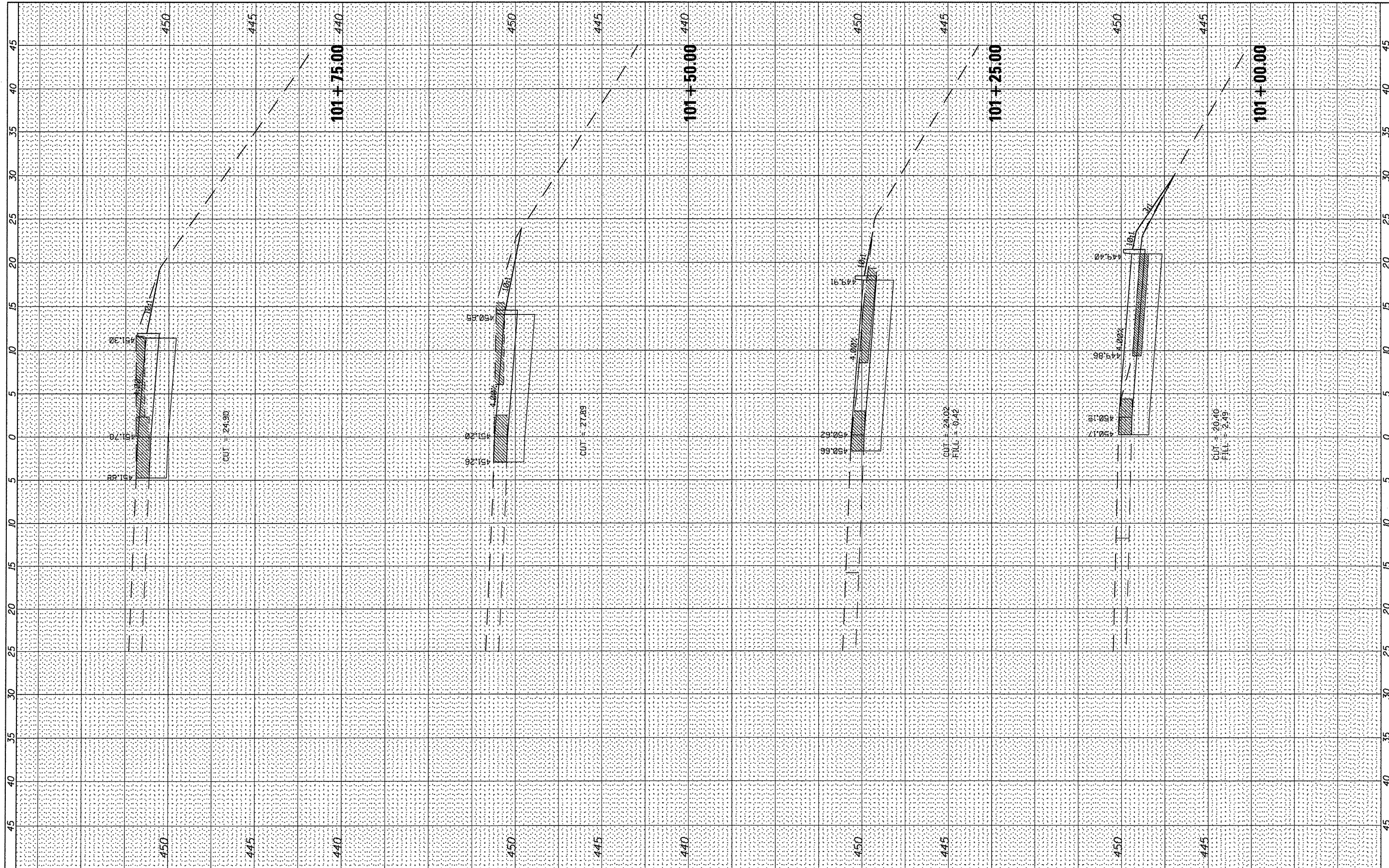


FINAL	DATE
SURVEYED	
NOTE BOOK	
AREAS CHECKED	
NO.	

ORIGINAL	DATE
SURVEY	
NOTE BOOK	
AREAS CHECKED	
NO.	



FILE NAME *
#FILE#

USER NAME * #USER#
DESIGNED - ---
DRAWN - ---
PLOT SCALE * #SCALE#
CHECKED - ---
PLOT DATE * #DATE#
REVISIED - ---
REVISIED - ---
REVISIED - ---
REVISIED - ---

DESIGNED - ---
DRAWN - ---
CHECKED - ---
DATE - ---
REVISIED - ---
REVISIED - ---
REVISIED - ---
REVISIED - ---

**STATE OF ILLINOIS
DEPARTMENT OF TRANSPORTATION**

CROSS SECTIONS

SCALE: _____ SHEET NO. ___ OF ___ SHEETS STA. 101+00.00 TO STA. 101+75.00

F.A.P. RTE. 304/2	SECTION 4061-2	COUNTY MADISON	TOTAL SHEETS 19	SHEET NO. 17
CONTRACT NO. 76E60				
ILLINOIS FED. AID PROJECT				