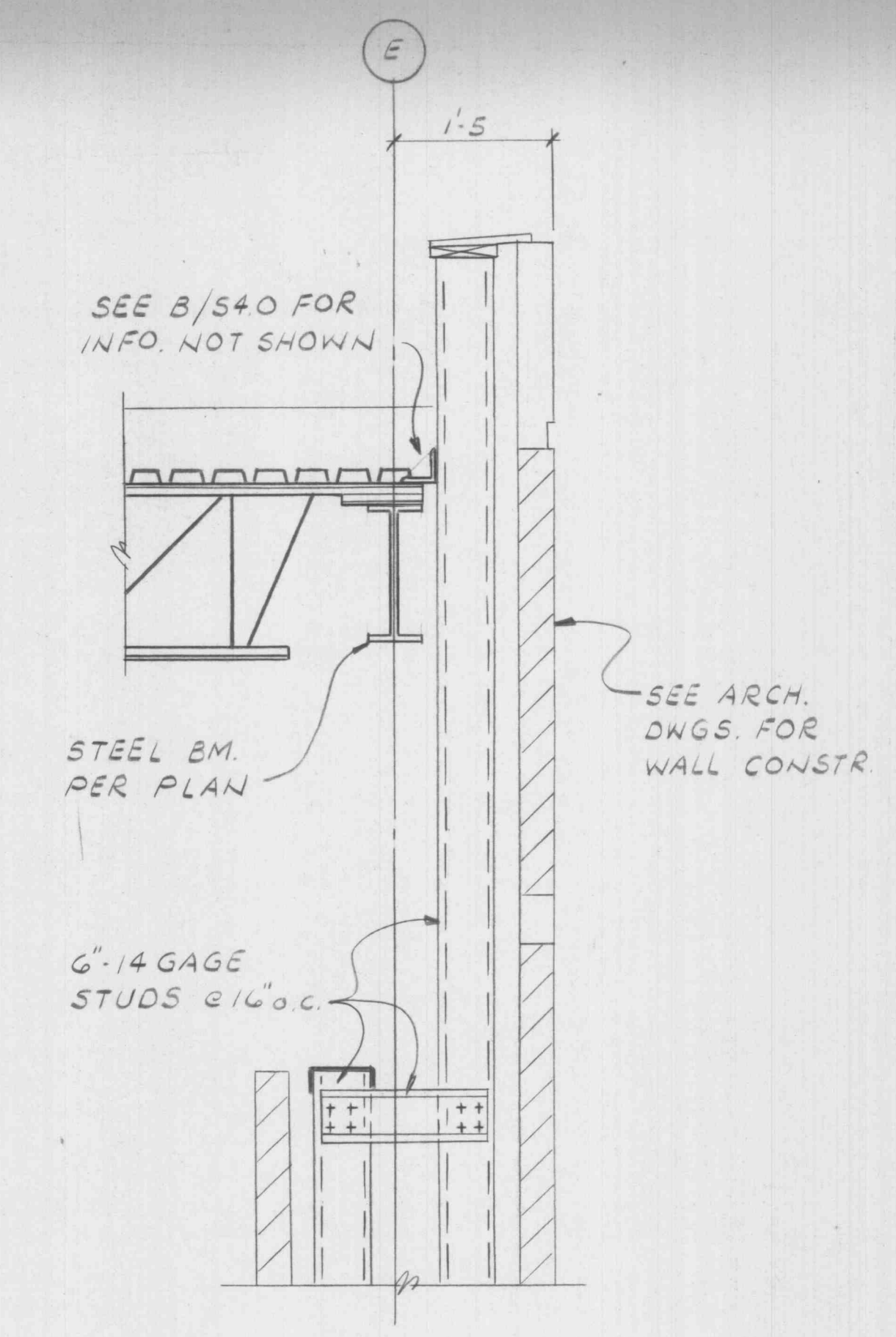
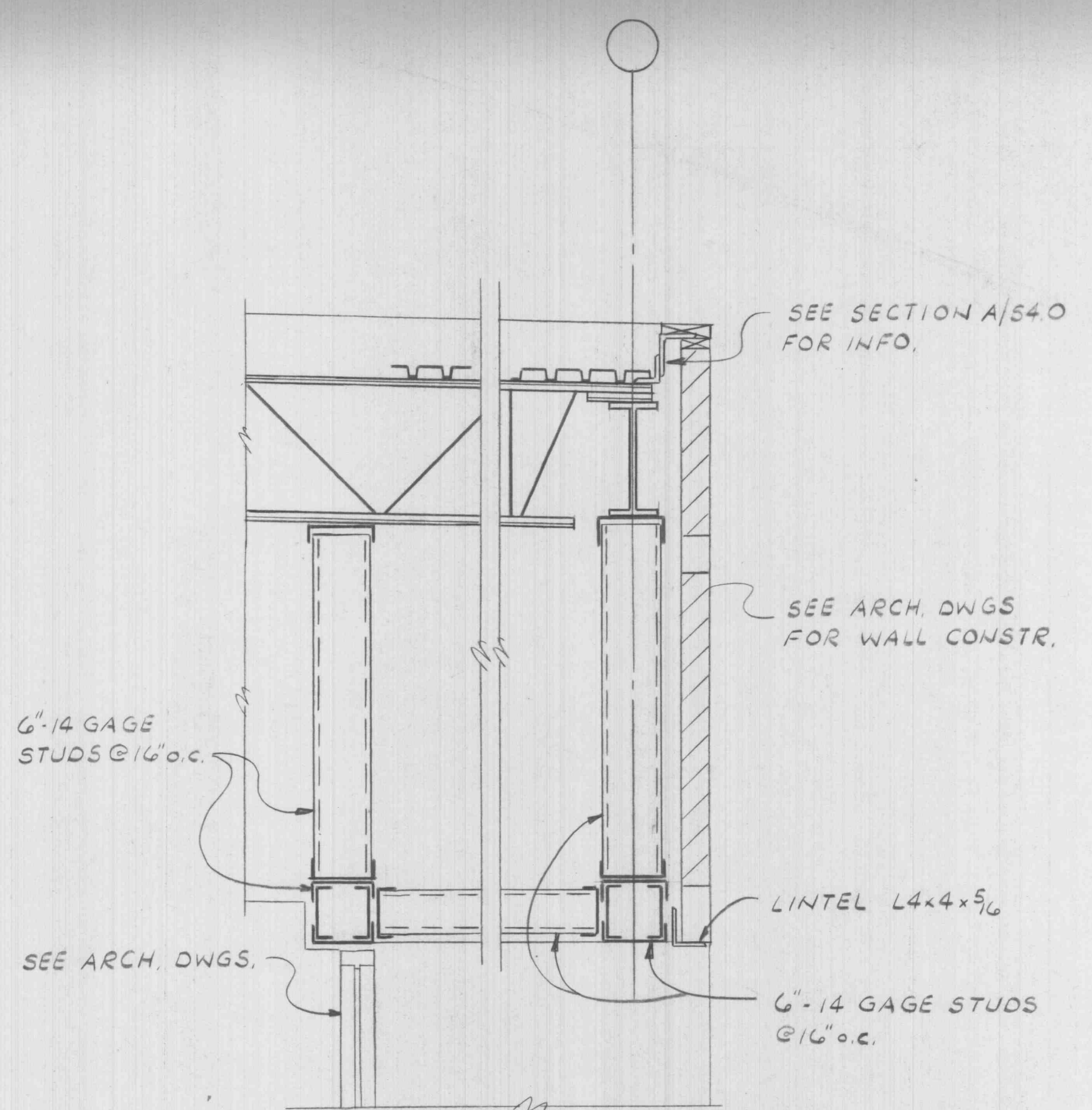


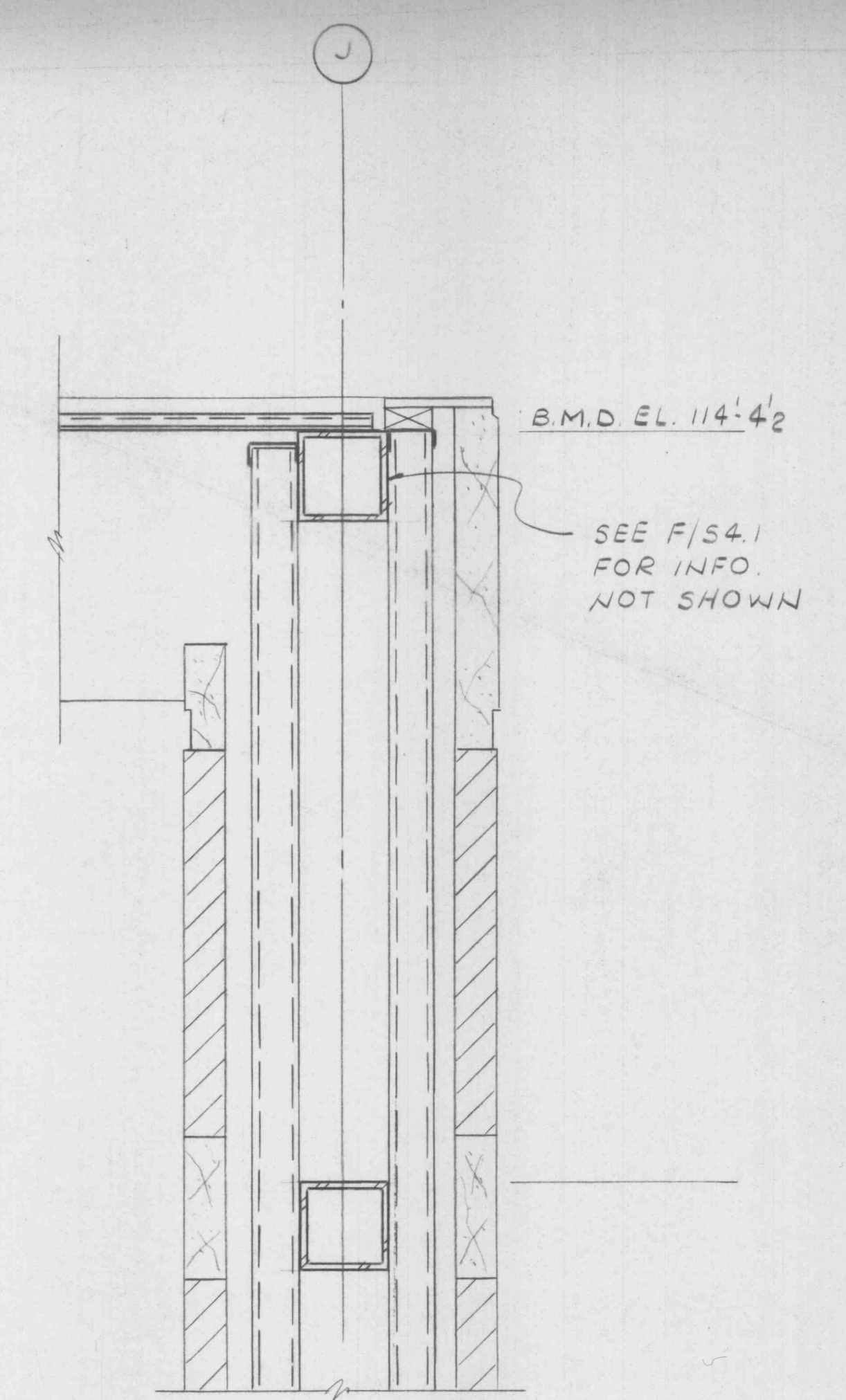
PARTIAL PLAN  
1/8" = 1'-0"



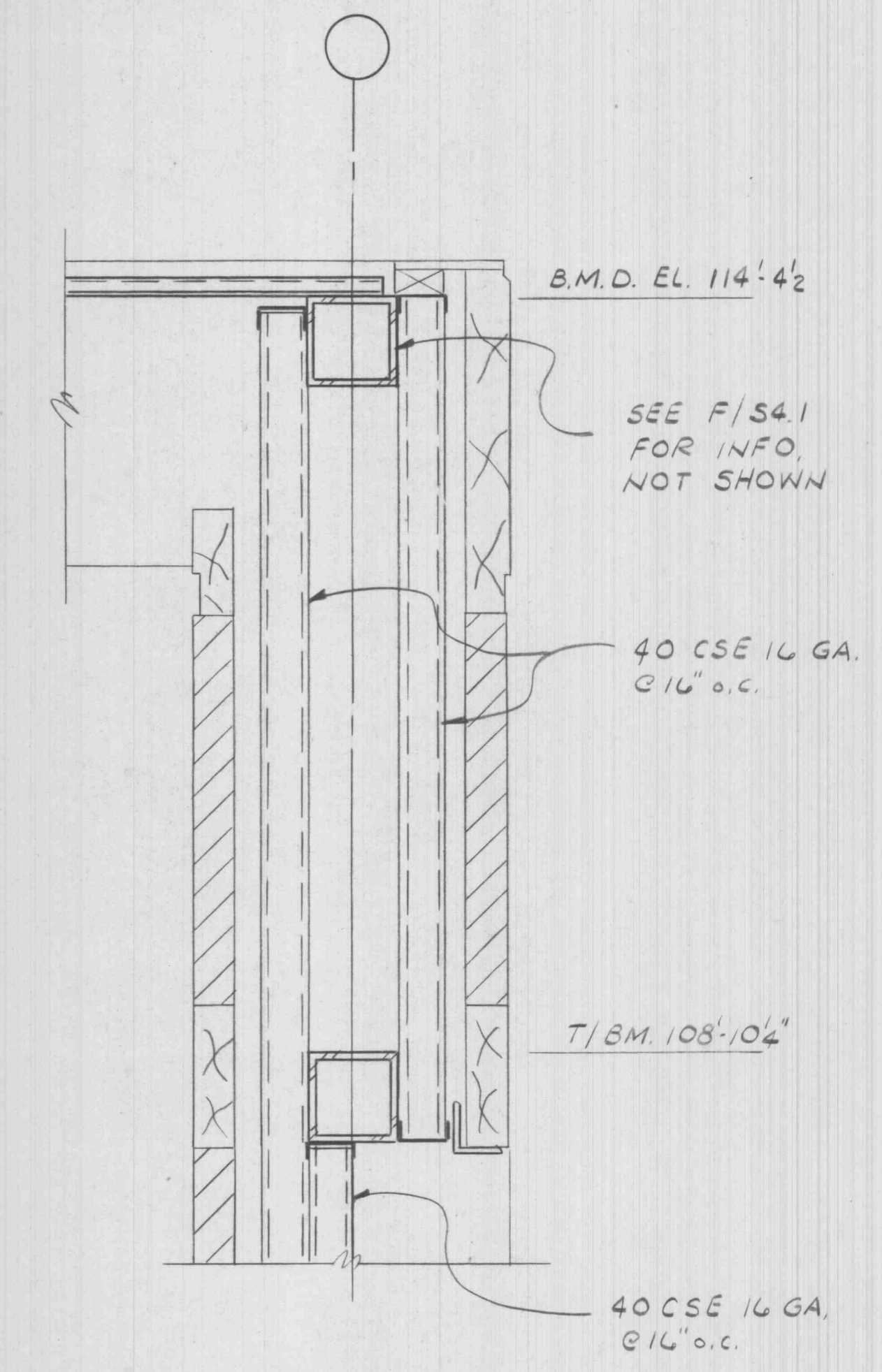
A SECTION  
1/8" = 1'-0"



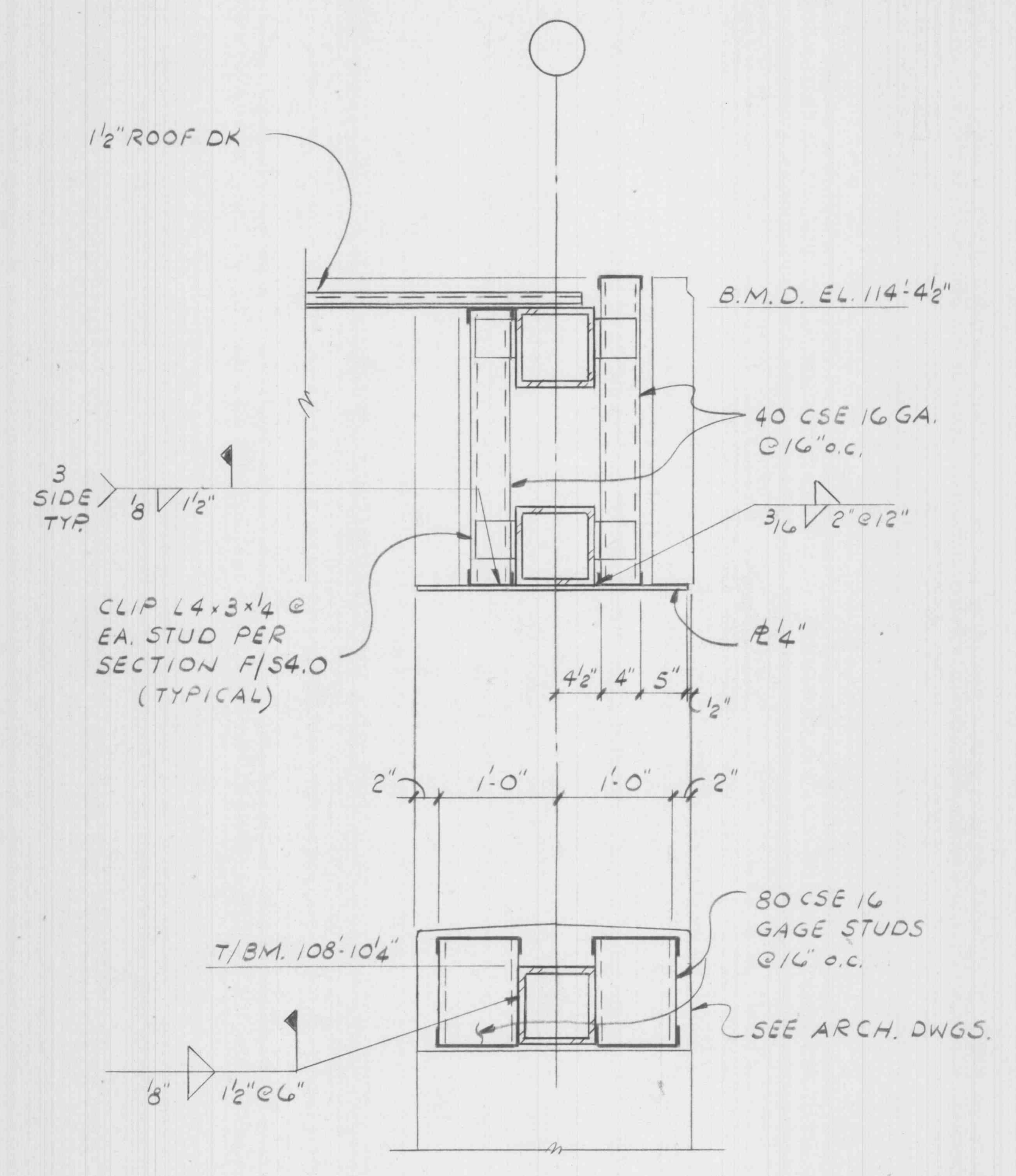
B SECTION  
1/8" = 1'-0"



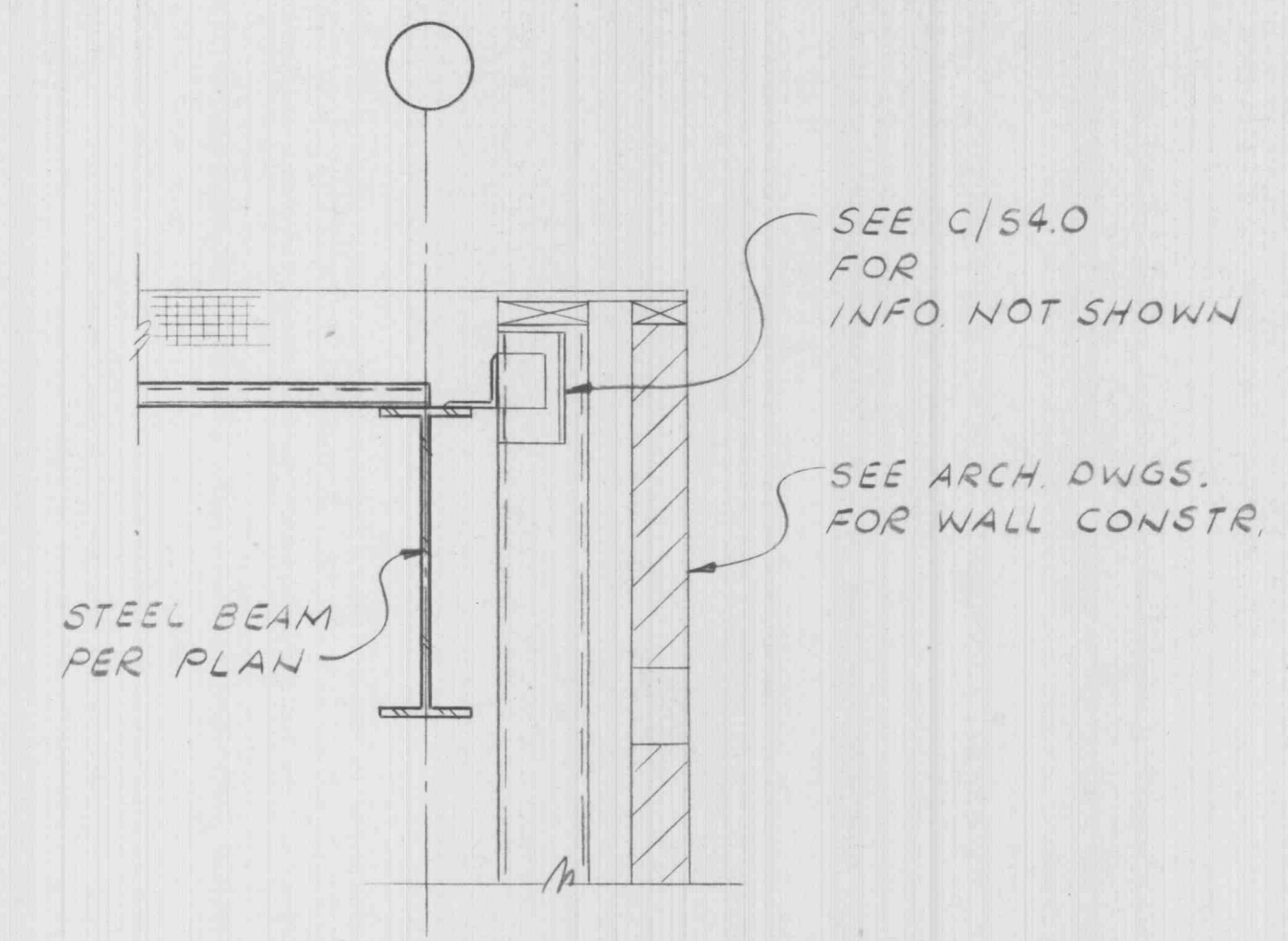
C SECTION  
1/8" = 1'-0"



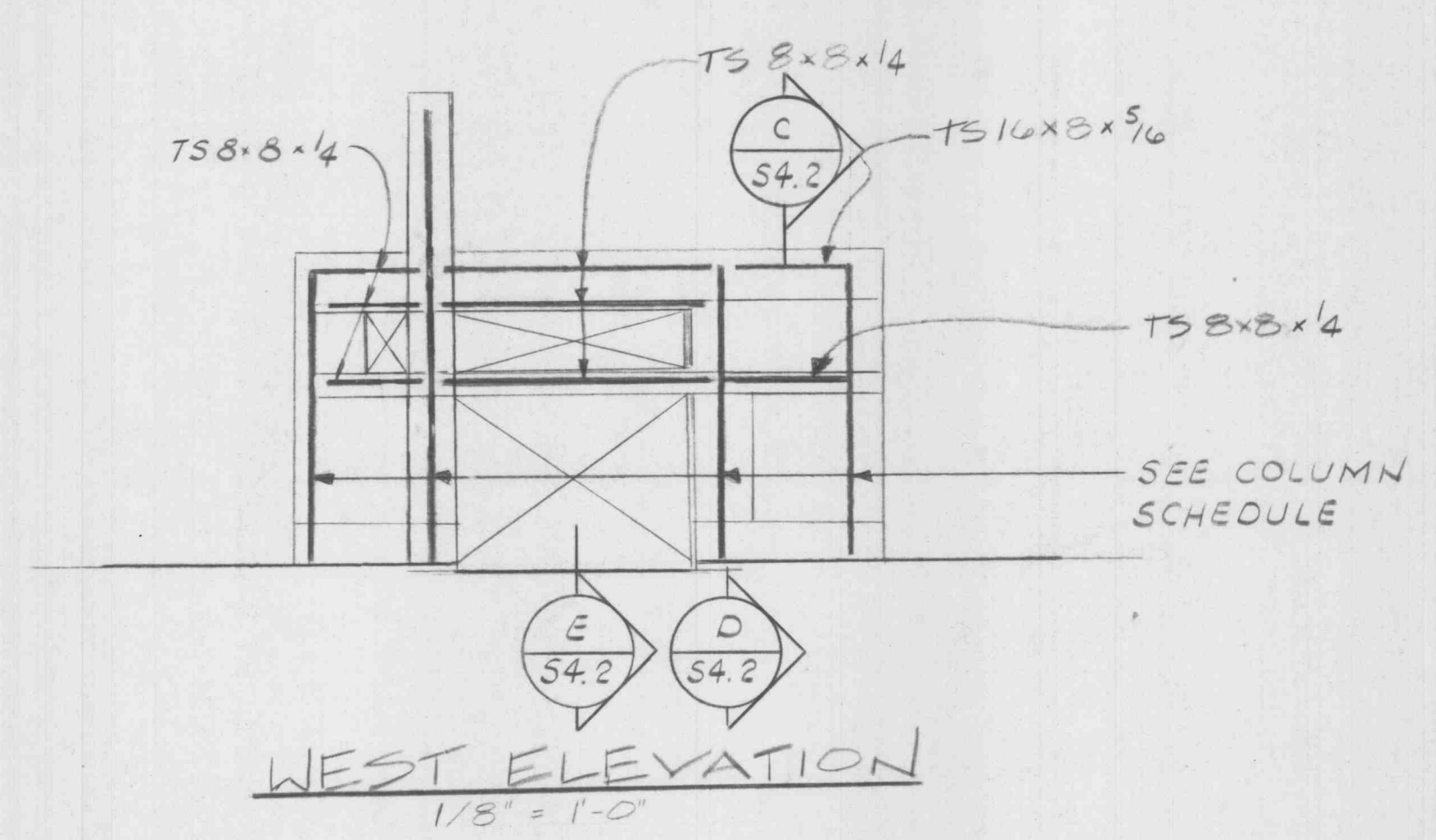
D SECTION  
1/8" = 1'-0"



E SECTION  
1/8" = 1'-0"



F SECTION  
1/8" = 1'-0"



WEST ELEVATION  
1/8" = 1'-0"

I hereby certify that the portion of this technical specification described herein was prepared by me or under my direct supervision and responsible charge. I am a duly registered architect under the laws of the state of Missouri.

Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

**Wischmeyer**  
THE WISCHMEYER ARCHITECTS

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Springfield, Missouri  
Fayetteville, Arkansas

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314.251.4531 Fax

Client: \_\_\_\_\_

**BJC HEALTH SYSTEM**

Project:  
**BJC - O'Fallon Family Health Center**

O'Fallon, Missouri

Revisions  
SECTIONS AND DETAILS

Prj # \_\_\_\_\_  
Date: 11-14-97  
Sheet Contents

Sheet No.  
**S4.2**  
The Wischmeyer Architects, Inc. 1007(c)