NTSB Investigation No. OF CEN II FN 599 Date of Accident: 8 - 36 - 2011Accident Location: MOSBY MO

CERTIFICATION OF PARTY REPRESENTATIVE¹

I acknowledge that I am participating in the above-referenced accident or incident investigation, on behalf of my employer who has been named a party to the National Transportation Safety Board (NTSB) safety investigation, for the purpose of providing technical assistance to the NTSB's evidence documentation and fact-finding activities. I understand that as a party participant, I and my organization shall be responsive to the direction of NTSB personnel and may be expelled from the investigation for conduct that is prejudicial to the investigation or inconsistent with NTSB policies or instructions. No information pertaining to the accident, or in any manner relevant to the investigation, may be withheld from the NTSB by any party or party participant.

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I further acknowledge my responsibility to ensure that the NTSB is informed in writing, immediately and with specificity, when information or records provided to the NTSB, in any format, or other investigative activities, are subject to United States export controls, classification or licensing requirements, or sanctions restrictions. Similarly, commercially sensitive and/or proprietary material provided to the NTSB investigation should be clearly marked in accordance with the provisions of 49 C.F.R. Part 831.6.

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AIR METHODS CORP Party Organization/Employer

¹ In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."

NTSB Investigation No. CENII FASS Date of Accident: 8-26-2011 Accident Location: MOSBY, MO



CERTIFICATION OF PARTY REPRESENTATIVE¹

I acknowledge that I am participating in the above-referenced accident or incident investigation, on behalf of my employer who has been named a party to the National Transportation Safety Board (NTSB) safety investigation, for the purpose of providing technical assistance to the NTSB's evidence documentation and fact-finding activities. I understand that as a party participant, I and my organization shall be responsive to the direction of NTSB personnel and may be expelled from the investigation for conduct that is prejudicial to the investigation or inconsistent with NTSB policies or instructions. No information pertaining to the accident, or in any manner relevant to the investigation, may be withheld from the NTSB by any party or party participant.

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| 8-28-2011 |
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| Date |
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MICHAEL BENTON, AULATTON COMPLIANCE

Name & Title

AIR METHODS CORP Party Organization/Employer

¹ In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."

| NTSB Investigation | No. CEN11 | FN599 |
|--------------------|-----------|-------|
| Date of Accident: | 8/26/11 | |
| Accident Location: | MOSBY MD | |



CERTIFICATION OF PARTY REPRESENTATIVE¹

I acknowledge that I am participating in the above-referenced accident or incident investigation, on behalf of my employer who has been named a party to the National Transportation Safety Board (NTSB) safety investigation, for the purpose of providing technical assistance to the NTSB's evidence documentation and fact-finding activities. I understand that as a party participant, I and my organization shall be responsive to the direction of NTSB personnel and may be expelled from the investigation for conduct that is prejudicial to the investigation or inconsistent with NTSB policies or instructions. No information pertaining to the accident, or in any manner relevant to the investigation, may be withheld from the NTSB by any party or party participant.

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| 8/28/2011 |
|-----------|
| Date |

MICHAEL W. KOENES CORPORATE SAFETY MANAGER Name & Title

AIR METHOPS CORPORATION

Party Organization/Employer

¹ In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."

NTSB Investigation No. <u>CEN 11 FA 599</u> Date of Accident: <u>Aug 26, 2011</u> Accident Location: <u>Mosby</u>



CERTIFICATION OF PARTY REPRESENTATIVE¹

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E/28/11 Date rods

Party Organization/Employer

¹ In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."

| NTSB Investigation No. | (| <u>'</u> EN | 11 FA& 599 |
|------------------------|----|-------------|------------|
| Date of Accident: | 08 | 26 | (|
| Accident Location: | MO | SBY | MO |



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| BRIAN S THOMAS Name & Title | LINE PILOT | | |
| AMC/LOCAL 109 | | | |

Party Organization/Employer

¹ In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."

NTSB Investigation No. <u>CEN/IFA599</u> Date of Accident: <u>8/24/12</u> Accident Location: <u>Mos8y</u>, MO

CERTIFICATION OF PARTY REPRESENTATIVE¹

I acknowledge that I am participating in the above-referenced accident or incident investigation, on behalf of my employer who has been named a party to the National Transportation Safety Board (NTSB) safety investigation, for the purpose of providing technical assistance to the NTSB's evidence documentation and fact-finding activities. I understand that as a party participant, I and my organization shall be responsive to the direction of NTSB personnel and may be expelled from the investigation for conduct that is prejudicial to the investigation or inconsistent with NTSB policies or instructions. No information pertaining to the accident, or in any manner relevant to the investigation, may be withheld from the NTSB by any party or party participant.

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9 C.F.R. Part 831.6. TECHNICAL NF Name & Title

Party Organization/Employer

¹ In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."



NTSB Investigation No. <u>[IMIFA599]</u> Date of Accident: <u>AUG HL, HUI</u> Accident Location: <u>MCSDY</u>, MISSOUVI

CERTIFICATION OF PARTY REPRESENTATIVE¹

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| OCTOBER 13, 2011 |
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| Date |

Name & Title

Party Organization/Employer

¹ In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."



NTSB Investigation No. <u>CLNIIFA599</u> Date of Accident: <u>AUG AL, AUI</u> Accident Location: <u>MUSBY</u>, MISSOUVI

CERTIFICATION OF PARTY REPRESENTATIVE¹

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| | Date |
| ERIC P. KING | Simulator INSTRUCTOR |

Name & Title

Party Organization/Employer

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NTSB Investigation No. <u>CPNIFA599</u> Date of Accident: <u>AUG H, HUI</u> Accident Location: <u>MOSBY</u>, MISSOUVI

CERTIFICATION OF PARTY REPRESENTATIVE¹

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| MATTHEW Name & Title | EVANS | | PILOT | (AEC |) |
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| Party Organization/Employ | /er | | | | |

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