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	84. WAS DECEDENT A U.S. VETERAN?	8b. YEAR LAST SERVED IN U.S. ARMED FORCES?		M. PLACE OF DEATH	CE OF DEATH (Check only one. See Instructions.)				
	No			etient /Outpatient DOA	OTHER	Nursing Home Residence	Other (Spe	ody)	
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	William J. Riley Mer		· · · · · · · · · · · · · · · · · · ·		Munster			Lake 🗭	
	10. MARITAL STATUS 11. SURVIVING SPOUSE (Specify) 11. SURVIVING SPOUSE (If wife, give madein name)		done during n		'S UBUAL OCCUPATION (Give kind of work most of working life. Do not use retired)		12b. KINO OF BUSINESS THOUSTRY		
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