DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION		OPER. Control No.		Comments (Describe the malfunction or defect and the circumstances under which it occurred. State probable cause and recommendations to prevent recurrence.)	DISTRICT OFFICE	OPERATOR DESIGNATION	
MALEUNICTION O		1. A/C Reg. No.		4	٥	OPE	
	R DEFECT REPORT	Alo Reg. No.	N-		OTHER		
Enter pertinent data 2.	MANUFACTURER	MODEL/SERIES	SERIAL NUMBER	-		-	
AIRCRAFT 3.				-	COMMUTER		
POWERPLANT 4.				-	FAA	1	
PROPELLER 5. SPECIFIC PART (of	component) CAUSING TROU	JBLE		-	MFG.	1	
Part Name	MFG. Model or Part No.	Serial No.	Part/Defect Location.	-			
				1	AIR TAXI		
6. APPLIANCE/COMPO	ONENT (Assembly that Includ	les part)	!			1	$\overline{}$
Comp/Appl Name	Manufacturer	Model or Part No.	Serial Number		MECH.		~
				Optional Information:	OPER.	BY:	TELEPHONE NUMBER
Part TT	Part TSO F	Part Condition	7. Date Sub.	Check a box below, if this report is related to an aircraft		E	JONE
				Accident; Date Incident; Date	REP.STA.	SUBMITTED BY	TELEP
FAA FORM 8010-4 (10	0-92) SUPERSEDES PREVIO	OUS EDITIONS	•				

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U.S. Department of Transportation Federal Aviation Administration

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