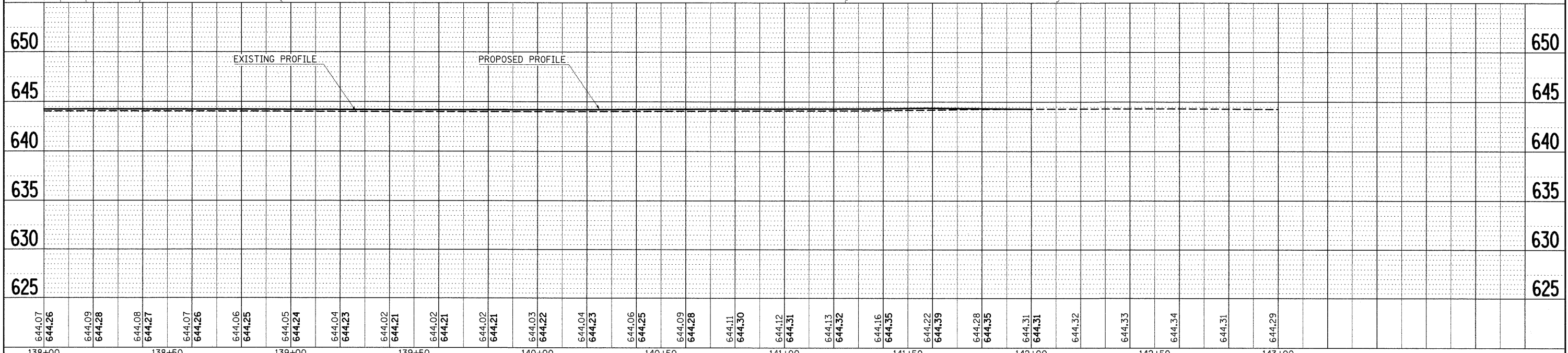
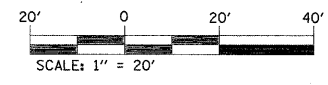
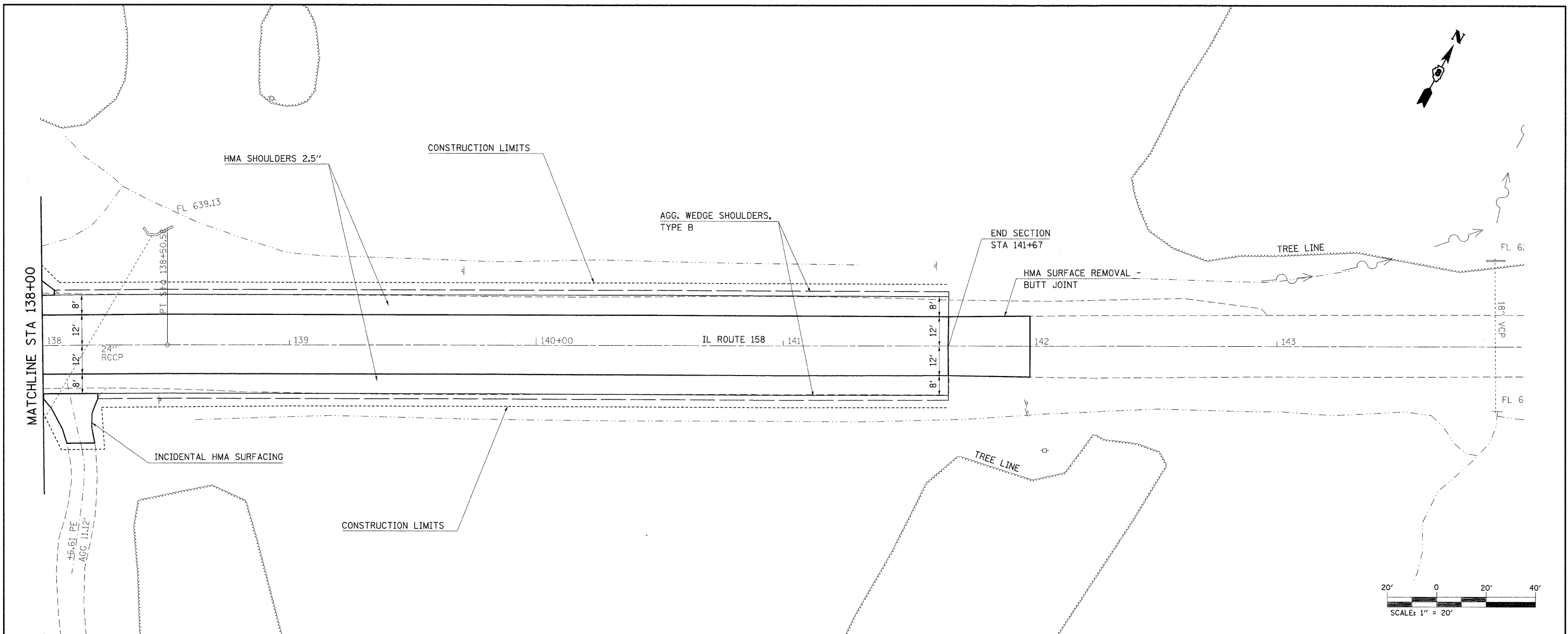


PLAN	DATE
SURVEYED	BY
ALIGNED	
CHECKED	
RT. OF WAY	
CHECKED	
NO. _____	
FILE NAME	

PROFILE	DATE
SURVEYED	BY
GRADES	
CHECKED	
B.M. NOTED	
STRUCTURE	
NOTATIONS	
CHRD	
NO. _____	



FILE NAME =	USER NAME = overbj	DESIGNED -	REVISED -	STATE OF ILLINOIS DEPARTMENT OF TRANSPORTATION	PLAN AND PROFILE				F.A.P. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.		
c:\pwork\p\WIDOT\OWENBJ\dms52558\p\in006	PSI.dgn	DRAWN -	REVISED -		SCALE:	SHEET NO.	OF	SHEETS	STA.	TO STA.	809	67-IHBR	MONROE	144	22
		CHECKED -	REVISED -						CONTRACT NO. 76977						
		DATE -	REVISED -						FED. ROAD DIST. NO. ILLINOIS FED. AID PROJECT						