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PROJECT CONSULTANT

I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED UNDER MY DIRECT SUPERVISION AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THEY COMPLY WITH THE PROVISIONS OF THE BUILDING CODE OF THE STATE OF ILLINOIS AND THE LAWS OF THE STATE OF ILLINOIS.

DATE ARCHITECT/ENGINEER

NOT FOR CONSTRUCTION

REVISIONS

NO.	DESCRIPTION	DATE

1 ISSUED FOR REVIEW 09.28.07

NO. DESCRIPTION DATE

TECHNO.L.D.

ARCHITECTURE • INTERIOR DESIGN • INTERIORS

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PROJECT
SPACE PLAN
SCALE 1/8" = 1'-0"

PROJECT NUMBER

ARCHITECT/ENGINEER **B. BERRY**

PROJECT ARCHITECT/ENGINEER

DATE ARCHITECT/ENGINEER

DESIGNER **S. DRAN**

DATE DESIGNED

SP.09.08.07