

USE BALLPOINT PEN
WRITE ON HARD SURFACE

NOTE — THIS TAG MUST
ACCOMPANY THE UNIT(S)

1. UNITED STATES		2. FAA FORM 8130-3 AIRWORTHINESS APPROVAL TAG US Department of Transportation Federal Aviation Administration			3. SYSTEM TRACKING REF. NO. 248107	
4. ORGANIZATION:		LEARJET INC. ONE LEARJET WAY WICHITA, KS 67209 LK2R981K			5. WORK ORDER, CONTRACT OR INVOICE NO: 38911248107	
6. ITEM	7. DESCRIPTION	8. PART NO:	9. ELIGIBILITY*	10. QTY	11. SERIAL/BATCH NO.	12. STATUS/WORK
1	Alcohol Pump	2380104-2	T R V	1	527	Newly Overhauled
13. REMARKS WORK ORDER# 248107 PRESCRIBING THE ACTUAL WORK PERFORMED BY REPAIR STATION #LK2R981K IS ATTACHED Overhauled and Tested as per Learjet Eng.Dwg. #2380104 Rev. "B" 9-29-77. (Cure Date 3097)						
Limited use parts must normally be accompanied by maintenance history total time/total cycles/time since new						
14. NEW <input checked="" type="checkbox"/> NEWLY OVERHAULED <input type="checkbox"/> <small>Certifies that the new or newly overhauled part(s) identified above, except as otherwise specified in block 13 was (were) manufactured in accordance with FAA approved design data and airworthiness regulations. NOTE: In case of parts to be exported, the special requirements of the importing country have met.</small>			19. RETURN TO SERVICE IN ACCORDANCE WITH FAR 43.9 <small>Certifies that the work specified in block 13 (or attached) above was carried out in accordance with FAA airworthiness regulations and in respect to the work performed the part(s) is (are) approved for return to service.</small>			
15. SIGNATURE:		16. FAA AUTHORIZATION NO.:	20. AUTHORIZED SIGNATURE: <i>[Signature]</i>		21. CERTIFICATE NUMBER [REDACTED]	
17. NAME (TYPED OR PRINTED)		18. DATE	22. NAME (TYPED OR PRINTED) Lloyd Thompson		23. DATE 8-30-77	

FAA FORM 8130-3 (11-93)

* Optional installer must cross check eligibility with applicable technical data.

TAG — UNIT TRAVELLER WHITE FILE



A/C N# 47BA
 A/C S# 060
 IPC # _____

- PARTS REQ.
- CORE RETURN
- PARTS RETURN

PARTS REQUEST

WORK ORDER NUMBER	W.O. TYPE	SQUAWK
6009	NR	7

REQUESTED BY	DATE REQUESTED	RECEIVED BY	DATE RECEIVED	ORDER APPROVED	PURCHASE ORDER #	DUE DATE
POS	10-4	POS	10-4-99			

QTY.	PART NUMBER	DESCRIPTION	UNIT PRICE	TOTAL SALES	STATUS
1	4580	LAMP			

FREIGHT

TOTAL



A/C N# 47BA
 A/C S# 060
 IPC # _____

- PARTS REQ.
- CORE RETURN
- PARTS RETURN

PARTS REQUEST

WORK ORDER NUMBER	W.O. TYPE	SQUAWK
6009		12

REQUESTED BY	DATE REQUESTED	RECEIVED BY	DATE RECEIVED	ORDER APPROVED	PURCHASE ORDER #	DUE DATE
<i>[Signature]</i>	10/2/55	<i>[Signature]</i>	10/12			

QTY.	PART NUMBER	DESCRIPTION	UNIT PRICE	TOTAL SALES	STATUS
1	207-A	Pump Alcohol			
		std 7757			

FREIGHT TOTAL



A/C N# 476A
 A/C S# 35-060
 IPC # _____

- PARTS REQ.
 CORE RETURN
 PARTS RETURN

PARTS REQUEST

WORK ORDER NUMBER	W.O. TYPE	SQUAWK
6009	X	5

REQUESTED BY	DATE REQUESTED	RECEIVED BY	DATE RECEIVED	ORDER APPROVED	PURCHASE ORDER #	DUE DATE
<i>[Signature]</i>	9-24-99	10-4-99	<i>[Signature]</i>	<i>[Signature]</i>	992115	

QTY.	PART NUMBER	DESCRIPTION	UNIT PRICE	TOTAL SALES	STATUS
1	2625015-47	Rib Leading edge			
	2625015-44-45				
	602-5028-005				

FREIGHT

TOTAL



A/C N# 47BA
 A/C S# 35-060
 IPC # _____

- PARTS REQ.
 CORE RETURN
 PARTS RETURN

PARTS REQUEST

WORK ORDER NUMBER	W.O. TYPE	SQUAWK
6009	X	5

REQUESTED BY	DATE REQUESTED	RECEIVED BY	DATE RECEIVED	ORDER APPROVED	PURCHASE ORDER #	DUE DATE
<i>[Signature]</i>	10-6-99	<i>[Signature]</i>	10-6-99			

QTY.	PART NUMBER	DESCRIPTION	UNIT PRICE	TOTAL SALES	STATUS
100	CR3214-4-2	Cherry max Rivets			
150	CR3242-4-1	Cherry max Rivets			

FREIGHT

TOTAL



A/C N# N47BA
 A/C S# 060
 IPC # _____

- PARTS REQ.
 CORE RETURN
 PARTS RETURN

PARTS REQUEST

WORK ORDER NUMBER	W.O. TYPE	SQUAWK
6009	M	14

REQUESTED BY	DATE REQUESTED	RECEIVED BY	DATE RECEIVED	ORDER APPROVED	PURCHASE ORDER #	DUE DATE
PSS	10-7-99					

QTY.	PART NUMBER	DESCRIPTION	UNIT PRICE	TOTAL SALES	STATUS
1	2391162-2	Kit Act Repair			
	2 kits in stock				

FREIGHT TOTAL



A/C N# N47BA
 A/C S# 060
 IPC # _____

- PARTS REQ.
- CORE RETURN
- PARTS RETURN

PARTS REQUEST

WORK ORDER NUMBER	W.O. TYPE	SQUAWK
6009	X	19

REQUESTED BY	DATE REQUESTED	RECEIVED BY	DATE RECEIVED	ORDER APPROVED	PURCHASE ORDER #	DUE DATE
<i>[Signature]</i>		<i>[Signature]</i>		<i>[Signature]</i>	582183	Ground

QTY	PART NUMBER	DESCRIPTION	UNIT PRICE	TOTAL SALES	STATUS
1	2319116-4	GASKET			
		1 FOR WU			
		2 FOR 57"			
		MUNTAH			
		<i>[Signature]</i>			

FREIGHT TOTAL



Page: _____ of _____

Aircraft S/N: 010

Registration No: 24784

Work Order Discrepancy Sheet

W.O. # 6009 Written By: J. New Date: 10-1-99

Discrepancy #: 1 Authorization: _____ Date: _____

Discrepancy: Unusable engine (S/N) due to engine failure
at 10700 ft.

Functional Test/Test Flight Required? Yes No

Corrective Action: TRANSFERRED TO WOF 6056 #1
10-6-99
to perform test
8 times before

Part Removal Information:
Name: _____ P/N: 10-6-99 S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:
10-6-99

Corrected By: _____ Inspected By: _____

CE AVIONICS, INC.
 ORLANDO SANFORD AIRPORT
 1792 HANGAR ROAD
 SANFORD, FLORIDA 32773
 PHONE (407)323-0200 * FAX (407)321-3804

W06009

=====

WORK ORDER INVOICE

DEPT. # 01 10 E FA

INVOICE # 35974- 1

DATE 9/30/99

SUNJET AVIATION, INC.
 2841 FLIGHTLINE AVENUE
 SANFORD, FL 32773

A/C REG # 47BA
 MAKE: LEAR
 MODEL: 35A
 SERIAL: 060
 TT:
 PHONE NUMBER : 407-328-8440

UNIT

WO NO	TERMS	DATE IN	COMPLETED	PURCHASE ORDER	CUSTOMER
35974	** C.O.D. **	9/08/99	9/22/99	982023	SUNJA

SERVICE DESCRIPTION

1 GPS WILL NOT ACQUIRE SATELLITES. GPS-165 (S/N 82600895)

-----CORRECTIVE ACTION-----

Procured factory loaner GPS-165 (S/N 82600370) for use during repair.

FACTORY SERVICE: Updated software to Version 3.10. Upgraded the CPU board to MOD 1 status. Replaced lithium battery. Replaced OBS calibration variable resistor. Passed environmental and final ATE tests. Returned to service.

LABOR

LABOR .00 *

OTHER

DESCRIPTION	PRICE	AMOUNT
FEDX1 LOANER IN/OUT	47.50	47.50
FEDX REPAIR OUT/IN	29.00	29.00

ITEM OTHER 76.50 *

ITEM TOTAL AMOUNT 76.50 **

TOTAL PARTS .00

TOTAL LABOR .00

TOTAL OTHER 76.50

PAY THIS AMOUNT 76.50

The aircraft and/or component identified above was repaired and inspected in accordance with current regulations of the FAA and is approved for return to service. Pertinent details of the repair are on file at this facility.

SIGNATURE: *[Signature]*








() CRS OE4R411M

() CRS OE4D411M



SUNJET AVIATION, INC.

DATE: 9-20-99	W.O #: 6009		CARD CONTROL	PAGE 1 OF
CUSTOMER: Emmillin	MAKE & MODEL: Lear 35	TOTAL TIME:	HSP:	
ADDRESS:	SERIAL #: 60	TACH TIME:	HIDDEN DAMAGE:	
	REGISTRATION #: 47 BA	HOOR METER:	PRELIMINARY:	
CITY/STATE/EIP	DATE IN:	DATE OUT:	TOTAL LOGS.	FINAL REVIEW:
ENG #1 TIME:	#2:	#3:	#4:	APU:
ENG #1 CYC.:	#2:	#3:	#4:	APU:

CARD #	DESCRIPTION	DATE CLOSED	CLOSED BY
1	LH FUEL TANK LEAKS ⁵⁹⁸⁵	Transfer	to work 6056 #1
2	RH FUEL TANK LEAKS ⁵⁹⁸⁵	Transfer	work 6056 #2
3	GPS won't acquire ⁵⁹⁸⁵	10-6-99	F.T. <small>LOANER INSTALLED</small>
4	LH Eng weak at Altitude ^{x from 5985 #1}		
5	LH trailing edge flap outed flap touch <small>in air caused upper flap</small>	10-6-99	
6	RUDDER trim JWD.	9-30-99	
7	R/H TAXI LIGHT	10-4-99	P. SMITH
8	VAND SERVICE ALCOHOL	10-6-99	P. SMITH
9	FLAP INDICATION	10-6-99	
10	Fuel Quantity	10-6-99	
11	Pressurization	Transfer	SEE item #
12	Alcohol Pump leaking	Transfer	 10/12/99
13	L/H Red Light unsafe out	10-7-99	P. SMITH
14	L/H main gear Door Act leaking	Transfer	Transfer 6056 #3
15	Lube MLC & NLC	10-6-99	P. SMITH
16	Lube Flaps	10-6-99	P. SMITH
17	Aileron Felt Lube Rec	10-6-99	P. SMITH
18	LH ENGINE WEAK	10-6-99	
19	Blocked air leak AFT		 10/14/99

HF 11 HOUR #20 COPLOT SEAT NEEDS ADJUST THRU. work 6056



Page: _____ of _____

Aircraft S/N: 060

Registration No: N473A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 9-30-99

Discrepancy #: 6 Authorization: _____ Date: _____

Discrepancy: RUDDER TRIM GAUGE INSTANTANT

Functional Test / Test Flight Required? Yes No

Corrective Action:

Verified discrepancy removed RUDDER TRIM INDICATOR FROM PEDISTAL. FOUND WIRLS ON CONNECTOR FRAYED + BROKEN. REPLACED PINS FOR CONNECTOR + RE-INSTALLED. OP'S CHECK GOOD ALL WORK PERFORMED IAW LEAN MAINT. MANUALS CAPT. 27-20-05 + CAPT/20 FORWARDING RELIARS.

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 9-30-99 Inspected By: [Signature] 9-30-99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: JCS Date: _____

Discrepancy #: 7 Authorization: _____ Date: _____

Discrepancy: R/H TAXI/LANDING LIGHT INOP ✓

Functional Test/Test Flight Required? Yes No

Corrective Action: REMOVED LAMP RETAINER REMOVED & REPLACED LAMP.
INSTALLED RETAINER OPS CR SAT ALL FAW LEARNUM 33-40-21 ✓


Part Removal Information:

Name: LAMP P/N: 4580 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: LAMP P/N: 4580 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] Inspected By: [Signature]  10/4/99



Page: _____ of _____

Aircraft S/N: _____

Registration No: _____

Work Order Discrepancy Sheet

W.O. # 6009 Written By: W. B. [Signature] Date: 10-11-99

Discrepancy #: 20 Authorization: _____ Date: _____

Discrepancy: CO PILOT SEAT NEEDS ADJUSTMENT UP + DOWN - FEEL
& AFT

Functional Test/Test Flight Required? Yes No

Corrective Action:
REMOVED CO-PILOTS SEAT ADJUSTED HYDRO-LOC SERVICE
FOR FEEL - AFT COULD NOT GAIN ACCESS AT THIS
TIME FOR VERTICAL SEAT ADJUSTMENT 10-12-99. [Signature]
TRANSFERRED TO WO# 6056 #4

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: _____ Inspected By: _____



Page: _____ of _____

Aircraft S/N: 060

Registration No: N473A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 10-12-99

Discrepancy #: 23 Authorization: _____ Date: _____

Discrepancy: 150 Hr. Engine DUE #1 + #2

Functional Test/Test Flight Required? Yes No

Corrective Action:

PERFORMED 150 HR ENGINE INSPECTION FOR
LH + RH ENGINES. SOAP SAMPLES TAKEN
FILTERS + O-RINGS REPLACED. RAN ENGINES
NO LEAKS NOTED. TIPPED OFF WITH 1QT EA. ENGINE
MOBIL JET II OIL. REF 24-31-01, 29-10-00

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-12-99

Inspected By: [Signature] 10-12-99





Page: _____ of _____

Aircraft S/N: 060

Registration No: N4784

Work Order Discrepancy Sheet

W.O. # 6009 Written By: WJ Date: 10-12-99

Discrepancy #: 22 Authorization: _____ Date: _____

Discrepancy: Perform EDS VISUAL INSPECTION

Functional Test/Test Flight Required? Yes No

Corrective Action:

GAINED ACCESS TO NOSE EMERGENCY POWER
SUPPLY REMOVED + VISUALLY INSPECTED
COND CHECK GOOD OP'S CHECK GOOD ALL WORK
PERFORMED PER LEAD MAINT MANUAL CHPT.
24-33-00

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By:  10-12-99 Inspected By:  10-12-99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N4784

Work Order Discrepancy Sheet

W.O. # 6009 Written By: WA Date: 10-12-99

Discrepancy #: 22 Authorization: _____ Date: _____

Discrepancy: Perform EPS VISUAL INSPECTION

Functional Test/Test Flight Required? Yes No

Corrective Action:

GAINED ACCESS TO NOSE EMERGENCY POWER
SUPPLY REMOVED + VISUALLY INSPECTED
COMP CHECK GOOD. OP'S CHECK GOOD. ALL WORK
PERFORMED PER LEAD MAINT. MANUAL CHPT.
24-33-00


Part Removal Information:


Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By:  10-12-99

Inspected By:  10-12-99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N473A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 10-12-99

Discrepancy #: 23 Authorization: _____ Date: _____

Discrepancy: 150 HR. ENGINE DUE #1 + #2

Functional Test/Test Flight Required? Yes No

Corrective Action:

PERFORMED 150 HR ENGINE USE FOR
LH + RH ENGINES. SOAP SAMPLES TAKEN
FILTERS + O-RINGS REPLACED. RAW ENGINES
NO LEAKS NOTED. STOPPED OFF WITH 1QT EA. ENGINE
MOBIL JET II OIL. REF 24-31-01, 29-10-00

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: _____



10-12-99

Inspected By: _____



10-12-99



Page: _____ of _____

Aircraft S/N: 35-060


Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 9-24-99

Discrepancy #: 5 Authorization: _____ Date: _____

Discrepancy: LH Trailing edge flap upper flap track inboard rib cracked at upper flange

Functional Test/Test Flight Required?  Yes No

Corrective Action:

Removed LH trailing edge flap I.A.W Learjet MM 27-50-01. Evaluated cracked upper flange on inboard rib. Removed upper trailing edge skin to gain access to rivet attachments I.A.W Learjet SRM-4 Chapter 51-40-02. Removed cracked rib I.A.W Learjet SRM-4 Chapter 51-40-02. Located and drilled new rib I.A.W Learjet SRM-4 Chapters 51-40-02 and 51-70-02. Installed new rib and reinstalled upper trailing edge skin I.A.W Learjet SRM-4 Chapters 51-40-02 and 51-30-02. Reinstalled LH trailing edge flap I.A.W Learjet MM 27-50-01. Function Test Flap I.A.W Learjet MM 27-51-00, Flap checked good.



Part Removal Information:

Name: Rib Leading Edge P/N: 2625015-47 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: Rib Leading Edge P/N: 2625015-75-575 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By:  10-7-99 Inspected By:  10/7/99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N478A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: J Mei Date: 09-27-99

Discrepancy #: 3 Authorization: _____ Date: _____

Discrepancy: (TRANSFERED FROM WO# 5985 #5) GPS WILL NOT ACQUIRE SATELLITES

Functional Test Test Flight Required? Yes No

AVIOWICS

Corrective Action:

REMOVED LEARNED GPS CONTROL HEAD AND
INSTALLED ORIGINAL UNIT AFTER REPAIRS.
OPS CHECK GOOD PER GARMIN MAINT. MANUAL

Part Removal Information:

Name: CONTROL HEAD P/N: 011-00106-00 S/N: 82600895
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: CONTROL HEAD P/N: 011-00106-00 S/N: 82600395
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

SEE 5985 FOR ORIGINAL STAMPS

Corrected By: FT 10-6-99 Inspected By: ED. B 10-6-99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: J. Mui Date: 09-29-99

Discrepancy #: 2 Authorization: _____ Date: _____

Discrepancy: (TRANS FERRD FROM WO# 5985 #2) FUEL LEAKS ON UPPER and LWR SURFACE OF RIGHT Hand wing

Functional Test/Test Flight Required? Yes No

Corrective Action: TRANSFERED TO WO# 6056 #2

Part Removal Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Parts Installation Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Additional Parts Information:

Corrected By: _____ Inspected By: _____



Page: _____ of _____

Aircraft S/N: 060

Registration No: N478A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: J. Mai Date: 09-27-99

Discrepancy #: 1 Authorization: _____ Date: _____

Discrepancy: (TRANSFERRED FROM WO # 5985) FUEL LEAK ON UPPER and LOWER SURFACE OF LEFT HAND WING.

Functional Test/Test Flight Required? Yes No

Corrective Action: TRANSFERRED TO WO# 6056 #1

Part Removal Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Parts Installation Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Additional Parts Information:

Corrected By: _____ Inspected By: _____

1604 Hangar Road
Building 333
Sanford, FL 32773



(407) 328-8440
Fax (407) 328-8442

CUSTOMER: McMillin
ADDRESS: _____

WORKORDER #: 6009

A/C MAKE: Rean
A/C REG. #: N47BA

A/C MODEL: ~~35A~~ 35
A/C SERIAL #: 60

I hereby authorize the following repair work to be done along with the necessary material, and hereby grant Sunjet Aviation, Inc. and/or Sunjet Aviation, Inc. employees permission to operate and fly the aircraft herein described for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on the above aircraft to secure the amount of repairs thereto. Sunjet Aviation, Inc. will not be held responsible for loss or damage to the aircraft or articles left in the aircraft in case of fire, theft, or any other cause beyond Sunjet Aviation, Inc.'s control.

KEYS TO THIS AIRCRAFT MUST ACCOMPANY THIS FORM

TELEPHONE NUMBER FOR CONTACT: Work: _____
Home: _____

BRIEF DESCRIPTION OF WORK DESIRED: X from w/o \$ 5985

OVERTIME APPROVAL: YES NO ETD _____

ALL CUSTOMER FURNISHED PARTS WILL BE SUBJECT TO A 15% CHARGE OF SUGGESTED LIST PRICE OF NEW, OVERHAULED OR REPAIRED PARTS PLUS INSTALLATION COST.

ALL CHARGES FOR PARTS AND LABOR ARE PAYABLE UPON COMPLETION OF WORK

METHOD OF PAYMENT TO BE USED (CHECK ONE):

AMERICAN EXPRESS _____ CASH/CHECK _____
VISA/MASTERCARD _____ MULTISERVICE _____

CREDIT CARD NUMBER: _____ EXP. DATE: _____

AUTHORIZATION SIGNATURE: _____
DATE: 9-20-99

1604 Hangar Road
Building 333
Sanford, FL 32773



(407) 328-8440
Fax (407) 328-8442

CUSTOMER: McMillan
ADDRESS: _____

WORKORDER #: 6009

A/C MAKE: Rear
A/C REG. #: N473A

A/C MODEL: ~~35A~~ 35
A/C SERIAL #: 60

I hereby authorize the following repair work to be done along with the necessary material, and hereby grant Sunjet Aviation, Inc. and/or Sunjet Aviation, Inc. employees permission to operate and fly the aircraft herein described for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on the above aircraft to secure the amount of repairs thereto. Sunjet Aviation, Inc. will not be held responsible for loss or damage to the aircraft or articles left in the aircraft in case of fire, theft, or any other cause beyond Sunjet Aviation, Inc.'s control.

KEYS TO THIS AIRCRAFT MUST ACCOMPANY THIS FORM

TELEPHONE NUMBER FOR CONTACT: Work: _____
Home: _____

BRIEF DESCRIPTION OF WORK DESIRED: X from w/o # 5985

OVERTIME APPROVAL: YES NO ETD _____

ALL CUSTOMER FURNISHED PARTS WILL BE SUBJECT TO A 15% CHARGE OF SUGGESTED LIST PRICE OF NEW, OVERHAULED OR REPAIRED PARTS PLUS INSTALLATION COST.

ALL CHARGES FOR PARTS AND LABOR ARE PAYABLE UPON COMPLETION OF WORK

METHOD OF PAYMENT TO BE USED (CHECK ONE):

AMERICAN EXPRESS _____ CASH/CHECK _____
VISA/MASTERCARD _____ MULTISERVICE _____

CREDIT CARD NUMBER: _____ EXP. DATE: _____

AUTHORIZATION SIGNATURE: _____
DATE: 9-20-99



SUNJET AVIATION, INC.

DATE: 9-20-99		W.O #: 6009		CARD CONTROL		PAGE 1 OF 1	
CUSTOMER: McMillin		MAKE & MODEL: Lear 35		TOTAL TIME:		HBP:	
ADDRESS:		SERIAL #: 60		TACH TIME:		HIDDEN DAMAGE:	
		REGISTRATION #: 47 BA		HOUR METER:		PRELIMINARY:	
CITY/STATE/ZIP		DATE IN: DATE OUT:		TOTAL LOGS.		FINAL REVIEW:	
ENG #1 TIME:		#2:		#3:		#4:	
ENG #1 CYC.:		#2:		#3:		#4:	

CARD #	DESCRIPTION	DATE CLOSED	CLOSED BY
1	LH FUEL TANK LEAKS ⁵⁹⁸⁵	Transfer	10/20/99 w/ 6056 #1
2	RA FUEL TANK LEAKS ⁵⁹⁸⁵	Transfer	w/ 6056 #2
3	GPS WON'T ACQUIRE * 5985	10-6-99	F.T. <i>LOANER INSTALLED</i>
4	LH Eng weak at Altitude ^{x from 5985 #1}		
5	LH TRAILING edge FLAP OUTED FLAP TRUCK <i>W/AD AIR CAPTED UPPER FLANGE</i>	10-6-99	
6	RODDER TRIM JUD.	9-30-99	
7	R/H TAXI LIGHT	10-4-99	P. SMITH
8	VAND SERVICE ALCOHOL	10-6-99	P. SMITH
9	FLAP INDICATION	10-6-99	
10	Fuel QUANTITY	10-6-99	
11	Pressurization	Transfer	SEE item #
12	Alcohol Pump leaking	Transfer	
13	L/H Red Light unsafe out	10-7-99	P. SMITH
14	L/H main gear Door Act leaking	Transfer	Transfer 6056 #3
15	Lube M/G & N/G	10-6-99	P. SMITH
16	Lube Flaps	10-6-99	P. SMITH
17	Ailerons Felt Lube Due	10-6-99	P. SMITH
18	LH ENGINE WEAR	10-6-99	
19	Blocked Air LEAK AFT		

HEI1 Hour 1#20 COPILOT SEAT NEEDS ADJUST TRANS. w/ 6056



Page: _____ of _____

Aircraft S/N: 060

Registration No: N472A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 9-30-99

Discrepancy #: 6 Authorization: _____ Date: _____

Discrepancy: Rudder Trim Gauge Inoperative

Functional Test/Test Flight Required? Yes No

Corrective Action:

Verified Discrepancy Removed Rudder Trim Indicator From Pedestal. Found wires on connector frayed + broken. Replaced pins for connector + re-installed. OP's check good all work performed in accordance with manual Chpt. 27-20-05 + Chpt. 20 Forwarding repairs.

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 9-30-99

Inspected By: [Signature] 9-30-99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: JOS Date: _____

Discrepancy #: 7 Authorization: _____ Date: _____

Discrepancy: R/H TAXI/LANDING LIGHT INOP ✓

Functional Test/Test Flight Required? Yes No

Corrective Action:
REMOVED LAMP RETAINER REMOVED & REPLACED LAMP.
INSTALLED RETAINER OPS OK SAT ALL FAW LEARN MM 33-40-21 ✓


Part Removal Information:

Name: LAMP P/N: 4580 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: LAMP P/N: 4580 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] Inspected By: [Signature]  10/4/99



Page: _____ of _____

Aircraft S/N: _____

Registration No: _____

Work Order Discrepancy Sheet

W.O. # 6009 Written By: W. Bismuth Date: 10-11-99

Discrepancy #: 20 Authorization: _____ Date: _____

Discrepancy: COPILOT SEAT NEEDS ADJUSTMENT UP + DOWN - FORH
& AFT

Functional Test/Test Flight Required? Yes No

Corrective Action:
REMOVED CO-PILOT'S SEAT ADJUSTED HYDRO-LOC SERVICE
FOR FORH - AFT COULD NOT GAIN ACCESS AT THIS
TIME FOR VERTICAL SEAT ADJUSTMENT 10-12-99. DJ
TRANSFERRED TO WO# 6056 #4

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: _____ Inspected By: _____



Page: _____ of _____

Aircraft S/N: 060

Registration No: N478A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 10-6-99

Discrepancy #: 18 Authorization: _____ Date: _____

Discrepancy: FLIGHT CREWS SQUALL LH ENGINE WEAR AT CRUISE (AT ALTITUDE)

Functional Test Test Flight Required? Yes No

Corrective Action:

VERIFIED DISCREPANCY. GAINED ACCESS TO LH FUEL COMPUTER REMOVED AFT COVER RAW AIRCRAFT AT 10% POWER OF THE DAY TARGET 94% N1. ENGINE ONLY 86%. ADJUSTED FR/MN SCHEDULE + ENGINE FLAT RATE ADJUSTMENT. ENGINES MATCH AT 94.5% N1 NO THROTTLE SPLIT AT POWER. RE-INSTALLED + SECURED LH FUEL COMPUTER. ALL POWER CHECKS GOOD. ALL WORK PERFORMED IN ALLIED SIGNAL LIGHT MAINT. MANUAL CHPT. 72-00-00 PGS. 512-531

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-99 Inspected By: [Signature] 10-6-99





Page: _____ of _____

Aircraft S/N: 060

Registration No: N4724

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 10-12-99

Discrepancy #: 21 Authorization: _____ Date: _____

Discrepancy: PERFORM LH + RH FWD ENGINE
MOUNT INSPECTION (FORWARD) IAW AD 87-02-06 PARA A

Functional Test/Test Flight Required? Yes No

Corrective Action:
PERFORMED LH + RH ENGINE MOUNT
INSPECTION (FORWARD) IAW AD 87-02-06 PARA A
NO DEFECTS NOTED AT THIS TIME

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-12-99 Inspected By: [Signature] 10-12-99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N478A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 10-7-99

Discrepancy #: 19 Authorization: _____ Date: _____

Discrepancy: BLUES AIR LEAKS IN INTER POOL
PIPING AFT FUSelage ACCESS.

Functional Test/Test Flight Required? Yes No P.O.O.

Corrective Action: Leaked air & replaced GASKET IAW LEAR 35A MM
36-10-00



Part Removal Information:

Name: GASKET P/N: 2319116-4 S/N: NA
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: GASKET P/N: 2319116-4 S/N: NA
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature]  Inspected By: [Signature] 



Page: _____ of _____

Aircraft S/N: 60

Registration No: N4784

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 10-1-99

Discrepancy #: 11 Authorization: _____ Date: _____

Discrepancy: PRESSURIZATION WEAK WITH ANTI-ICE SELECTED + THROTTLES RETARDED

Functional Test Test Flight Required? Yes No

Corrective Action: RAN AIRCRAFT, INVESTIGATED BLEED LINES IN AFT TAIL CASE AREA. FOUND MAIN BLEED TO INTERFERE WITH V-CRAWL GASKET LEADING SIDE ITEM # 19

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: _____ Inspected By: _____



Page: _____ of _____

Aircraft S/N: 060

Registration No: N478A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: PJS Date: 10-6-99

Discrepancy #: 8 Authorization: _____ Date: _____

Discrepancy: check and service Alcohol system

Functional Test/Test Flight Required? Yes No

Corrective Action:

Serviced Alcohol system with 2gals of methanol Alcohol. ops checked Anti Ice system found Alcohol to be coming from Pump weep hole. All work done E/A/W LEARJET 35/35A M/M Chapter 12-10-08


Part Removal Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Parts Installation Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-99 Inspected By:  10/7/99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: PLS Date: 10-6-99

Discrepancy #: 9 Authorization: _____ Date: _____

Discrepancy: Flap Ind

Functional Test Test Flight Required? Yes No

Corrective Action:
REMOVED TRIM CONTROL PANEL (CENTER PEDASTAL)
RAN FLAP SYSTEM 8°-20°-30°-40°. ADJUSTED
FLAP ZERO LIMIT. CHECKED SYSTEM. ALL
ANGLES WELL WITHIN LIMITS. ~~ALL WORK~~
RE-INSTALLED TRIM PANEL. ALL WORK PERFORMED
IAW LEAR MAINT. MANUAL CPT. 27-51-09

Part Removal Information:


Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By:  10-6-99

Inspected By:  10/7/99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: Pgs Date: 10-6-99

Discrepancy #: 10 Authorization: _____ Date: _____

Discrepancy: Fuel quantity reads zero when total selected

Functional Test/Test Flight Required? Yes No

Corrective Action:

Inspected fuel quantity indication system / transducer system
fuel "zero" reading when totalized out - problem intermittent
removed selector switch P/N R655 B125 S/N P-2/B112 FOR OVERHAUL
installed selector switch P/N R655 B125 S/N 4-46 / OVS CITERIC - Crown
functional check good / on installed lower switch / 10-6-99
All work done I/Alas LearJet m/m Chapter 28-40-0

Part Removal Information:

Name: SELECTOR SWITCH P/N: R655 B125 S/N: P-2/3112
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: SELECTOR SWITCH P/N: R655 B125 S/N: 4-46
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: (Signature) 10-6-99 Inspected By: (Signature) 10/6/99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: PSS Date: 10-6-99

Discrepancy #: 12 Authorization: _____ Date: _____

Discrepancy: ANTI ice Alcohol Pump leaking AT Pump weep hole
P.O.O.

Functional Test/Test Flight Required? Yes No



Rec'd. SA 10-11-99
P.O.O.
(P. SMITH)

Corrective Action:

Removed and Replaced Alcohol Pump IAC
LEAF 35A MM 30-50-02. ops check Good

Part Removal Information:

Name: Pump P/N: 207-A S/N: 7353
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: Pump P/N: 2380104-2 S/N: 527
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: _____



10/12/99

Inspected By: _____



10/12/99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: RSS Date: 10-6-99

Discrepancy #: 13 Authorization: _____ Date: _____

Discrepancy: 2/4 Red gear unsafe light inop.

Functional Test/Test Flight Required? Yes No

Corrective Action:

Replaced burned out Bulb. ops checked in test mode and with gear door switch system operates normally at this time All work Done I/A/W LEARJET 35/35A M/M Chapter 32-30-01

Part Removal Information:

NEEDS BUB #

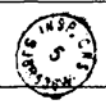
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-99 Inspected By: [Signature] 10/6/99





Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: Phillip Smith Date: 10-6-99

Discrepancy #: 15 Authorization: _____ Date: _____

Discrepancy: ABC Lube Due (All three)

Functional Test/Test Flight Required? Yes No

Corrective Action:
Completed Landing Gear Lube T/A/W
Lear Jet 35/35A m/m Chapter 12.05-00

Part Removal Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Parts Installation Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-99 Inspected By: [Signature] 10/6/99





Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: RSB Date: 10-6-99

Discrepancy #: 16 Authorization: _____ Date: _____

Discrepancy: Flap Lube Acc.

Functional Test/Test Flight Required? Yes No

Corrective Action:
Completed flap lube. All work done I/AW
LEAR Jet 35/35A M/M Chapter 12-05-00

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-99 Inspected By: [Signature] 10/6/99





Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: PGS Date: 10-6-99

Discrepancy #: 17 Authorization: _____ Date: _____

Discrepancy: Aileron Felt Lube Due

Functional Test/Test Flight Required? Yes No

Corrective Action:
Complied with Aileron Felt Lube
All work Done / A/w LearJet M/m
chapter 12-05-00

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-99 Inspected By: 10/6/99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N477A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 10-12-89

Discrepancy #: 23 Authorization: _____ Date: _____

Discrepancy: 150 HA. AUGURINE DUE #1 & #2

Functional Test/Test Flight Required? Yes No

Corrective Action:
PERFORMED 150 HA AUGURINE 1050? FOR
LOT # HA AUGURINE. SOME SAMPLES TAKEN
FILTERS - OILS REPLACED. NEW AUGURINE
NO LEAKS NOTED. SHUT OFF WITH 1QT OIL. CHANGE
ADDITION TO OIL.

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-17-89 Inspected By: [Signature] 10-18-89





Page: _____ of _____

Aircraft S/N: 060

Registration No: 101-54

Work Order Discrepancy Sheet

W.O. # 6009 Written By: WA Date: 10-12-99

Discrepancy #: 22 Authorization: _____ Date: _____

Discrepancy: Perform FCS VISUAL INSPECTION

Functional Test/Test Flight Required? Yes No

Corrective Action:
Ground A/C to 1059 Emergency Power
Supply removed & visually inspected
Supply checked good DP's checked good
Performed and lead wire removed part.
24-35-00



Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By:  10-17-99 Inspected By:  10-12-99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N4724

Work Order Discrepancy Sheet

W.O. # 6007 Written By: [Signature] Date: 10-8-99

Discrepancy #: 21 Authorization: _____ Date: _____

Discrepancy: Perform LH & RH Fuselage Mount
Mount 1A5P Refer AD 87-07-010 Part 2

Functional Test/Test Flight Required? Yes No

Corrective Action:
Perform LH & RH Fuselage Mount
Installation (FORWARD) 1A5P AD 87-07-010 Part 2
NO DEFECTS NOTED AT THIS TIME.

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-21-99 Inspected By: [Signature] 10-2-99





Page: _____ of _____

Aircraft S/N: _____

Registration No: _____

Work Order Discrepancy Sheet

W.O. # 6056 Written By: W Date: _____

Discrepancy #: 21 Authorization: _____ Date: _____

Discrepancy: 21 - 30 - NEEDS TO BE ADJUSTED UP + DOWN - 1/2"

Functional Test/Test Flight Required? Yes No

Corrective Action:

Adjusted Co-Pilot's Seat - Adjusted Hydraulic Line -
For Pilot's Seat - Build at 10-12-19. 24

TRANSFERRED TO WO# 6056 #4

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: _____ Inspected By: _____



Page: _____ of _____

Aircraft S/N: 060

Registration No: N477A

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 10-6-99

Discrepancy #: 13 Authorization: _____ Date: _____

Discrepancy: FLIGHT CREWS SQUAWK LH ENGINE
WAAK AT CRUISE (AT ALTITUDE)

Functional Test Test Flight Required? Yes No

Corrective Action:
VERIFIED DISCREPANCY. GAINED ACCESS TO LH FUEL
COMPUTER REMOVED AFT COVER RAW AIRCRAFT AT
N¹ POWER OF THE DAY TARGET 94% N¹ ENGINE ONLY
86% ADJUSTED FR/MN SCHEDULE + ENGINE FEA-
RATE ADJUSTMENT. ENGINES MATCH AT 94.5% N¹
NO THROTTLE SPLIT A-POWER. RE-INSTALLED +
SECURED LH FUEL COMPUTER. ALL POWER CHECKS GOOD.
ALL WORK PERFORMED IAW ALLIED SIGNAL LIGHT
MAINT. MANUAL CNPT. 72-00-00 PGS. 512 - 531

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-99 Inspected By: [Signature] 10-6-99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: PPS Date: 10-6-79

Discrepancy #: 17 Authorization: _____ Date: _____

Discrepancy: Ailerons Felt tube Due

Functional Test/Test Flight Required? Yes No

Corrective Action:
Inspected with Ailerons Felt tube
All work done T/A/W BearJet in/m
chapter 12-05-00

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-79 Inspected By: [Signature] 10/6/79





Page: _____ of _____

Aircraft S/N: _____

Registration No: N4721A

Work Order Discrepancy Sheet

W.O. # 1009 Written By: ASB Date: 10-6-77

Discrepancy #: 16 Authorization: _____ Date: _____

Discrepancy: Flap Lube Duc.

Functional Test/Test Flight Required? Yes No

Corrective Action:
Completed flap lube. All work done. This
for Jet 25/35H M/M 400, Sta 12-05-00

Part Removal Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Parts Installation Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-77 Inspected By: [Signature] 10/6/77



Page: _____ of _____

Aircraft S/N: 240

Registration No: N41211

Work Order Discrepancy Sheet

W.O. # 6009 Written By: Phillip Smith Date: 10-6-99

Discrepancy #: 15 Authorization: _____ Date: _____

Discrepancy: M/B Lube Due (All three)

Functional Test/Test Flight Required? Yes No

Corrective Action:
Completed M/Landing Gear Lube 2/1/99
done by 25/2511 m/m completed 12.05.00

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-99 Inspected By: 10/6/99



Page: _____ of _____

Aircraft S/N: 17-0

Registration No: N7172A

Work Order Discrepancy Sheet

W.O. # 6007 Written By: RPS Date: 12-6-77

Discrepancy #: 4 Authorization: _____ Date: _____

Discrepancy: 11 11.6 Door Actuator Has Slight Leak.

Functional Test/Test Flight Required? Yes No

*K-13
12-5-77
To: RPS
RPS*

Corrective Action: TRANSFER TO WO# 6056 #3

Part Removal Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Parts Installation Information:

Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Additional Parts Information:

Corrected By: _____ Inspected By: _____



Page: _____ of _____

Aircraft S/N: 060

Registration No: 1047211

Work Order Discrepancy Sheet

W.O. # 0009 Written By: PSS Date: 10-6-99

Discrepancy #: 12 Authorization: _____ Date: _____

Discrepancy: 1/4 Red gear axle Light up.

Functional Test/Test Flight Required? Yes No

Corrective Action:

Inspection carried out. Red. ops checked in
port side and with gear door switch system
operates normally at this time. All work done until
master before sign flight card.

Part Removal Information:

*NEW
DATE #*

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: Deliver until 10/6/99 Inspected By: 10/6/99



Page: _____ of _____

Aircraft S/N: _____

Registration No: N47211

Work Order Discrepancy Sheet

W.O. # 5009 Written By: PSS Date: 12-6-77

Discrepancy #: 12 Authorization: _____ Date: _____

Discrepancy: Notice Alcohol Pump leaking at main wing hole

Functional Test/Test Flight Required? Yes No



Handwritten notes:
12-6-77
P.O.
P. SMITH

Corrective Action:

Recommended Replaced Alcohol Pump IAW
L-17 3514 MM 30-50-02 . ops check Good

Part Removal Information:

Name: <u>Pump</u>	P/N: <u>207-A</u>	S/N: <u>7353</u>
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Parts Installation Information:

Name: <u>Pump</u>	P/N: <u>2350104-2</u>	S/N: <u>537</u>
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Additional Parts Information:

Corrected By: _____ Inspected By: _____



Handwritten: 12/12/77



Handwritten: 12/12/77



Page: _____ of _____

Aircraft S/N: _____

Registration No: _____

Work Order Discrepancy Sheet

W.O. # 3009 Written By: PSS Date: 10-2-99

Discrepancy #: 10 Authorization: _____ Date: _____

Discrepancy: Fuel quantity reads zero when fuel is present

Functional Test/Test Flight Required? Yes No

Corrective Action:

INSPECTED FUEL QUANTITY INDICATION SYSTEM / FUEL DISCHARGE SYSTEM
AND ZERO READING WHEN TOTALIZED ON - PROBLEM INTERMITTENT
REMOVED SELECTOR SWITCH P/N 2655325 SN P-2/B112 FOR REPAIR
INSTALLED SELECTOR SWITCH P/N 2655325 SN 7-46/OPSCHEK - GROUND
FUNCTIONAL CHECK GOOD / ON INSTALLED, TURNER SWITCH / 10-6-99
REMOVED TURNER SWITCH / 10-6-99

Part Removal Information:

Name: SELECTOR SWITCH P/N: 2655325 S/N: P-2/B112
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: SELECTOR SWITCH P/N: 2655325 S/N: 7-46
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: (Signature) 10-6-99 Inspected By: 10/6/99



Page: _____ of _____

Aircraft S/N: _____

Registration No: 12472A

Work Order Discrepancy Sheet

W.O. # 5009 Written By: AIS Date: 10-6-99

Discrepancy #: 9 Authorization: _____ Date: _____

Discrepancy: Emp. Tool

Functional Test/Test Flight Required? Yes No

Corrective Action:
Removed trim Panel (center pedestal)
RAW FLAP SYSTEM 8'-20'-30'-40°. ADJUSTED
FLAP ZERO LIMIT CHECKED SYSTEM. ALL
ANGLES WILL WITHIN LIMITS. ~~Adjusted~~
Re-installed trim Panel. All work performed
RAW FLAP MAINT MANUAL CHPT. 27-51-09



Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By:  10-6-99 Inspected By:  10/7/99



Page: _____ of _____

Aircraft S/N: 060

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 4009 Written By: PRS Date: 10-6-77

Discrepancy #: 8 Authorization: _____ Date: _____

Discrepancy: and Service Manual

Functional Test/Test Flight Required? Yes No

Corrective Action:
checked system with 2 gals of oil. Fuel
system checked. Not too. System found
fuel pump was hole. All work done
per manual except 1/2 hr. 12-10-77

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-6-77 Inspected By: 10/7/77



Page: _____ of _____

Aircraft S/N: 710

Registration No: N1470H

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: _____

Discrepancy #: 7 Authorization: _____ Date: _____

Discrepancy: TXL/TANDING LIGHT INOP

Functional Test/Test Flight Required? Yes No

Corrective Action:
REMOVED LAMP REPAIRER REPAIRED LAMP
INSTALLED R-TRAINER OPS CR SAT ALL FWD SECTION 03-16-01


Part Removal Information:

Name: LAMP P/N: 4580 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: LAMP P/N: 4580 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] Inspected By: [Signature] 



Page: _____ of _____

Aircraft S/N: 060

Registration No: 1147B

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 9-30-99

Discrepancy #: 6 Authorization: _____ Date: _____

Discrepancy: Rudder Trim Gauge Inoperative

Functional Test/Test Flight Required? Yes No

Corrective Action:

Verified discrepancy removed rudder trim
indicator from pedestal. Found wires
on console frayed + broken. Replaced
pins for connection + re-installed. O.P's
check good all work performed. All
lead maint. manual. MPT 27-20-05 + MPT 20
for wiring details.

Part Removal Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 9-30-99 Inspected By: [Signature] 9-30-99





Page: _____ of _____

Aircraft S/N: 35-666

Registration No: N47BA

Work Order Discrepancy Sheet

W.O. # 6009 Written By: [Signature] Date: 1/24/99

Discrepancy #: 5 Authorization: _____ Date: _____

Discrepancy: LH Trailing edge flap cut/bd Flap track unbound rib cracked at upper flange.

Functional Test/Test Flight Required? Yes No

Corrective Action:

Inspected LH trailing edge flap IAW Leaflet MM 27-50-01. Located cracked upper flange unbound - b.F. - red wax on trailing edge skin to gain access / rivet / structural IAW Leaflet SRM-4 Chapter 51-40-02. Replaced cracked rib IAW Leaflet SRM-4 Chapter 51-40-02. Located and drilled 2 holes in IAW Leaflet SRM-4 Chapter 51-40-02 and 51-71-02. To install new rib and reinstalled upper trailing edge skin IAW Leaflet SRM-4 Chapter 51-40-02 and 51-30-02 reinstalled LH trailing edge flap IAW Leaflet MM 27-50-01. Function Test Flap IAW Leaflet MM 27-50-01. Cracked fixed.

Part Removal Information:

Name: Rib Trailing Edge P/N: 2625015-47 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Parts Installation Information:

Name: Rib Leading Edge P/N: 2625015-75-575 S/N: N/A
Name: _____ P/N: _____ S/N: _____
Name: _____ P/N: _____ S/N: _____

Additional Parts Information:

Corrected By: [Signature] 10-7-99 Inspected By: [Signature] 10/7/99



Page: _____ of _____

Aircraft S/N: _____

Registration No: N472A

Work Order Discrepancy Sheet

W.O. # 6007 Written By: J. Mai Date: 10-6-99

Discrepancy #: 3 Authorization: _____ Date: _____

Discrepancy: (GPS UNIT # 82600395) GPS WILL NOT ACQUIRE SIGNALS

Functional Test Test Flight Required? Yes No

AVIATION

Corrective Action:

REMOVED LOW-COST GPS CONTROL HEAD AND
INSTALLED ORIGINAL UNIT AFTER REPAIRS.
GPS CHECK GOOD PER GARMIN MAINT. MANUAL.

Part Removal Information:

Name: <u>Control Head</u>	P/N: <u>011-00106-00</u>	S/N: <u>82600395</u>
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Parts Installation Information:

Name: <u>Control Head</u>	P/N: <u>011-00106-00</u>	S/N: <u>82600395</u>
Name: _____	P/N: _____	S/N: _____
Name: _____	P/N: _____	S/N: _____

Additional Parts Information:

599 4984 FOR ORIGINAL STAMPS

Corrected By: FT 10-6-99 Inspected By: ED. B 10-6-99