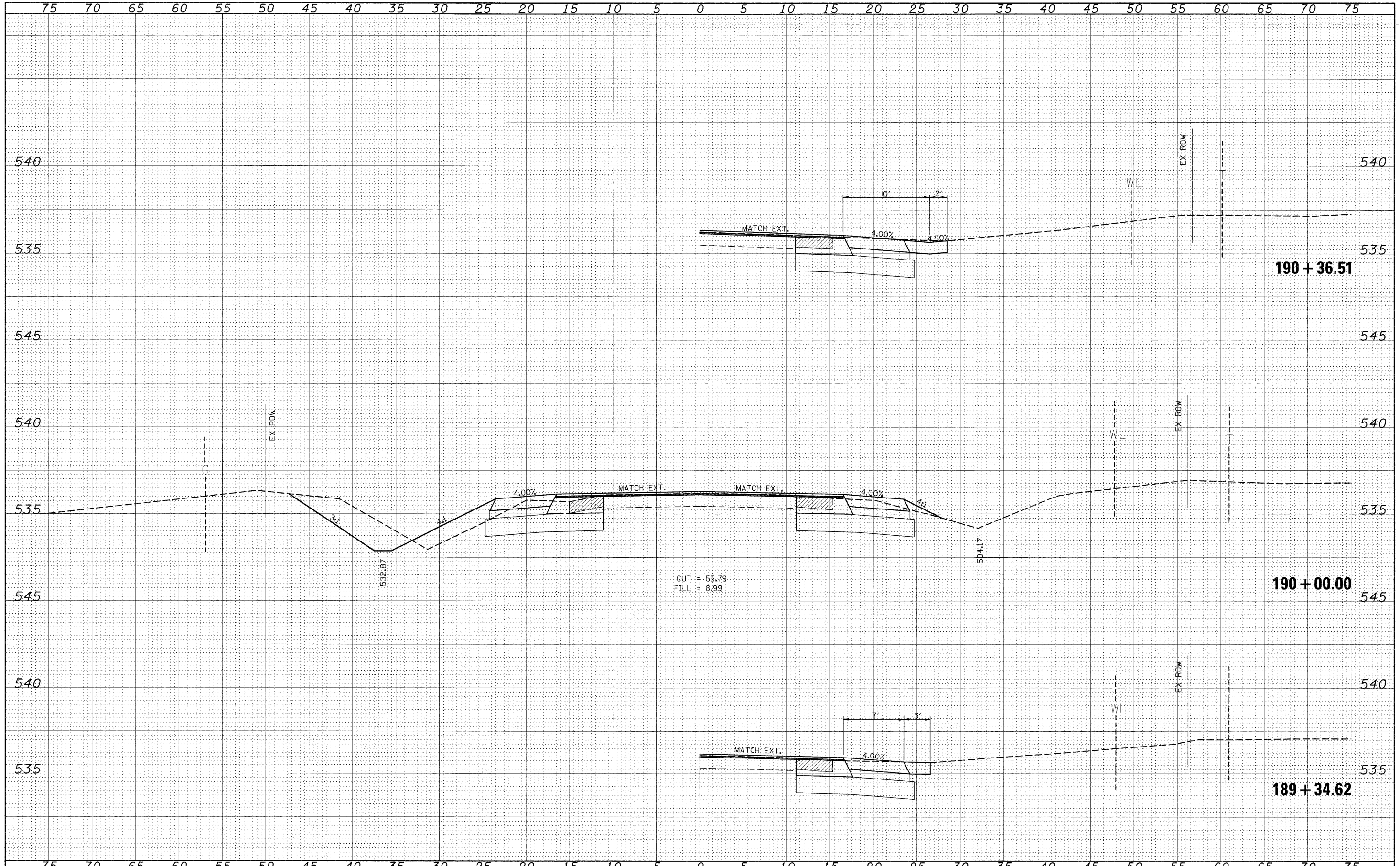


DATE _____
 BY _____
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FILE NAME =	USER NAME = #USER#	DESIGNED -	REVISED -	STATE OF ILLINOIS DEPARTMENT OF TRANSPORTATION	CROSS SECTIONS (SAFETY AREA 2)	F.A.P. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.	
#FILEL#		DRAWN -	REVISED -			329	17RS-3	MARION	96	84	
		CHECKED -	REVISED -			CONTRACT NO. 76D42					
		DATE -	REVISED -			ILLINOIS FED. AID PROJECT					

SCALE: _____ SHEET NO. ___ OF ___ SHEETS STA. 189+34.62 TO STA. 190+36.51