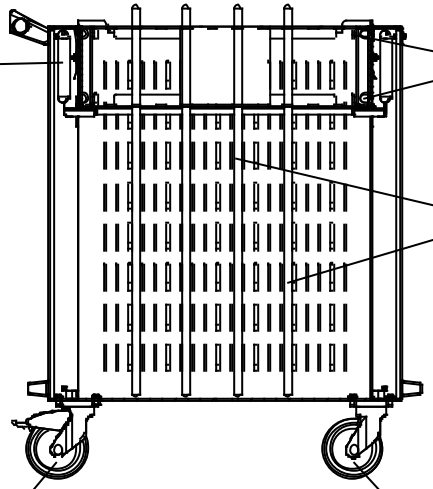
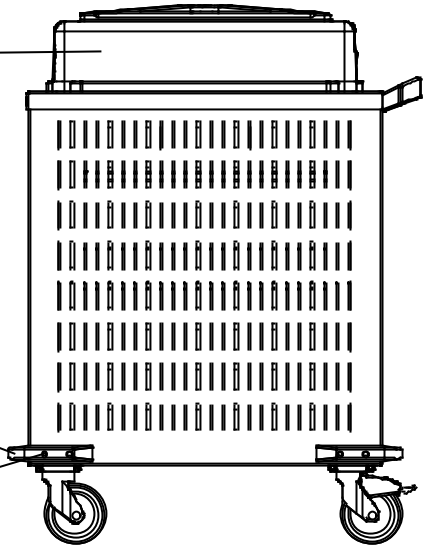
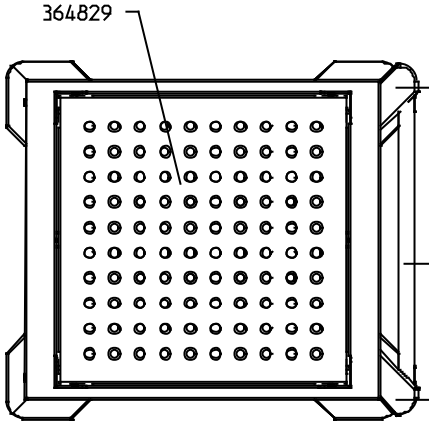
Schnitt A-A







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1			XX					XX.XX.XX	XXXX
Aenderungsdienst								Datum	BA
Aenderungsdienst									