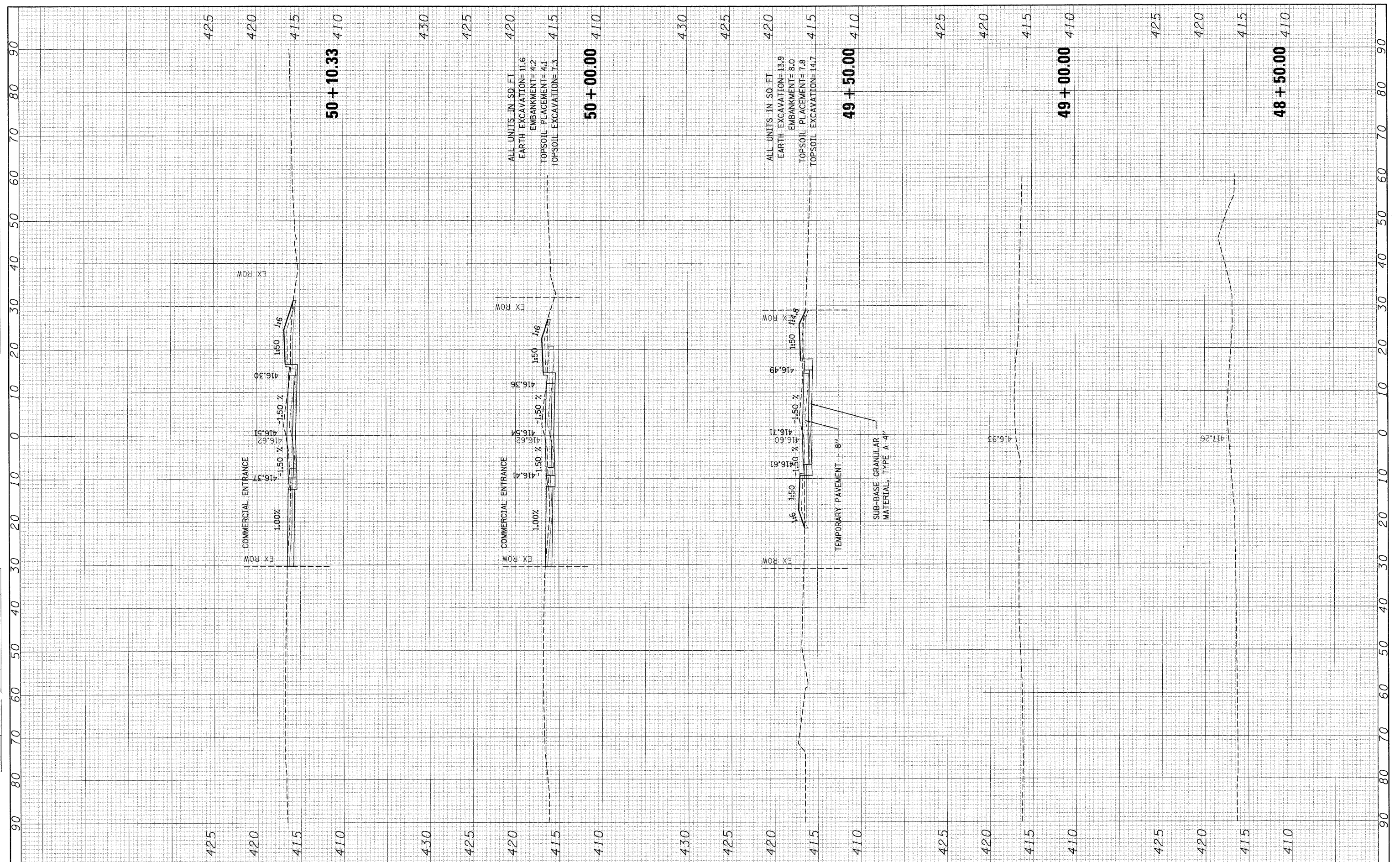


FINAL SURVEY NO. _____
 SUPERVISED BY _____
 TEMPLATE NO. _____
 AREAS CHECKED _____

ORIGINAL SURVEY NO. _____
 PLOTTED BY _____
 TEMPLATE NO. _____
 AREAS CHECKED _____



FILE NAME = #FILEL#
 USER NAME = #USER#
 PLOT SCALE = #SCALE#
 PLOT DATE = #DATE#

DESIGNED - JB
 DRAWN - JB
 CHECKED - ACL
 DATE - 10/09/09

REVISED -
 REVISED -
 REVISED -
 REVISED -

**STATE OF ILLINOIS
 DEPARTMENT OF TRANSPORTATION**

EXCHANGE AVENUE

SCALE: SHEET NO. OF SHEETS STA. 48+50.00 TO STA. 50+10.33

F.A.P. RTE. 9153	SECTION 82-1K	COUNTY ST. CLAIR	TOTAL SHEETS 107	SHEET NO. 91
CONTRACT NO. 76C40				
ILLINOIS FED. AID PROJECT				