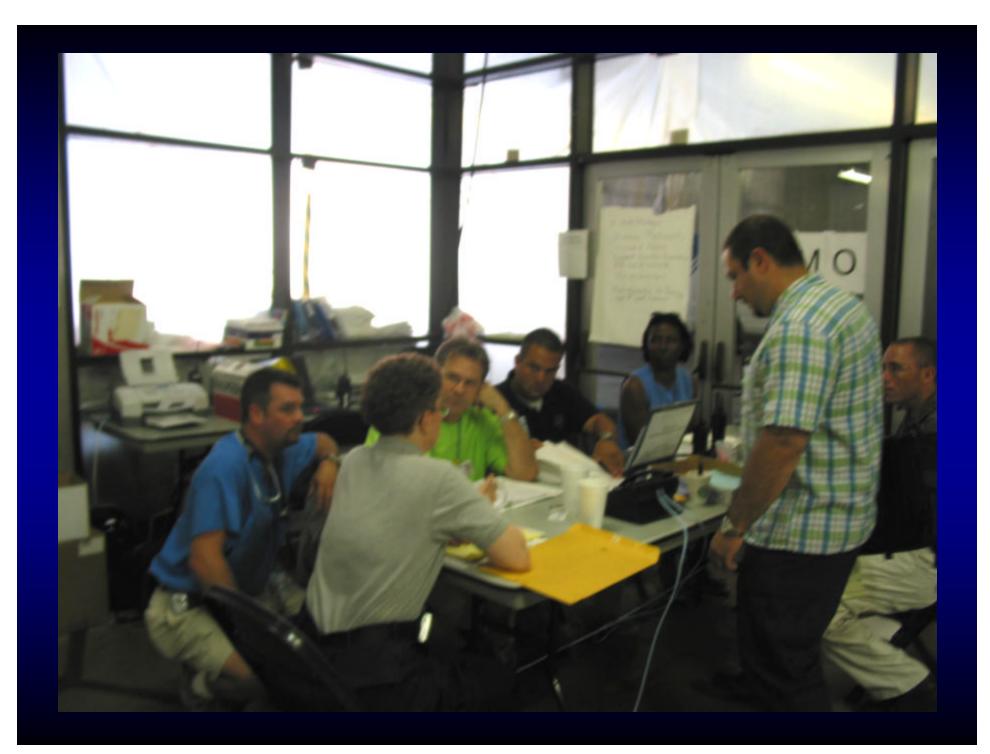


The Core Partnership "sprung up"

Public Health
Emergency Operations
UTSW EMS Section
PD
EMS, Fire and Public
Fire







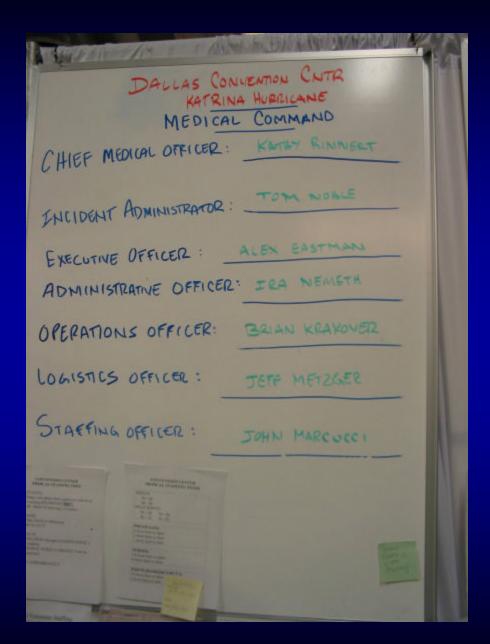
The Convention Center CMO

IC Organizational Structure Communication to Agencies through IC **Managed Mass Sheltering** Manage Medical Surge Limited transports to hospitals



Staffing Estimates at Maximum Function

12 Physicians 24/7
= 12 nurses
Support Staff
2 Pharmacy Techs
Volunteer Rehabilitation









Within 24 hours

The Medical Team:

First Buses at 5 p.m.
From then to Midnight we saw

116 patients



The Deluge

The Medical Team:

The Next Day: Over 1100 Patients

Dallas Evacuee Clinics for Hurricane Katrina

Stand Alone Medical Facility at the DCC

Mobile HOMES Vans from Parkland at Reunion

Dallas Fire Rescue EMS at Both









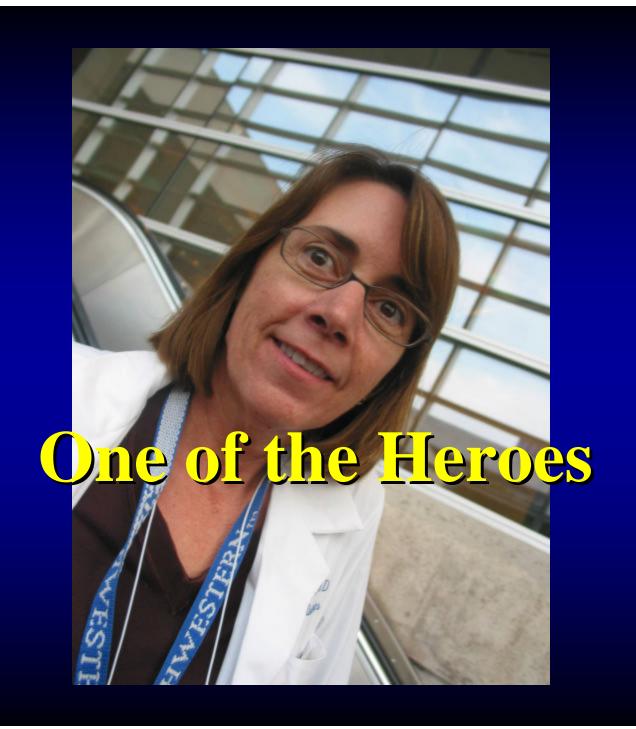
















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Region	County	ld Facility	Facility Name	Program Desc	Licensed Bed Capacity	Current Census	Beds Filled with Hurricane Transfers	Beds Currently Available for Occupancy
03	JOHNSON		ALVARADO MEADOWS REHABILITATION CENTER	NURSING	119	79	0	4
03	COLLIN		AMBERWOOD CARE CENTER	NURSING	88	30	0	0
03	TARRANT		ARBROOK PLAZA	NURSING	120	107	0	6
03	TARRANT		ARLINGTON HEIGHTS HEALTH AND REHABILITATION CENTER	NURSING	180	132	3	0
03	TARRANT		ARLINGTON VILLA RETIREMENT COMMUNITY	NURSING	148	134	2	10
03	DALLAS		ASHFORD HALL	NURSING	330	201	3	15
03	DALLAS	100219	ASHLEY COURT AT TURTLE CREEK	NURSING	24	21	0	3
03	WISE	004054	AUGUST HEALTHCARE BRIDGEPORT	NURSING	94	55	0	11
03	DALLAS		AUTUMN LEAVES NURSING CENTER	NURSING	98	57	1	5
03	TARRANT	004984	AZLE MANOR INC	NURSING	125	112	0	10
03	DALLAS	005105	BALCH SPRINGS NURSING HOME	NURSING	120	100	0	1
03	TARRANT	004606	BENBROOK NURSING & REHABILITATION CENTER	NURSING	115	112	1	3
03	TARRANT	005106	BISHOP DAVIES NURSING CENTER	NURSING	163	148	0	10
03	FANNIN	005043	BONHAM NURSING AND REHABILITATION LP	NURSING	65	39	0	15
03	GRAYSON	004344	BRENTWOOD PLACE	NURSING	52	50	0	1
03	DALLAS		BRENTWOOD PLACE ONE	NURSING	120	111	4	9
03	DALLAS		BRENTWOOD PLACE THREE	NURSING	120	103	0	10
03	DALLAS		BRENTWOOD PLACE TWO	NURSING	120	111	0	2
03	HUNT		BRIARCLIFF HEALTH CENTER OF GREENVILLE INC	NURSING	90	80	0	0
03	TARRANT		BROADWAY PLAZA HEALTHCARE CENTER	NURSING	122	118	2	4
03	DENTON		BROOKHAVEN NURSING CENTER	NURSING	180	163	2	8
03	DALLAS		C C YOUNG MEMORIAL HOME	NURSING	236	165	6	10
03	ERATH	005085	CANTERBURY VILLA OF STEPHENVILLE	NURSING	86	35	0	0
03	DENTON		CARE INN OF SANGER	NURSING	67	60	2	0
03	DALLAS	004968	CASTLE MANOR	NURSING	94	81	2	5
03	DALLAS		CEDAR HILL HEALTHCARE CENTER	NURSING	120	95	1	6
03	SOMERVELL		CHEROKEE ROSE NURSING AND REHABILITATION LP	NURSING	102	61	0	8
03	DALLAS		CHRISTIAN CARE CENTER	NURSING	180	176	2	1
03	ELLIS		CLAYSTONE HEALTHCARE CENTER	NURSING	112	112	0	0
03	TARRANT		CLC RICHLAND HILLS	NURSING	120	89	0	14
03	TARRANT		CLC WOODRIDGE	NURSING	126	114	0	12
03	JOHNSON	_	CLEBURNE REHABILITATION AND HEALTH CARE CENTER	NURSING	120	88	0	7
03	FANNIN		CLYDE W COSPER TEXAS STATE VETERANS HOME	NURSING	160	152	0	2
03	GRAYSON		COLLINSVILLE CARE CENTER	NURSING	88	42	0	15
03	JOHNSON		COLONIAL MANOR NURSING CENTER	NURSING	150	128	0	0
03	DALLAS		COMMUNITY CARE CENTER OF GARLAND	NURSING	210	130	0	0
03	ERATH		COMMUNITY NURSING AND REHABILITATION CENTER	NURSING	103	62	0	24
03	DENTON		COTTONWOOD NURSING AND REHABILITATION LP	NURSING	60	55	0	5
03	KAUFMAN		COUNTRY VIEW NURSING AND REHABILITATION LP	NURSING	115	115	0	0
03	DENTON		COUNTRYSIDE NURSING AND REHABILITATION LP	NURSING	120	61	0	30
03	DENTON		CROSS TIMBERS REHABILITATION AND HEALTHCARE CENTER	NURSING	120	105	1	1
03	DALLAS		DALLAS HOME FOR JEWISH AGED INC	NURSING	264	207	0	2
03	TARRANT		DALWORTH NURSING & REHABILITATION CENTER	NURSING	118	105	6	0
03	WISE		DECATUR NURSING AND REHABILITATION LP	NURSING	60	54	0	3
03	GRAYSON		DENISON NURSING AND REHABILITATION LP	NURSING	71	45	0	0
03	DENTON		DENTON GOOD SAMARITAN VILLAGE	NURSING	91	59	0	0

03	DALLAS	005373	WILLIAMSBURG VILLAGE HEALTHCARE CAMPUS	NURSING	245	228	3	10
03	DALLAS	004532	WILLOWBEND NURSING AND REHABILITATION LP	NURSING	162	75	0	21
03	GRAYSON	009014	WILSON N JONES MEDICAL CENTER NORTH CAMPUS	NURSING	44	18	1	13
03	KAUFMAN	004183	WINDSOR CARE CENTER	NURSING	108	103	0	0
03	DALLAS	004098	WINDSOR PLACE	NURSING	111	102	1	3
03	DALLAS	102085	WINTERS PARK NURSING AND REHABILITATION CENTER	NURSING	132	117	0	5
							461	1816
		·						

	Hurricane Transfers	Vacant & Available Beds
Region 1	38	1,093
Region 2	28	1,183
Region 3	461	1,816
Region 4	473	561
Region 5	62	796
Region 6	311	1,229
Region 7	425	1,270
Region 8	174	450
Region 9	7	539
Region 10	10	199
Region 11	41	984
Statewide Total	2,030	10,120

NOTE: Information for Regions 5 and 6 are not updated due to staff unavailability in the coastal region offices.

Number of schools with Katrina students and total student enrolled:

Date	# of High	# of	# of	Total # of schools	Total
	Schools	Middle	Elementary	carrying students	Students
		Schools	Schools		enrolled
09/9	22	18	92	132	958
09/12	22	19	93	134	1,248
09/13					
09/14	23	23	106	162	1,615
09/15	23	24	109	167	1,699
09/16	23	24	112	159	1,755
09/19	22	24	114	160	1,845
09/20					
09/21	23	24	113	160	1,998
09/22	25	23	113	159	2,052
09/23	25	23	115	161	2,093



City of Dallas Emergency Management EOC Situation Report # 24 September 23, 2005 From 2000-0800 Hurricane "Katrina"

This is the last Situation Report for Hurricane Katrina.

FEDERAL:

Comprehensive Transitional Housing Assistance Program:

On 9/21/05, the Federal Government announced a comprehensive housing assistance program. To meet the immediate needs of individuals and families displaced by Hurricane Katrina, the Department of Homeland Security and Housing & Urban Development announced measures to provide transitional housing assistants to evacuees. The Federal government is taking action to cut through red tape and bureaucracy and provide evacuees with flexibility, choice, and portability, so they can move from temporary shelters to move stable housing.

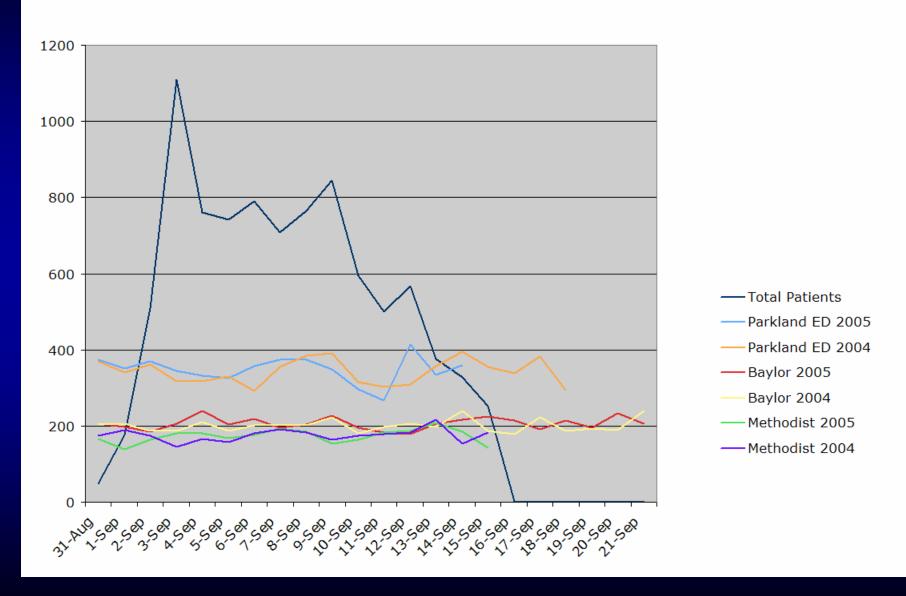
Total Patients Seen 09/03/05 to 09/15/05

Date	Evaluated	Chronic	Acute	Mobile	Mental Health	OB/ Gyn	Pedi.	Total patients visits
09/03	617							
09/04	449			12				1169
09/05	?	321	152	188	76			737
09/06	508					48	90	3,820
09/07	720	122	312	142				
09/08	554	99	289	?	38	10	118	4,454
09/09	674	117	289	181	0	0	87	5,279
09/10	488	140	234	?	0	22	92	5,767
09/11	394	127	181	?	?	14	72	6,096
09/12	450	97	135	65	?	12	57	7,069
09/13	499	37	229	165	24	?	44	7,707
09/14	338	22	161	133	0	0	22	8,045
09/15	288	25	100	122	0	1	40	8,356

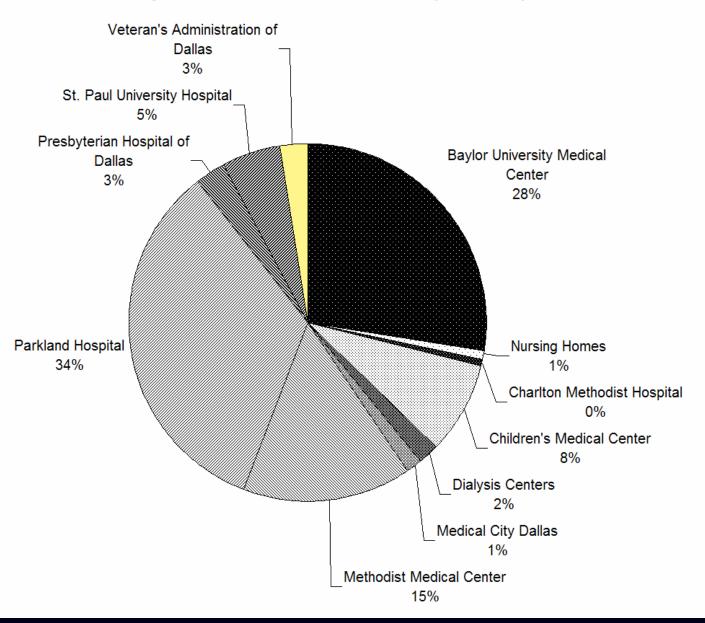
Staffing Estimates at Maximum Function

Approximately 10,000 Encounters
Approximately 4500 Medication Refills
17,000 Arrived by Bus
464 Arrived by NDMS Air
Approximately 35,000 Sheltered
Addressed Surge Capacity
Protected the EMS / Healthcare Infrastructure
for Dallas County

Total Patients Seen by Clinic



Transported Patients 9/3 - 9/13 (N = 229)



Call Center at the EOC and Reunion JOC:

Date	Total Incoming Calls	Number of Call Takers				
09/01	445					
09/02	2944	7				
09/03	3983	22				
09/04	1716	22				
09/05	980	48				
09/06	900	42				
09/07	1209	38				
09/08	711	26				
09/09	499	35				
09/10	401	39				
09/11	258	25				
09/12	112	18				
09/13	252	15				
09/14	246	13				
09/15	259	11				
09/16	197					
09/17	94					
09/18	7					
09/19	188					
09/20	152					
	?	?				
Totals	14,967	361				

Staffing Estimates at Maximum Function

To Run this Level of Operation 24/7/365 would cost over \$20,000,000 per year

This was a first rate effort

All Volunteered

Key Features

- 1.Medical Reserve Corps supplied much of the staffing needs
- 2. Central Management Team
- 3. EM Experience Helped
- 4. Pre-identified location
- 5. Thinking fast on the feet!
- 6. Community commitment
- 7. Community practice

Key Design Features

- 1.Don't think of it as a hospital...
- ...unless it needs to be a hospital
- 2. Involve EMS early, all elements
- 3. Keep the design simple
- 4. Reach out to national vendors
- 5. Don't expect rapid federal help
- 6. Be prepared for the unexpected

Key Design Features

- 1. Have a single point of contact for the medical operation and then direct from there
- 2. ASSIGN SOMEONE TO STAFFING EARLY!
- 3. Handle volunteers through a central contact point, likely "off campus"

Key Error Avoidance Points

- 1. You will need a QA program
- 2. You need a medical chart
- 3.Plan for Record Keeping
- 4. Patients get sicker: Watch them
- 5. Have a team that makes medical
- rounds in the shelter
- 6. Do NOT assume that diarrhea will not break out at YOUR shop!

Occurred 9/5/05
Severe N/V/D
Spread Rapidly
Over 50 cases

Strict handwashing
Quarantine
PPE
Bathroom facilities
Linens/clothing

Food/beverage
Water coolers
Play area

- •Disinfectants
- •Red Bags for Waste
 - •Hand Hygiene
- •Bathroom facilities
- ·Living and play areas
 - •Food handling

Key Error Avoidance Points

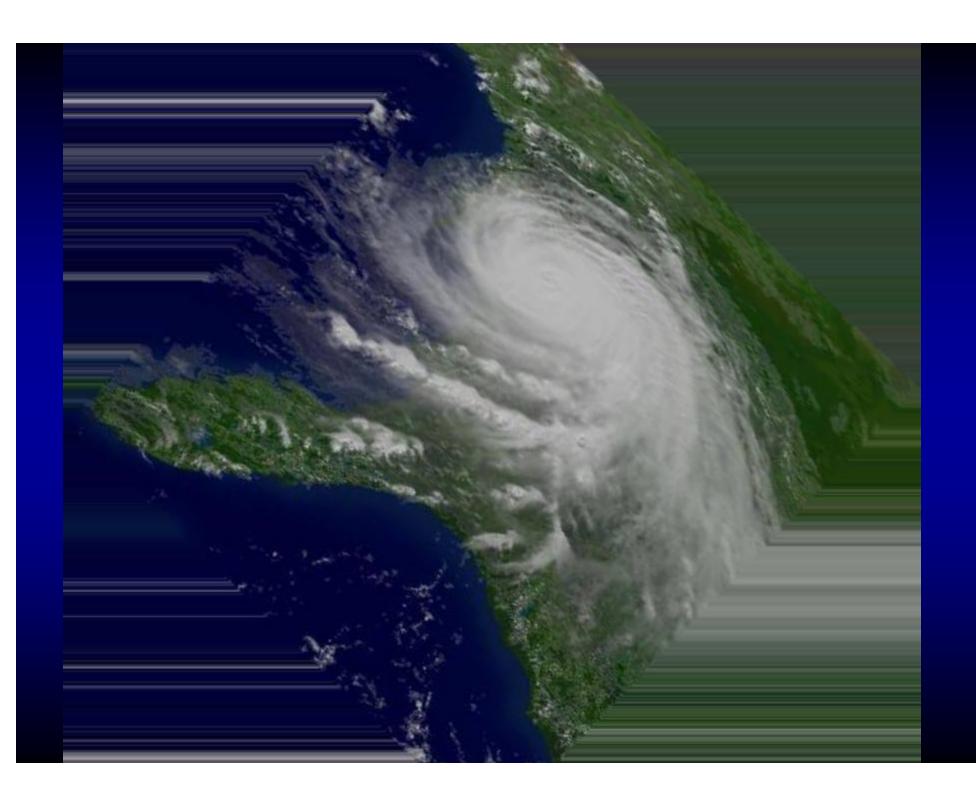
- 7. Remember that shutting the operation down is just as important as setting it up! Prepare for closing down from the start.
- 8. Just because a doctor volunteers to help does NOT mean that he/she is the right person for these patients

Unexpected Occurrences

Institutionalization

A home for the local homeless

A number of persons that will be just impossible to place



Why did it work for us?

- 1. The Community came together
- 2."Nothing was too good for our friends from Louisiana"
- 3. A central staffing core took this on as a dedicated labor of love
- 4. The MRC worked
- 5. We got what we needed because we asked a lot of people for things

Why did it work for us?

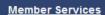
We checked out ego's (and our institution name badges) at the door and got the job done

People in command accepted that they could be wrong, listened to others, and continuously re-evaluated





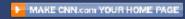






SEARCH









» How Hurricanes Form | Deadliest Storms | Tips

FEMA chief: Victims bear some responsibility

Brown pleased with effort: 'Things are going relatively well'

Thursday, September 1, 2005; Posted: 11:41 p.m. EDT (03:41 GMT)

Programming Note: CNN looks at the disaster and chaos crippling Louisiana, "NewsNight," Thursday, 10 p.m. ET.

(CNN) -- The director of the Federal Emergency Management Agency said Thursday those New Orleans residents who chose not to heed warnings to evacuate before Hurricane Katrina bear some responsibility for their fates.

Michael Brown also agreed with other public officials that the death toll in the city could reach into the thousands

"Unfortunately, that's going to be attributable a lot to people who did not heed the advance warnings," Brown told CNN.

"I don't make judgments about why people chose not to leave but, you know, there was a mandatory evacuation of New Orleans," he said.

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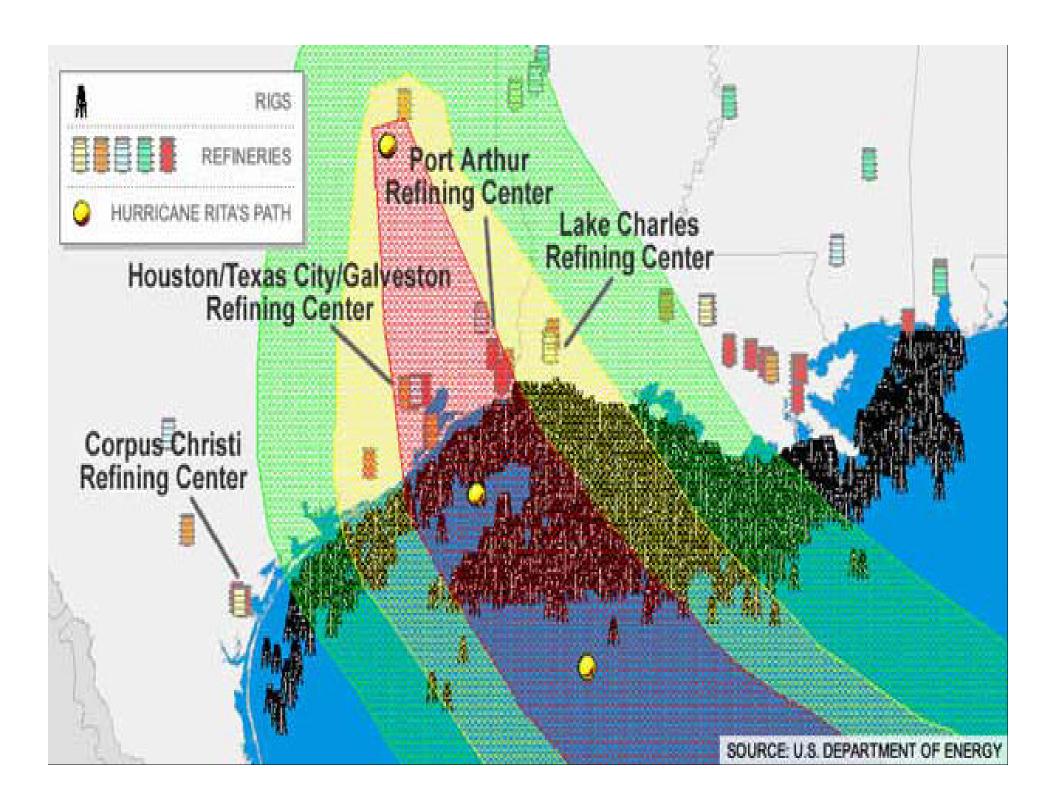
VAHOO! search



I had just spoken to our EMS regional agency during the third week of September using a picture of Rita near the tip of Florida...





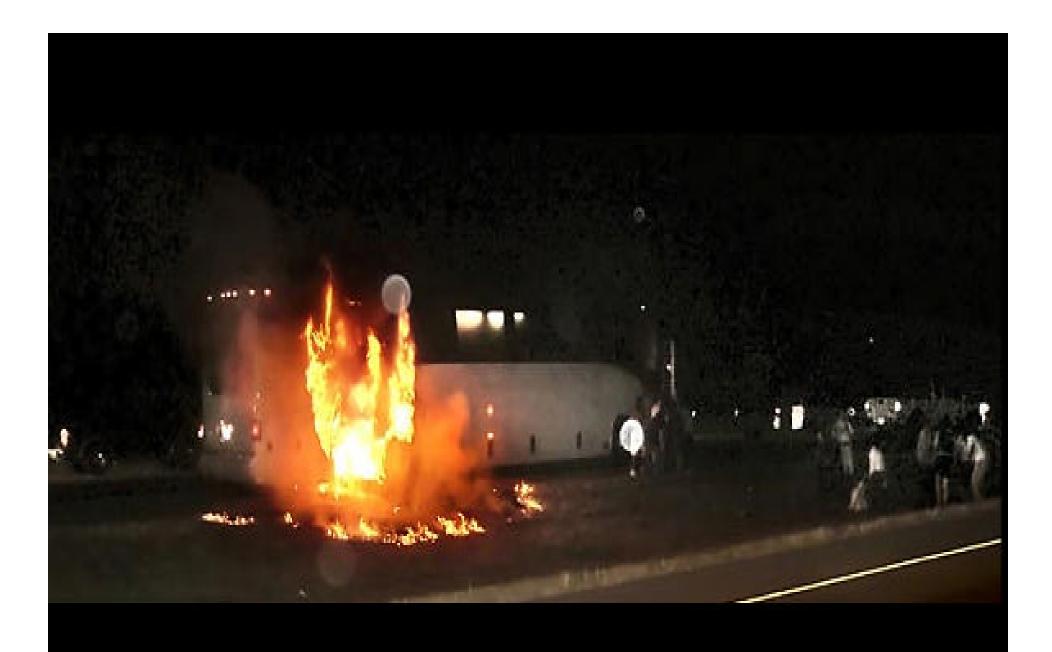


NDMS activated
Patient Movement > 1,500,000
Special Needs Increased
Love Field, 5 planes
September 22 and 23, 2005

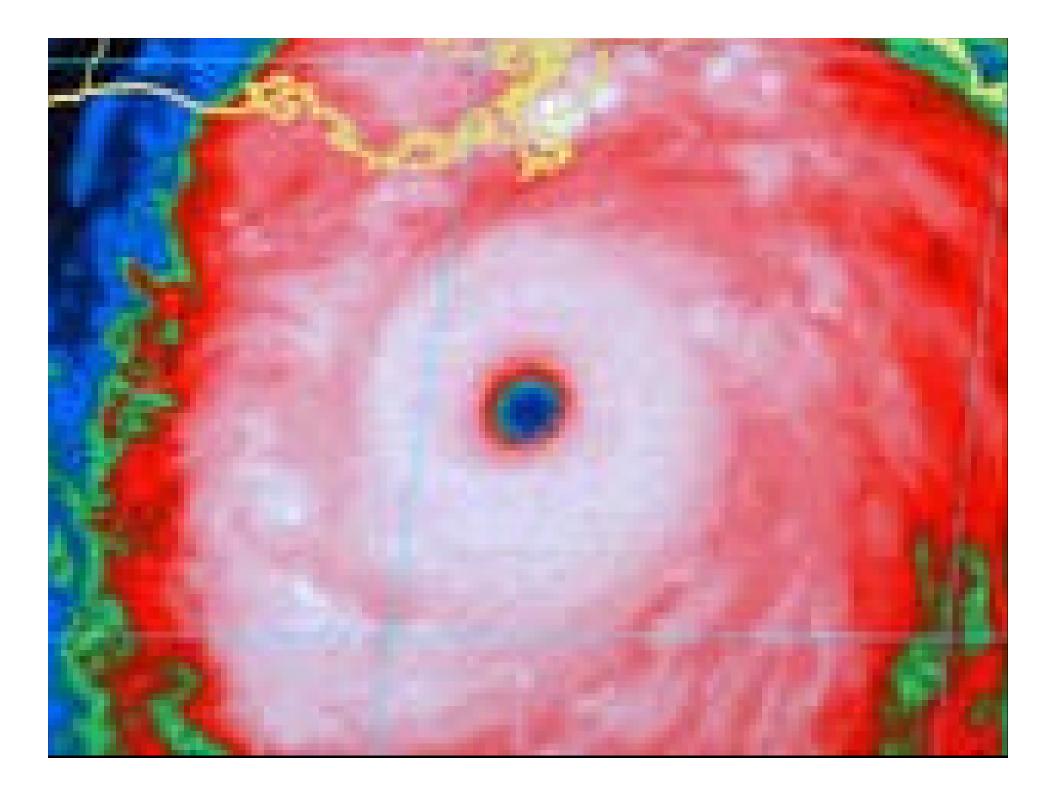
...and then...



September 23 Bus accident, 24 deaths Rescue Response Initiated Code Yellow at Parkland 14 survived for ED evaluation 9 admissions, 1 critical







The Success

The Medical Team:

Out of some 10,000 patients seeking care, not a single fatality and not a single adverse outcome

Incident Command

Longest Prior Test – 4 hours Katrina / Rita / Bus Explosion – 4 weeks!!!!!

Challenges

Communications

Free Lance or "Buddy System" Communications Chain of Command for ICS

Additional Reporting

Additional reported required for diarrheal illness

One WNV seen, and two cases of vibrio vulnificans sepsis seen

Daily Communications

EOC Conference Call State Conference Call THA Conference Call Parkland Conference Call ...etc etc etc...

The Heroes

All Area Hospitals
Hundreds of Volunteers
Walgreens
Innumerable vendors
Public Health

The Long Term

We worked together with the Dallas County Medical Society, CMS, and USPHS to craft "Katrina Care"

The Long Term

The local physician network created a model system for the long term healthcare for evacuees, funded by Medicaid

Lessons Learned

NDMS - Need Medical Record / Tracking Electronic Tracking System Too Many Data Bases Duplication of Effort - Data Bases Incident Command Structure in Shelters ICS Forms / Tools for Shelter Need Single Authority in Community Shelter Assessment Tool

Lessons Learned

Incident Command
Scale Up / Scale Down
Create a Schedule for I.C. team
Phases of response
Immediate, Intermediate, Extended
Activation Procedure
Alert vs. Minor
Unified Command Structure

Can we do better?

Are we going to take the communications gap problem seriously?



If so,
how then
do we do it?



And, a critical question?

Will we always depend on medical volunteers

to provide care while so many others perform on the clock?

The Champions!

Volunteers **Teamwork Community Integration Multidisciplinary Approach** Southwestern's EMS Section Parkland/Methodist/CMC/Baylor/ St. Paul/Zale/Scottish Rite/Presby **EOC** and Public Health **NDMS Sheltering Efforts**

The Convention Center CMO

Excellent response
Challenged Health Care System
Addressed Surge Capacity
Protected EMS and Hospital Infrastructure
Challenges:

Supplies, Staffing, Volunteers, Communications, Agency Coordination, MERC Collaborative Community Effort

Campus Integration Needs

Integrated Campus Response All facilities involved **Integrated Plan Development Integrated Triage/Decon Integrated Communication Integrated Security Integrated Exercise Planning**

Ongoing Needs

Review and revise Track – define increase in hospital visits from evacuees once shelter closed Schedule opportunity for regional critiques State-wide critiques

Novel Projects!

Novel Communications paths for evacuees

Medical Special Needs Centers

Electronic Personal Health Records

The Medical Winner

A "non-denominational",
"check your ego at the door",
efficient, fast, accurate
volunteer system.

The Winner

The State of Texas and its Citizens

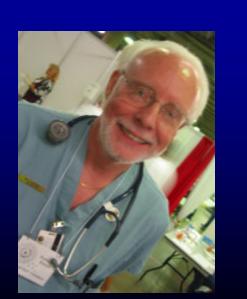
An Outpouring of Mercy and Love













The Winner

US!!

We can DO IT!!!

Thanks!!!

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