

STATEMENT OF PARTY REPRESENTATIVES TO NTSB INVESTIGATION

Aircraft Identification

Registration Number N394US/EI-ORD

Make and Model B737/A330

Location Boston, MA


Date June 9, 2005

The undersigned hereby acknowledge that they are participating in the above-referenced aircraft accident or incident investigation (including any component tests and teardowns or simulator testing) on behalf of the party indicated adjacent to their name, for the purpose of providing technical assistance to the National Transportation Safety Board.

The undersigned further acknowledge that they have read the attached copy of 49 C.F.R. Part 831 and have familiarized themselves with 49 C.F.R. § 831.11, which governs participation in NTSB investigations and agree to abide by the provisions of that regulation.

It is understood that a party representative to an investigation may not occupy a legal position or be a person who also represents claimants or insurers. The placement of a signature hereon constitutes a representation that participation in this investigation is not on behalf of either claimants or insurers and that, while any information obtained may ultimately be used in litigation, participation is not for the purposes of preparing for litigation.

By placing their signatures hereon, all participants agree that they will neither assert, nor permit to be asserted on their behalf, any privilege in litigation, with respect to information or documents obtained during the course of and as a result of participation in the NTSB investigation as described above. It is understood, however, that this form is not intended to prevent the undersigned from participating in litigation arising out of the accident referred to above or to require disclosure of the undersigned's communications with counsel.

<u>SIGNATURE</u>	<u>NAME (Print)</u>	<u>PARTY</u>	<u>DATE</u>
	Daniel Sicchio	Airline Pilots Association	June 17, 2005

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<u>SIGNATURE</u>	<u>NAME (Print)</u>	<u>PARTY</u>	<u>DATE</u>
	STEPHEN E. BEHR	USAIRWAYS	20 June 2005
_____	_____	_____	_____