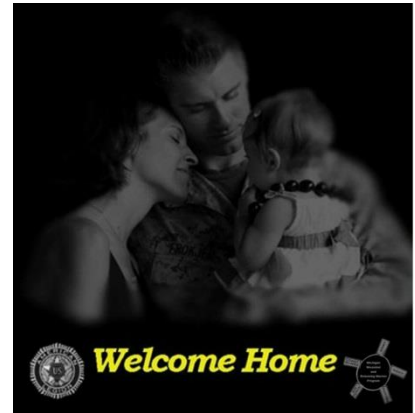


The Michigan Wounded and Returning Warrior Program

Name: _____

Address: _____

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