

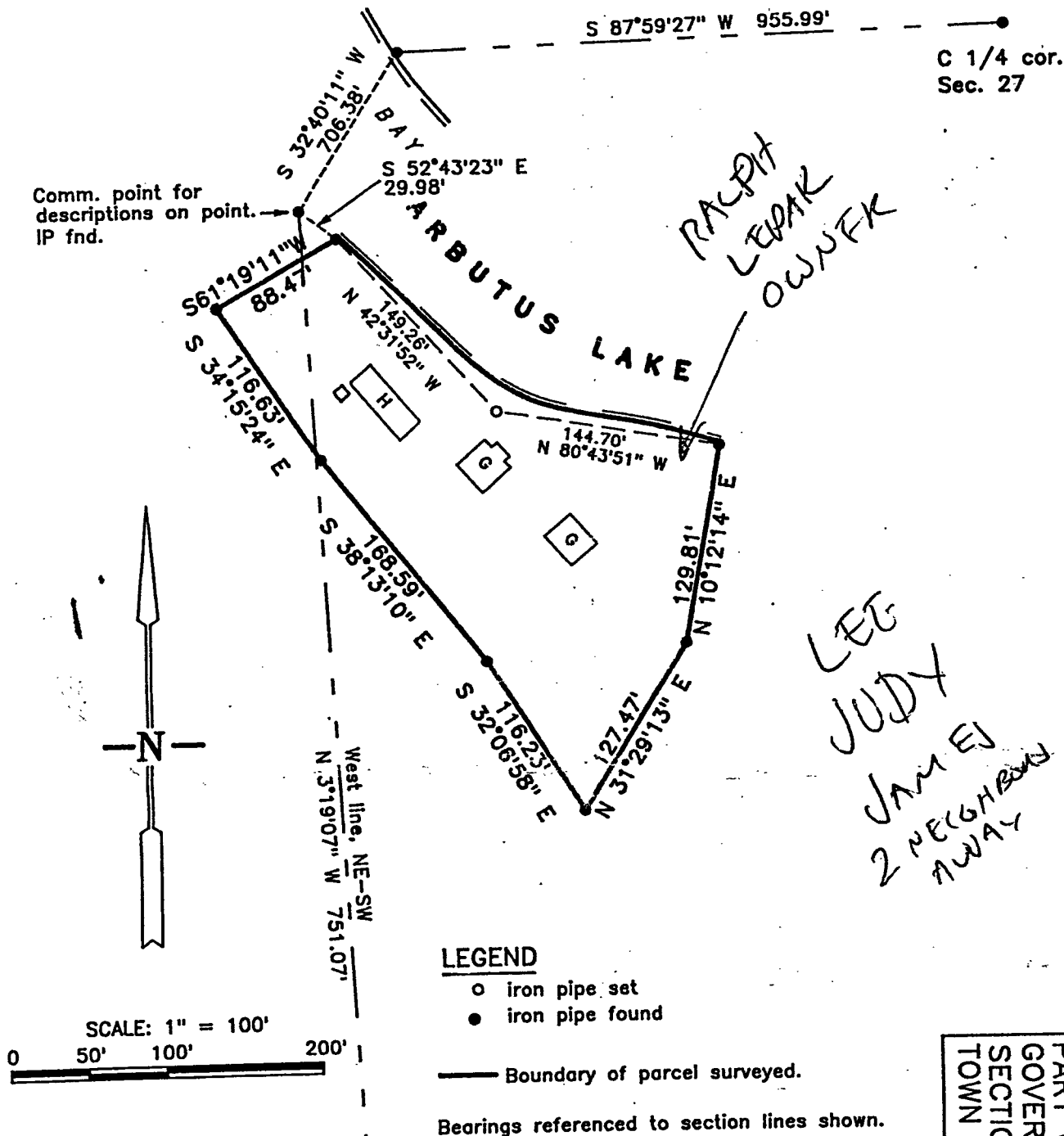
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DATE _____ BY _____

THOMAS R. ARNOTT, SURVEYOR, P.O. BOX 635, ANTIGO, WIS. 54409



CERTIFIED SURVEY MAP NO. _____

VOLUME -

27-34-13