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| moseal | STATE OF MISSOURI  OFFICE OF ADMINISTRATION  DIVISION OF FACILITIES MANAGEMENT, DESIGN AND CONSTRUCTION  **DRAWING FILE REQUEST/TRANSMITTAL** | | | | | | | | | | |  | | |  | | |
| PROJECT NUMBER (NEW) | | | D&C PROJECT MANAGER | | |
| **TO: DRAWING DOCUMENT MANAGER** | | | | | | | **FROM:** | | | | | | | | | DATE | |
| A/E CONSULTANT | | | | | | | | | | PROJECT TITLE/LOCATION | | | | | | | |
| CONTACT PERSON | | | | | | | | | | | | | TELEPHONE NUMBER     -   - | | | | |
| ELECTRONIC VERSION | | | DRAWING  DXF  AUTOCAD 2000  AUTOCAD 2002  AUTOCAD 2004 | | | | | | | | | | | | | | |
| WE ARE REQUESTING | | |
| PAPER VERSION | | | QUANTITY | | | D&C DRAWINGS  COPIES OF ATTACHED DRAWINGS | | | | | | | | | | | |
| WE ARE REQUESTING | | |
| TRANSMIT BY | | 3 ½” DISK | | | CD | | | E-MAIL | | | | | | | | | DATE NEEDED BY |
| WE ARE TRANSMITTING | | | | 3 ½” DISK | | | | | CD | | AS-BUILT MYLARS | | | PAPER | | | |
| **LABS #/FACILITY #/PROJECT #** | | | | **DRAWING DESCRIPTION** | | | | | | | | | | | | | |
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| **REMARKS** | | | | | | | | | | | | | | | | | |
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| **The attached drawings are FMDC’s best representation of the existing conditions of the facility. The consultant shall verify field conditions for accuracy and completeness.** | | | | | | | | | | | | | | | | | |

MO 300-1389 (03-05) ATTACH ADDITIONAL SHEETS, IF NECESSARY