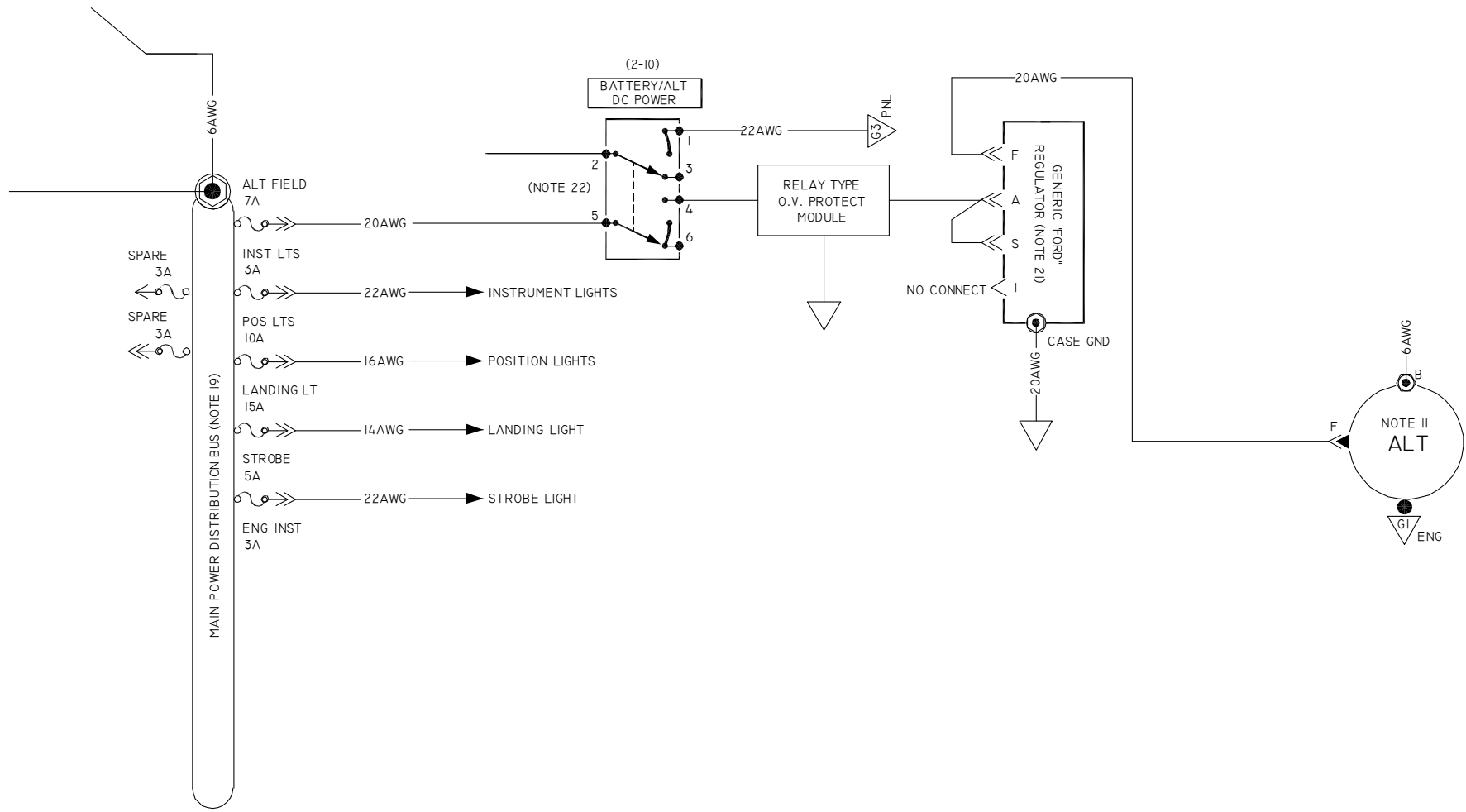


REV	DESCRIPTION OF REVISIONS	DATE/APPROVAL



			AEROELECTRIC CONNECTION PO Box 130, MEDICINE LODGE, KS 67104-0130	
			TITLE EXEMPLAR RELAY OV INST	
DRAWN	NAME	DATE	DRAWING NO.	REVISION
CHECK				DATE
PROJECT				
APPROVED			SCALE NOTED W/O	PAGE OF