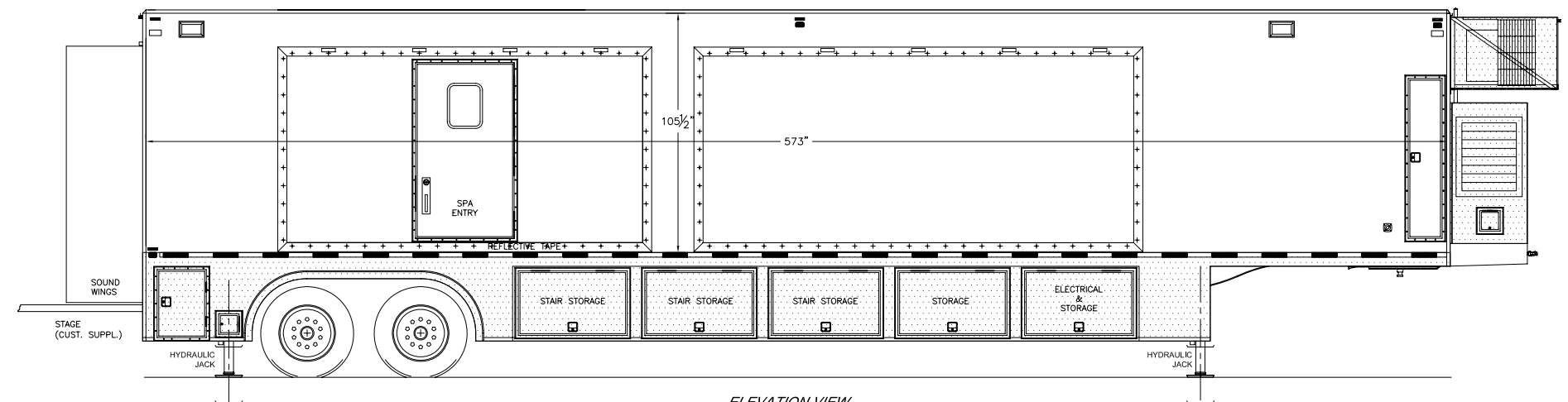
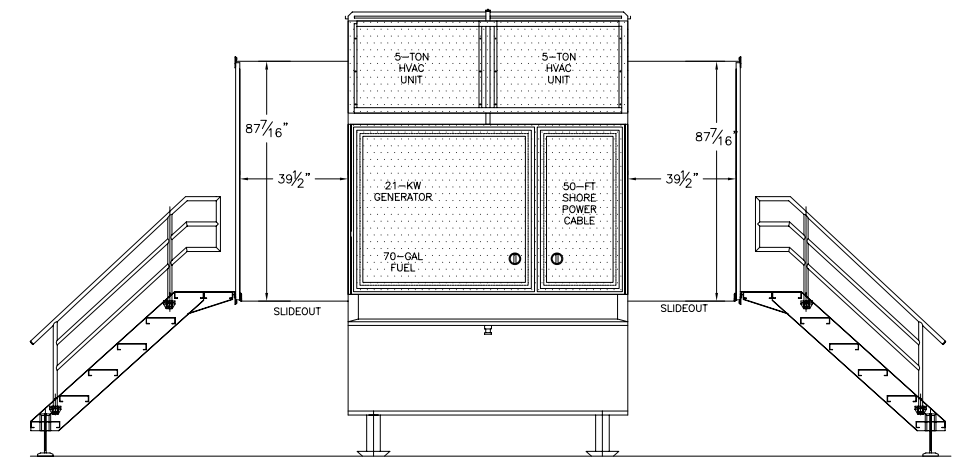


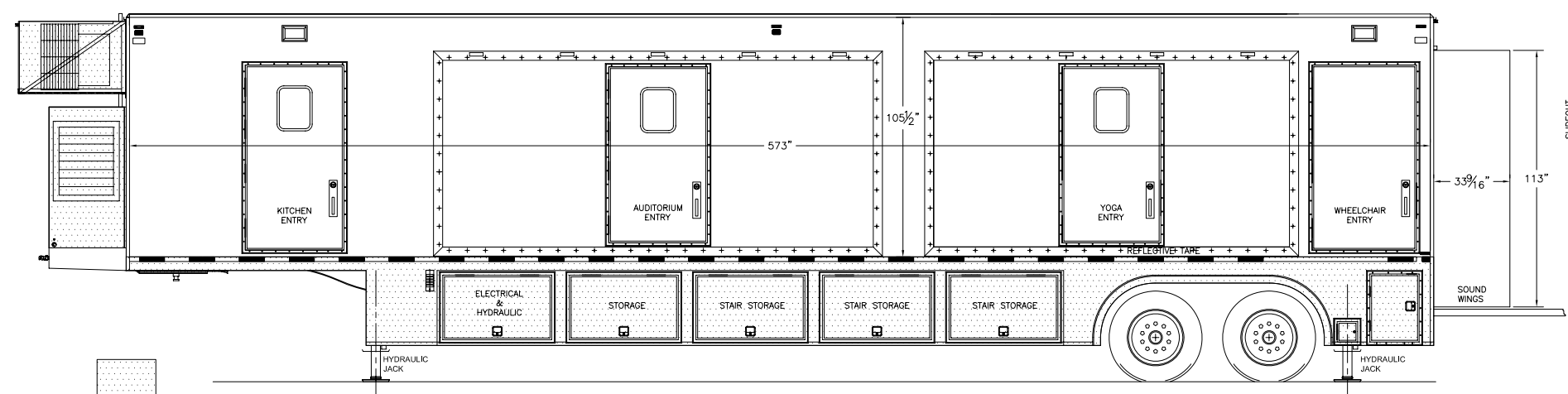
REVISIONS					DESCRIPTION
REV.	REV. DATE	CHK. BY	CHK. DATE	ENG.	
0					



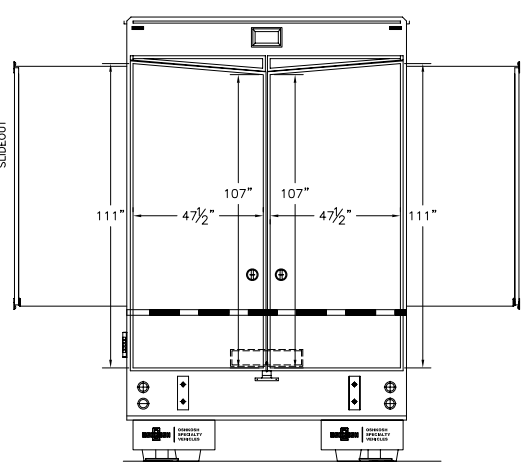
*ELEVATION VIEW
RIGHT SIDE
EXTERIOR*



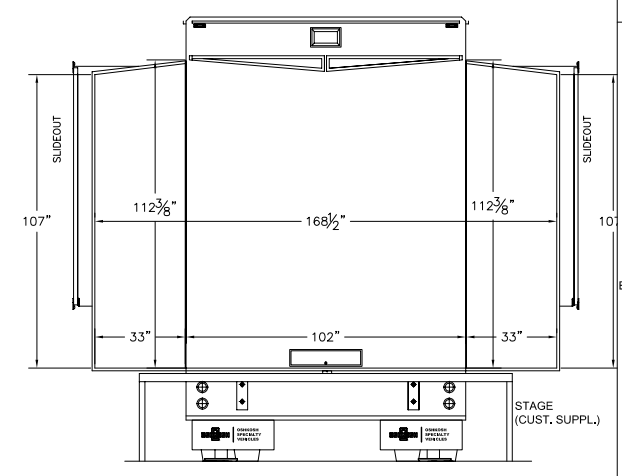
*ELEVATION VIEW
FRONT*



*ELEVATION VIEW
LEFT SIDE
EXTERIOR*



*ELEVATION VIEW
REAR
SOUND WINGS CLOSED*



*ELEVATION VIEW
REAR
SOUND WINGS OPEN*

NO GRAPHICS

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

CUSTOMER AUTHORIZATION	
COMPANY NAME:	
NAME (PRINT):	TITLE:
SIGNATURE:	DATE:

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SHEET NUMBER: 1 OF 1	REFERENCE DRAWING:	TITLE: GRAPHICS LAYOUT MOVING EXPERIENCES WELLNESS UNIT 8'-6" X 13'-6" X 48'-0" TRAILER	DATE: 23FEB07	SCALE: 3/8"=1'-0"
JOB#		OSHKOSH SPECIALTY VEHICLES	16745 S. LATHROP AVENUE HARVEY, IL, 60426 PHONE: (708) 596-5066 FAX: (708) 596-2480	CHECKED BY:
				DRAWING NUMBER: 10241-A29