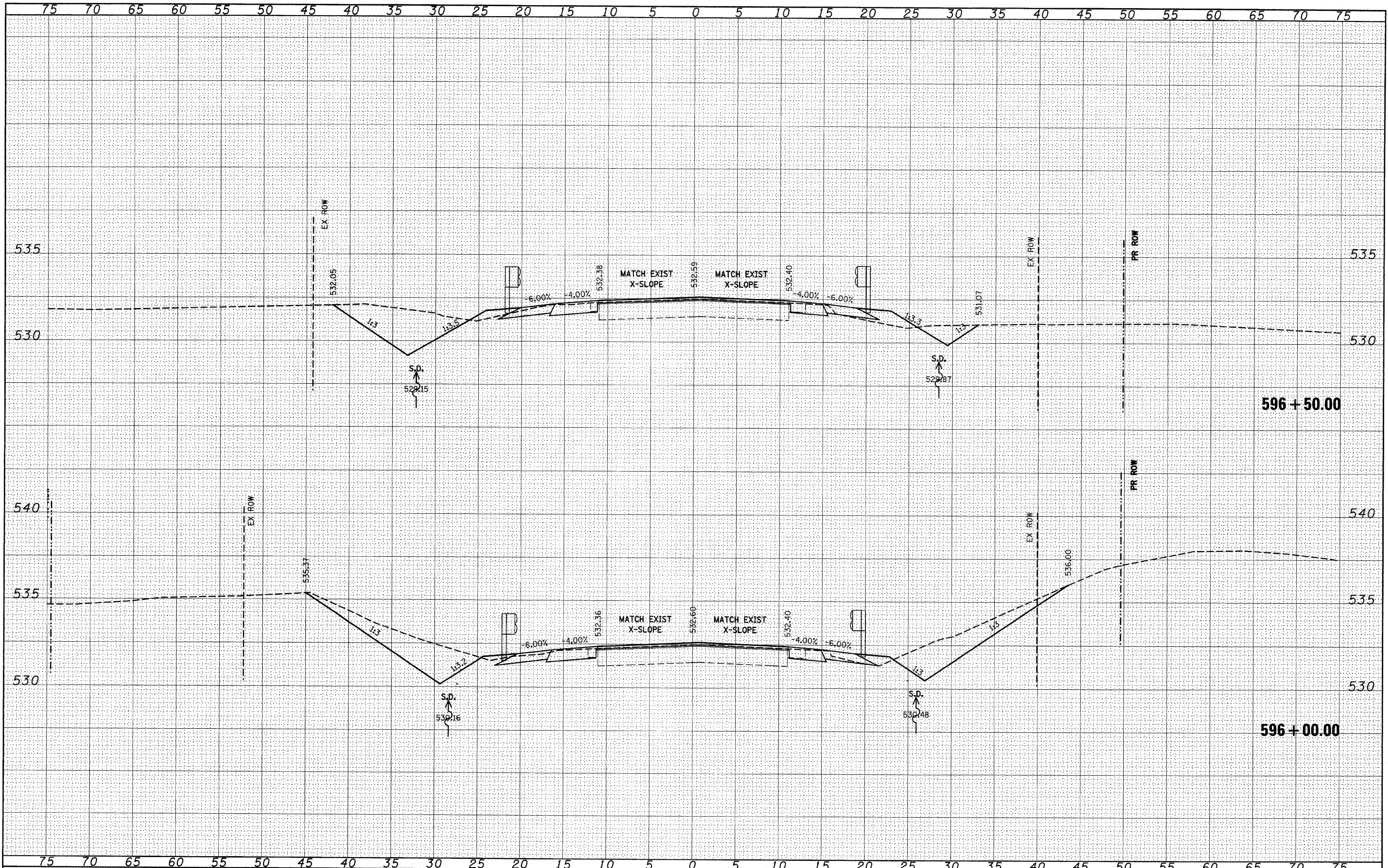


DATE _____ BY _____
 ORIGINAL SURVEYED SURVEY PLOTTED TEMPLATE NOTE BOOK AREAS CHECKED NO. _____

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



FILE NAME = #FILE#

USER NAME = #USER#	DESIGNED - ---	REVISED - ---
PLOT SCALE = #SCALE#	DRAWN - ---	REVISED - ---
PLOT DATE = #DATE#	CHECKED - ---	REVISED - ---
	DATE - ---	REVISED - ---

**STATE OF ILLINOIS
 DEPARTMENT OF TRANSPORTATION**

IL 158

SCALE: _____ SHEET NO. ___ OF ___ SHEETS STA. 596+00.00 TO STA. 596+50.00

F.A.P. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.
809	(133,134)RS-5, 135RS-6	ST. CLAIR	762	620
CONTRACT NO. 76A47			ILLINOIS FED. AID PROJECT	