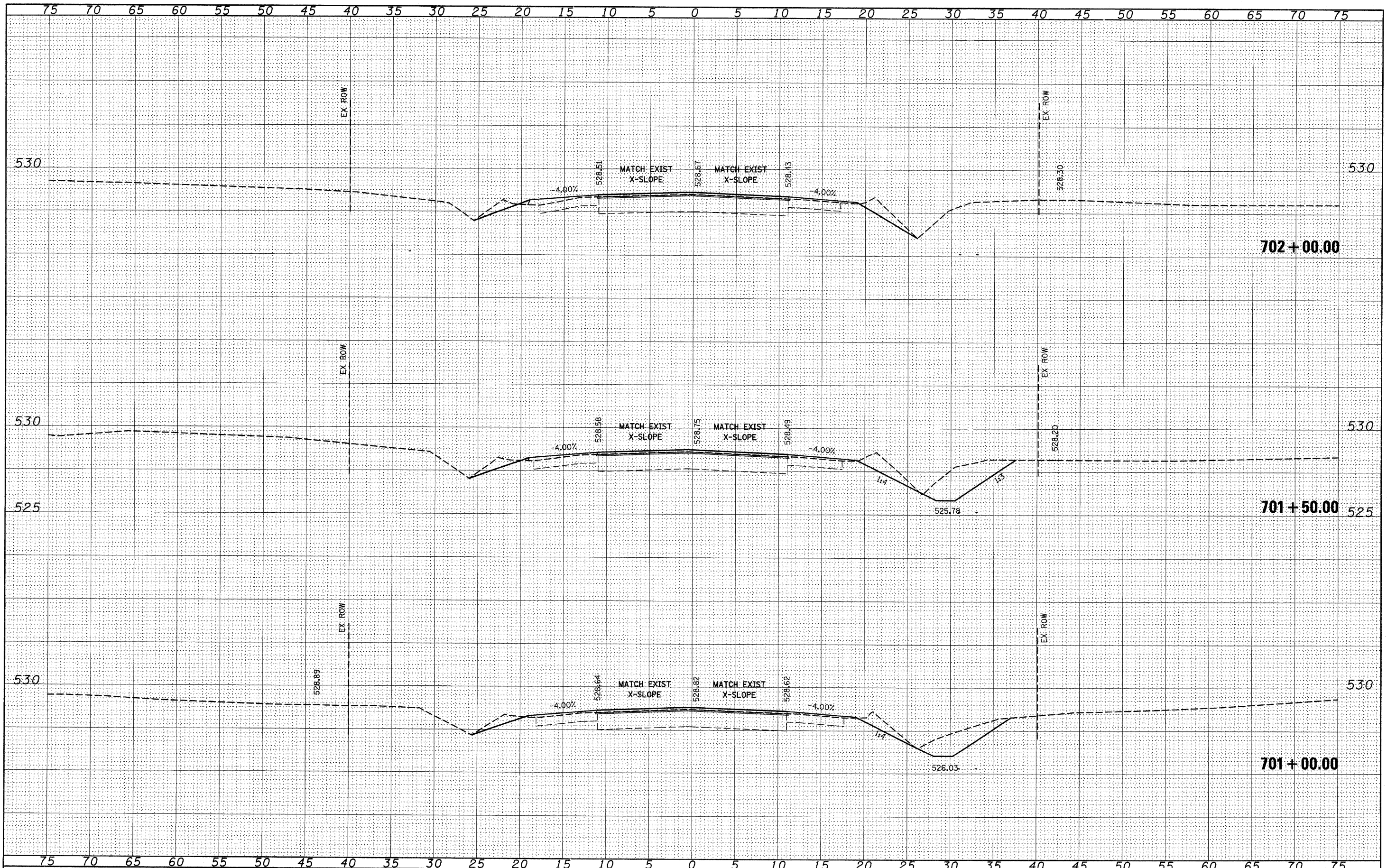


FINAL SURVEY PLOTTED DATE: _____
 SURVEY NO. _____
 NOTE BOOK NO. _____
 TEMPLATE AREAS CHECKED: _____
 BY: _____

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



FILE NAME =	USER NAME = *USER*	DESIGNED -	REVISED -	STATE OF ILLINOIS DEPARTMENT OF TRANSPORTATION IL 158	F.A.P. RTE. 809	SECTION (133,134)RS-5, 135RS-6	COUNTY ST. CLAIR	TOTAL SHEETS 762	SHEET NO. 732
*FILE#		DRAWN -	REVISED -		SCALE: _____	CONTRACT NO. 76A47		ILLINOIS FED. AID PROJECT	
		CHECKED -	REVISED -		SHEET NO. ___ OF ___ SHEETS	STA. 701+00.00 TO STA. 702+00.00			
		DATE -	REVISED -						