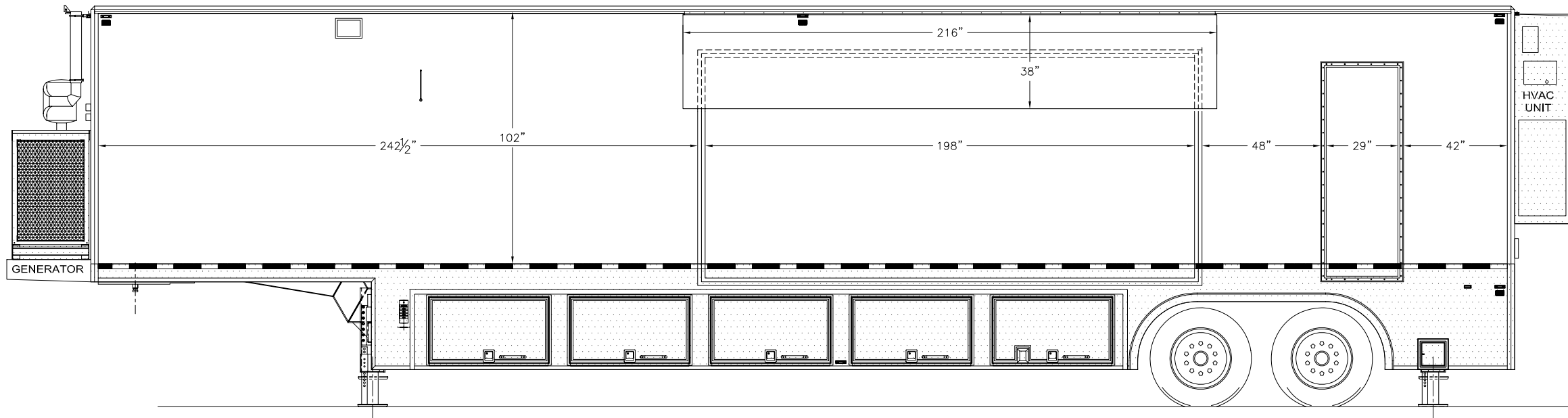
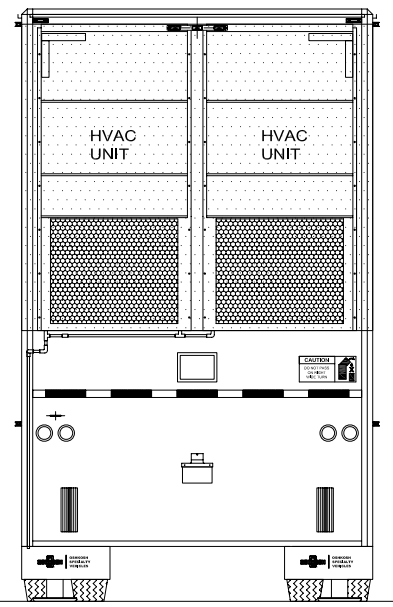


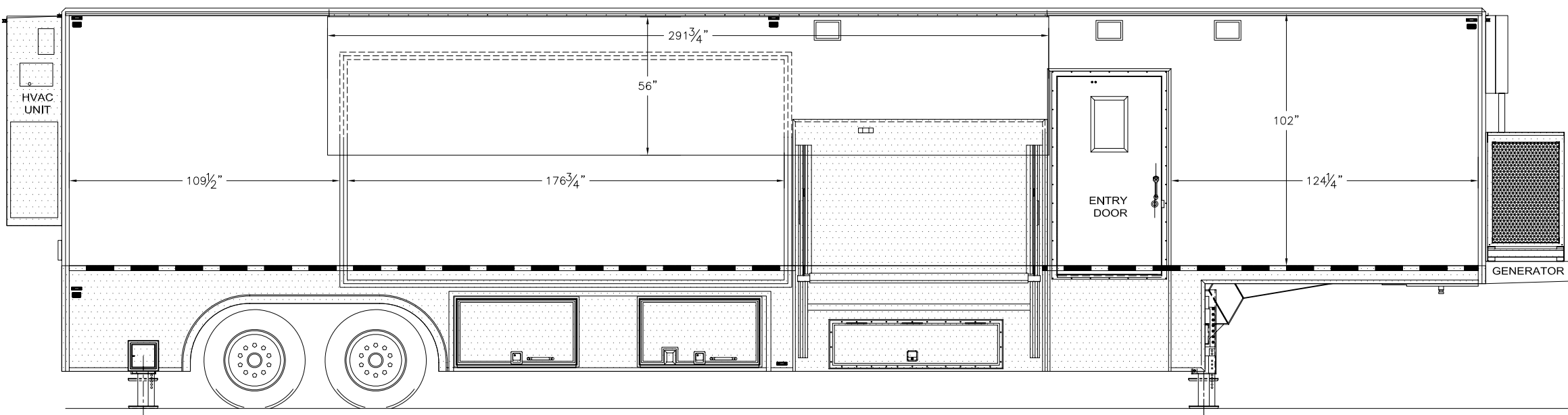
REVISIONS					DESCRIPTION
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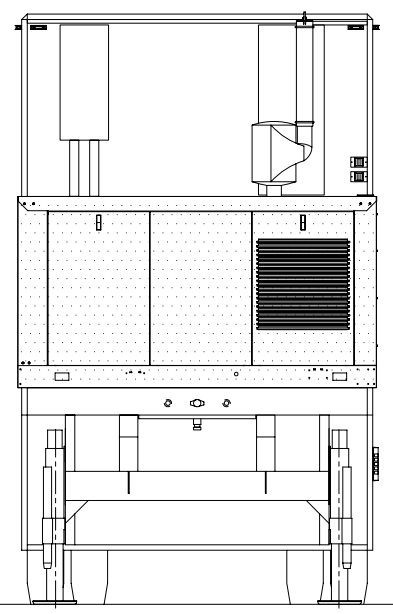
**LEFT SIDE ELEVATION**



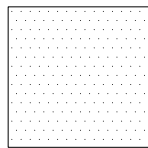
**REAR VIEW ELEVATION**



**RIGHT SIDE ELEVATION**



**FRONT VIEW ELEVATION**



**NOTE: DOT REQUIRED SAFETY DECALS AND MEDICAL EQUIPMENT SAFETY DECALS MUST NOT BE COVERED BY GRAPHICS**

**NO GRAPHICS**

**CUSTOMER AUTHORIZATION**

COMPANY NAME: \_\_\_\_\_

NAME (PRINT): \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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SHEET NUMBER: <b>1 OF 1</b>	REFERENCE DRAWING:	TITLE: GRAPHICS LAYOUT GE ADVANTX CATH LAB 8'-3" X 13'-6" X 48'-0" TRAILER	DATE: 09FEB07	SCALE: 1/2"=1'-0"
<b>JOB#</b>	<b>OSHKOSH SPECIALTY VEHICLES</b>		16745 S. LATHROP AVENUE HARVEY, IL, 60426 PHONE: (708) 596-5066 FAX: (708) 596-2480	
			CHECKED BY: 	DRAWING NUMBER: <b>10109-A29</b>