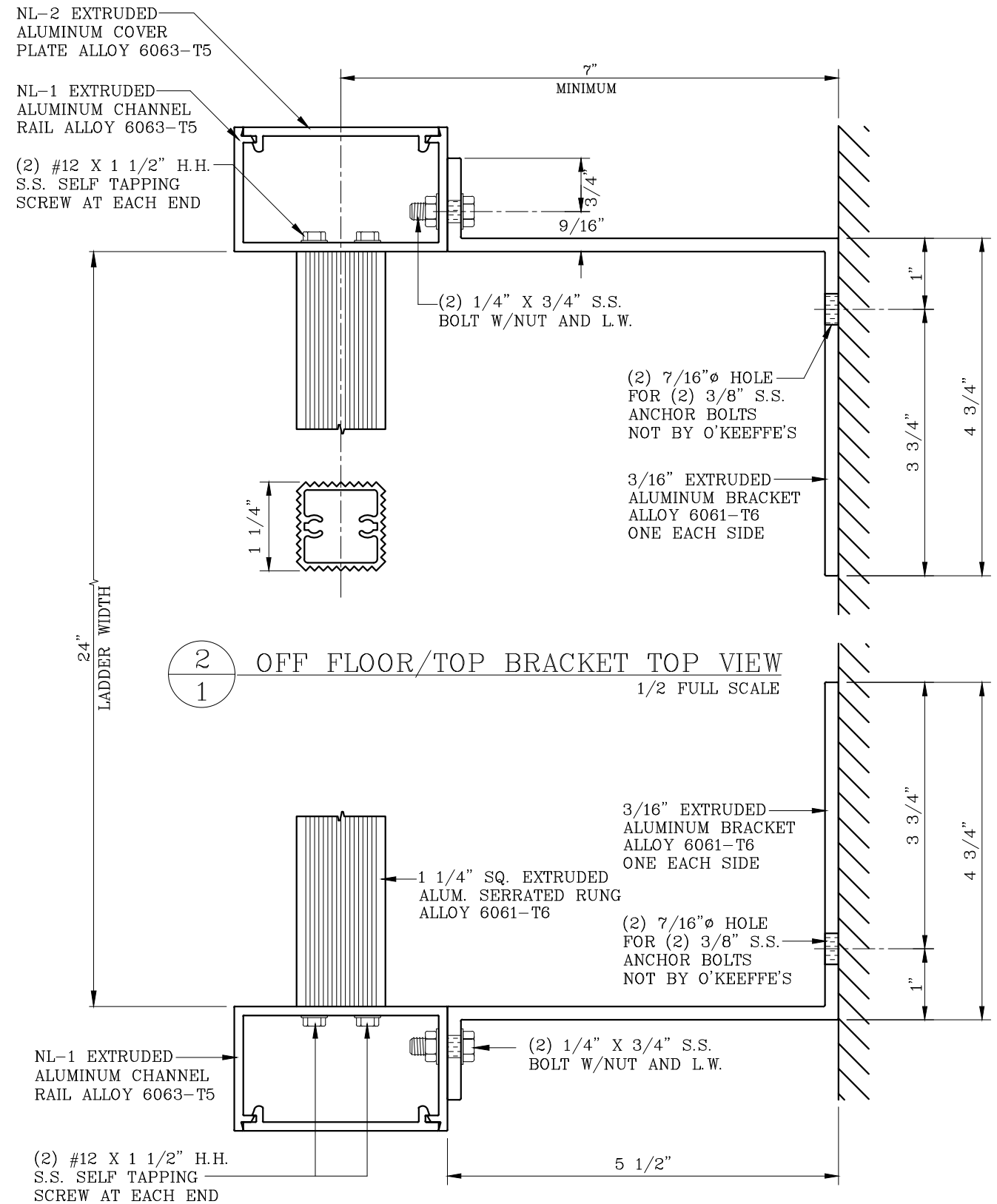


1 OFF FLOOR/TOP BRACKET SIDE VIEW  
1 1/2 FULL SCALE



DATE	REVISION:	FINISH:	PROJECT: STANDARD BRACKET	SALE NO. ---
			ADDRESS: ---	TM: ---
			CONTRACTOR: ---	PROJECT MANAGER: ---
			CONTACT: --- TEL.: ---	DATE: ---
				SHEET: 1 OF 1
				DRAWN: ---