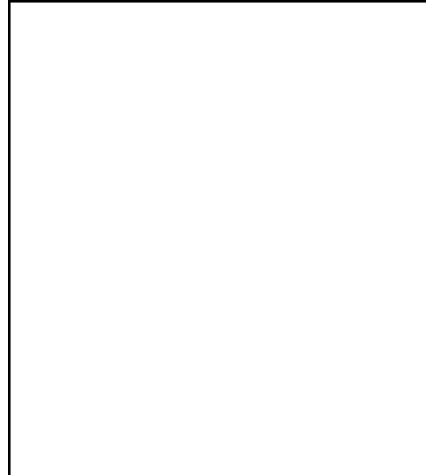
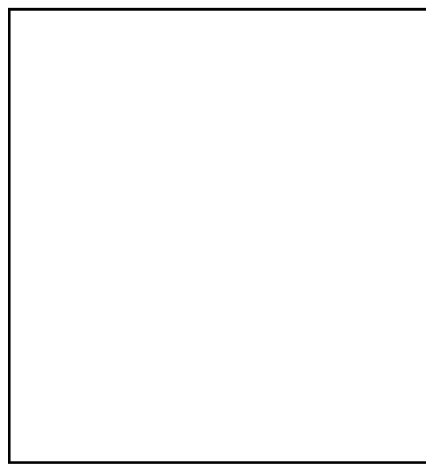
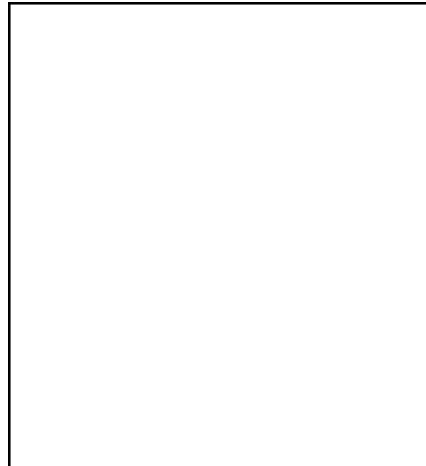
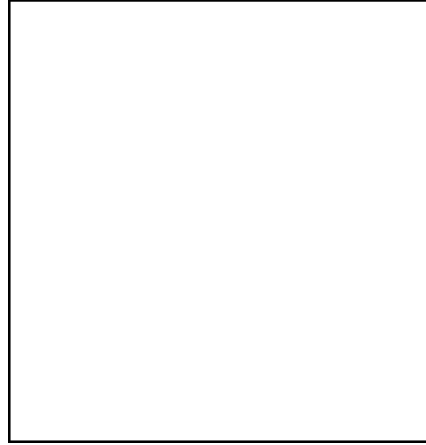


DATE _____

Family Court

Area Layout



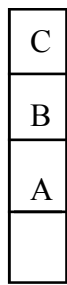
C

B

A (Nurse Housing)

First Aid

J K L M N O P Q R S



Nursing Housing

First Aid

J

K

L

M

N

O

P

Q

R

S

