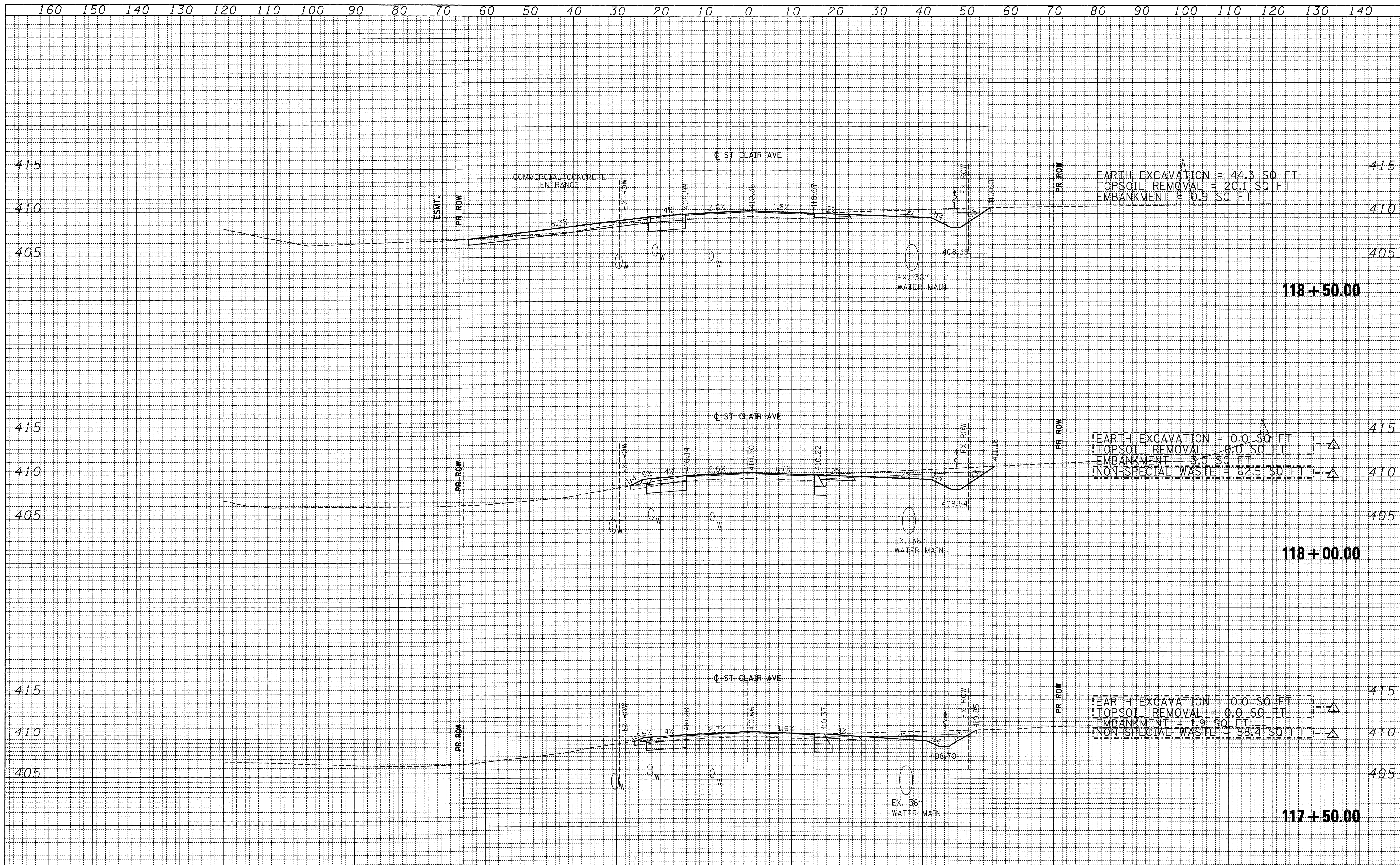


DATE	
BY	
FINAL SURVEY	
NO. _____	
SURVEYED	
TEMPLATE	
NOTE BOOK	
AREAS CHECKED	

DATE	
BY	
ORIGINAL SURVEY	
NO. _____	
SURVEYED	
TEMPLATE	
NOTE BOOK	
AREAS CHECKED	



FILE NAME =	USER NAME = #USER#	DESIGNED - JB	REVISED - 01/06/2012 JB	STATE OF ILLINOIS DEPARTMENT OF TRANSPORTATION	CROSS SECTIONS		F.A. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.
#FILE#		DRAWN - AG	REVISED -		ST. CLAIR AVE		998	82-2-1K	ST CLAIR	353	333
		CHECKED - JB	REVISED -		SCALE:	SHEET NO. OF SHEETS	STA. 117+50.00 TO STA. 118+50.00		CONTRACT NO. 76E06		
		DATE - 10/21/11	REVISED -		ILLINOIS FED. AID PROJECT						