









# HORTON AVIATION LLC.

2732 Perimeter Rd. Ste. 101 • N. Las Vegas, NV 89032

W.O.# 10-078  
 POLICY CROSS REF. W.O.#  
 WARRANTY MFG.

CUSTOMER MARTIN DATE PROMISED \_\_\_\_\_  
 CUSTOMER ASSIST ONLY  HAND CARRY  
 MAKE CESNA MODEL R182 S/N R18200616 HRS 2528.7 REG. N4973A

**DISCREPANCY**  
OIL CHANGE

| NOUN   | OLD MODEL | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
|--|-----------|-----|-----|--------------------------|-------------------------|
| <input type="checkbox"/> EXCHANGE<br><input type="checkbox"/> LOANER | NEW MODEL | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| REMOVED F.O.M.   | MODEL     | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| REMOVED F.O.M.   | MODEL     | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |

**CONDITION RECEIVED**  
**CORRECTIVE ACTION** CHANGED OIL + FILTER (SERVICES) WITH APPROX 1000 PLUS & CHANGE 1 FILTER. TEST RUN + LEAK CHECK NORMAL.

CORR. BY: \_\_\_\_\_ DATE 4-15-10 BC INSP. \_\_\_\_\_ AC INSP. \_\_\_\_\_

| QUAN.    | DESIGNATOR | DESCRIPTION   | PART NUMBER         | LIST PRICE EA. | AWP DATE |
|----------|------------|---------------|---------------------|----------------|----------|
| <u>8</u> |            | <u>OIL</u>    | <u>NSW 100 PLUS</u> |                |          |
| <u>1</u> |            | <u>FILTER</u> | <u>C114810211</u>   |                |          |
| <u>1</u> |            | <u>AOA</u>    | <u>1151</u>         |                |          |
|          |            |               |                     |                |          |
|          |            |               |                     |                |          |
|          |            |               |                     |                |          |
|          |            |               |                     |                |          |
|          |            |               |                     |                |          |
|          |            |               |                     |                |          |

|  |   |                                   |
|--|---|-----------------------------------|
| <input type="checkbox"/> RETURN TO MFG. FOR REPAIR                   | <input type="checkbox"/> BENCH TEST             | <input type="checkbox"/> REPAIR   |
| <input checked="" type="checkbox"/> DISCREPANCY VERIFIED IN AIRCRAFT | <input type="checkbox"/> FUNCTION TEST          | <input type="checkbox"/> OVERHAUL |
| <input type="checkbox"/> DISCREPANCY VERIFIED ON BENCH               | <input type="checkbox"/> OTHER _____            |                                   |
| <input type="checkbox"/> TEST FLIGHT REQUIRED                        | REPAIR TIME _____                               |                                   |
| <input type="checkbox"/> STATIC LEAK TEST REQUIRED                   | <input type="checkbox"/> COMPASS SWING REQUIRED |                                   |
| <input type="checkbox"/> MAINT. DEFERRED                             | <input type="checkbox"/> AIRCRAFT PLACARDED     |                                   |
| REASON DEFERRED _____  |   |                                   |
| <input type="checkbox"/> ITEM DOES NOT AFFECT AIRWORTHINESS          |   |                                   |

The aircraft and/or component identified was repaired and inspected in accordance with Federal Aviation Regulations and is approved for return to service. Pertinent details of the repair are on file at this agency under above work order No.

DATE 4-15-10 LOG BOOK ENTRY  NO  YES  
 INSPECTOR [Signature]



# HORTON AVIATION LLC.

2732 Perimeter Rd. Ste. 101 • N. Las Vegas, NV 89032

W.O.# 10-0787  
 POLICY CROSS REF. W.O.#  
 WARRANTY MFG.

CUSTOMER Bob Martin DATE PROMISED \_\_\_\_\_  
 CUSTOMER ASSIST ONLY  HAND CARRY  
 MAKE PASSA MODEL R182 S/N 1U18200616 HRS. 25287 REG. NV4873R

**DISCREPANCY** ELT INSP.

| NOUN                              | OLD MODEL | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
|-----------------------------------|-----------|-----|-----|--------------------------|-------------------------|
| <input type="checkbox"/> EXCHANGE | NEW MODEL | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| <input type="checkbox"/> LOANER   | MODEL     | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| REMOVED F.O.M.                    | MODEL     | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |

**CONDITION RECEIVED** \_\_\_\_\_ MOD STATUS \_\_\_\_\_

**CORRECTIVE ACTION** ELT SUSPECTED IMAU FAR 91.207 (d) AND FOUND TO BE IN SATISFACTORY CONDITION. BATTERY DUE 4/2011.

CORR. BY: [Signature] DATE 4-12-10 BC INSP. \_\_\_\_\_ AC INSP. [Signature]

| QUAN. | DESIGNATOR | DESCRIPTION | PART NUMBER | LIST PRICE EA. | AWP DATE |
|-------|------------|-------------|-------------|----------------|----------|
|       |            |             |             |                |          |
|       |            |             |             |                |          |
|       |            |             |             |                |          |
|       |            |             |             |                |          |
|       |            |             |             |                |          |
|       |            |             |             |                |          |
|       |            |             |             |                |          |
|       |            |             |             |                |          |
|       |            |             |             |                |          |
|       |            |             |             |                |          |

|   |   |  |  |  |
|---|---|--|--|--|
| <input type="checkbox"/> RETURN TO MFG. FOR REPAIR          | <input type="checkbox"/> DISCREPANCY VERIFIED IN AIRCRAFT | <input type="checkbox"/> DISCREPANCY VERIFIED ON BENCH | <input type="checkbox"/> BENCH TEST  | <input type="checkbox"/> REPAIR  |
| <input type="checkbox"/> TEST FLIGHT REQUIRED               | REPAIR TIME _____   | <input type="checkbox"/> STATIC LEAK TEST REQUIRED     | <input checked="" type="checkbox"/> FUNCTION TEST  | <input type="checkbox"/> OVERHAUL  |
| <input type="checkbox"/> MAINT. DEFERRED                    | <input type="checkbox"/> AIRCRAFT PLACARDED               | <input type="checkbox"/> COMPASS SWING REQUIRED        | <input type="checkbox"/> OTHER _____   |  |
| REASON DEFERRED _____                                       |   |  | The aircraft and/or component identified was repaired and inspected in accordance with Federal Aviation Regulations and is approved for return to service. Pertinent details of the repair are on file at this agency under above work order No. |  |
| <input type="checkbox"/> ITEM DOES NOT AFFECT AIRWORTHINESS |   |  | DATE <u>4-12-10</u>  | LOG BOOK ENTRY <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES |
|   |   |  | INSPECTOR <u>[Signature]</u>   |  |



















# HORTON AVIATION LLC.

2732 Perimeter Rd. Ste.101 • N. Las Vegas, NV 89032

W.O.# 10-078  
 POLICY  CROSS REF. W.O.#  
 WARRANTY  MFG.

CUSTOMER Bob Martin DATE PROMISED \_\_\_\_\_  
 CUSTOMER ASSIST ONLY  HAND CARRY  
 MAKE Cessna MODEL 172 S/N N8200616 HRS. 2528.7 REG. N4873R

**DISCREPANCY** NOSE TIRE HAS EXCESSIVE SIDEWALL CRACKING

|  |           |     |     |                          |                         |
|--|-----------|-----|-----|--------------------------|-------------------------|
| NOUN   | OLD MODEL | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| <input type="checkbox"/> EXCHANGE<br><input type="checkbox"/> LOANER | NEW MODEL | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| REMOVED F.O.M.   | MODEL     | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| REMOVED F.O.M.   | MODEL     | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |

**CONDITION RECEIVED** \_\_\_\_\_ MOD STATUS \_\_\_\_\_

**CORRECTIVE ACTION** REPLACED NOSE TIRE + TUBE WITH NEW GOODYEAR FLIGHT CUSTOM III, CLEANED INSPECTED & REPACKED WHEEL BEARING, SERVICE TIRE TO 50 PSI. ALL WORK DONE IN/UP MANUFACTURERS MAINTENANCE MANUAL.

4-14-10  
 230  
 JH

CORR. BY: \_\_\_\_\_ DATE 4-14-10 BC INSP: \_\_\_\_\_ AC INSP: \_\_\_\_\_

| QUAN.    | DESIGNATOR | DESCRIPTION | PART NUMBER                       | LIST PRICE EA. | AWP DATE |
|----------|------------|-------------|-----------------------------------|----------------|----------|
| <u>1</u> |            | <u>TIRE</u> | <u>600x5 6PLY GOODYEAR FC III</u> |                |          |
| <u>1</u> |            | <u>TUBE</u> | <u>500x5</u>                      |                |          |
|          |            |             |                                   |                |          |
|          |            |             |                                   |                |          |
|          |            |             |                                   |                |          |
|          |            |             |                                   |                |          |
|          |            |             |                                   |                |          |
|          |            |             |                                   |                |          |
|          |            |             |                                   |                |          |
|          |            |             |                                   |                |          |

RETURN TO MFG. FOR REPAIR

DISCREPANCY VERIFIED IN AIRCRAFT  DISCREPANCY VERIFIED ON BENCH

TEST FLIGHT REQUIRED REPAIR TIME \_\_\_\_\_

STATIC LEAK TEST REQUIRED  COMPASS SWING REQUIRED

MAINT. DEFERRED  AIRCRAFT PLACARDED

REASON DEFERRED \_\_\_\_\_

ITEM DOES NOT AFFECT AIRWORTHINESS

BENCH TEST  REPAIR

FUNCTION TEST  OVERHAUL

OTHER \_\_\_\_\_

The aircraft and/or component identified was repaired and inspected in accordance with Federal Aviation Regulations and is approved for return to service. Pertinent details of the repair are on file at this agency under above work order No.

DATE 4-14-10 LOG BOOK ENTRY  NO  YES

INSPECTOR [Signature]







# HORTON AVIATION LLC.

2732 Perimeter Rd. Ste. 101 • N. Las Vegas, NV 89032

W.O.# 10-078  
 POLICY CROSS REF. W.O.#  
 WARRANTY MFG.

|                            |                   |   |                                     |
|----------------------------|-------------------|---|-------------------------------------|
| CUSTOMER <u>Bob Martin</u> | DATE PROMISED     | <input type="checkbox"/> CUSTOMER ASSIST ONLY | <input type="checkbox"/> HAND CARRY |
| MAKE <u>CESSNA</u>         | MODEL <u>441B</u> | S/N <u>R18200616</u>                          | HRS. <u>2528.7</u>                  |
|                            |                   | REG. <u>N4873R</u>                            |                                     |

**DISCREPANCY** LEFT MUFFLER HAS Baffles BURNT OUT

|  |           |     |     |  |
|--|-----------|-----|-----|--|
| NOUN   | OLD MODEL | S/N | P/N | <input type="checkbox"/> REINSTALLED AND CHECKED |
| <input type="checkbox"/> EXCHANGE<br><input type="checkbox"/> LOANER | NEW MODEL | S/N | P/N | <input type="checkbox"/> REINSTALLED AND CHECKED |
| REMOVED F.O.M.   | MODEL     | S/N | P/N | <input type="checkbox"/> REINSTALLED AND CHECKED |
| REMOVED F.O.M.   | MODEL     | S/N | P/N | <input type="checkbox"/> REINSTALLED AND CHECKED |

**CONDITION RECEIVED** MOD STATUS

**CORRECTIVE ACTION** REMOVED & REPLACED LEFT MUFFLER WITH NEW AVI. EQUIPMENT. INSTALLED USING ALL NEW HARDWARE.

CORR. BY: MP DATE: 4-22-10 BC INSP. AC INSP. ✓

| QUAN.    | DESIGNATOR | DESCRIPTION    | PART NUMBER        | LIST PRICE EA. | AWP DATE |
|----------|------------|----------------|--------------------|----------------|----------|
| <u>1</u> |            | <u>MUFFLER</u> | <u>A1250251-13</u> |                |          |
|          |            |                |                    |                |          |
|          |            |                |                    |                |          |
|          |            |                |                    |                |          |
|          |            |                |                    |                |          |
|          |            |                |                    |                |          |
|          |            |                |                    |                |          |
|          |            |                |                    |                |          |
|          |            |                |                    |                |          |

4-20-10  
1.0 mp  
  
4-21-10  
4.0 mp  
  
4-22-10  
1.0 mp

|   |  |  |
|---|--|--|
| <input type="checkbox"/> RETURN TO MFG. FOR REPAIR          | <input type="checkbox"/> BENCH TEST                    | <input checked="" type="checkbox"/> REPAIR   |
| <input type="checkbox"/> DISCREPANCY VERIFIED IN AIRCRAFT   | <input type="checkbox"/> DISCREPANCY VERIFIED ON BENCH | <input checked="" type="checkbox"/> FUNCTION TEST  |
| <input type="checkbox"/> TEST FLIGHT REQUIRED               | REPAIR TIME  | <input type="checkbox"/> OVERHAUL  |
| <input type="checkbox"/> STATIC LEAK TEST REQUIRED          | <input type="checkbox"/> COMPASS SWING REQUIRED        | <input type="checkbox"/> OTHER _____   |
| <input type="checkbox"/> MAINT. DEFERRED                    | <input type="checkbox"/> AIRCRAFT PLACARDED            | The aircraft and/or component identified was repaired and inspected in accordance with Federal Aviation Regulations and is approved for return to service. Pertinent details of the repair are on file at this agency under above work order No. |
| REASON DEFERRED   | DATE <u>4-22-10</u>                                    | LOG BOOK ENTRY <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES   |
| <input type="checkbox"/> ITEM DOES NOT AFFECT AIRWORTHINESS | INSPECTOR <u>[Signature]</u>                           |  |





# HORTON AVIATION LLC.

2732 Perimeter Rd. Ste.101 • N. Las Vegas, NV 89032

W.O.# 10-078  
 POLICY CROSS REF. W.O.#  
 WARRANTY MFG.

CUSTOMER Bob Martin DATE PROMISED \_\_\_\_\_  
 CUSTOMER ASSIST ONLY  HAND CARRY  
 MAKE CSSNA MODEL R182 S/N R18200616 HRS. 528.7 REG N4879R

**DISCREPANCY** ALLISON ROD ENDS NEED REPAIRED

| NOUN                              | OLD MODEL | S/N | P/N |  |
|-----------------------------------|-----------|-----|-----|--|
| <input type="checkbox"/> EXCHANGE | NEW MODEL | S/N | P/N | <input type="checkbox"/> REINSTALLED AND CHECKED |
| <input type="checkbox"/> LOANER   |           |     |     | <input type="checkbox"/> REINSTALLED AND CHECKED |
| REMOVED F.O.M.                    | MODEL     | S/N | P/N | <input type="checkbox"/> REINSTALLED AND CHECKED |
| REMOVED F.O.M.                    | MODEL     | S/N | P/N | <input type="checkbox"/> REINSTALLED AND CHECKED |

**CONDITION RECEIVED** \_\_\_\_\_ MOD STATUS \_\_\_\_\_

**CORRECTIVE ACTION** REPAIRED BOTH INBOARD & OUTBOARD ALLISON

ROD ENDS WITH NEW. CHECKED CABLE TENSION & CONTROL SURFACE RIGGING IAW MANUFACTURERS MAINTENANCE MANUAL.

4-22-10  
3.0

4-22-10  
1.0 mf

CORR. BY: [Signature] DATE 4-22-10 BC INSP: \_\_\_\_\_ AC INSP: \_\_\_\_\_

| QUAN.    | DESIGNATOR | DESCRIPTION    | PART NUMBER    | LIST PRICE EA. | AWP DATE |
|----------|------------|----------------|----------------|----------------|----------|
| <u>4</u> |            | <u>ROD END</u> | <u>51819-3</u> |                |          |
|          |            |                |                |                |          |
|          |            |                |                |                |          |
|          |            |                |                |                |          |
|          |            |                |                |                |          |
|          |            |                |                |                |          |
|          |            |                |                |                |          |
|          |            |                |                |                |          |
|          |            |                |                |                |          |
|          |            |                |                |                |          |

|  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> RETURN TO MFG. FOR REPAIR                   | <input type="checkbox"/> DISCREPANCY VERIFIED ON BENCH | <input type="checkbox"/> BENCH TEST  | <input checked="" type="checkbox"/> REPAIR   |
| <input checked="" type="checkbox"/> DISCREPANCY VERIFIED IN AIRCRAFT | REPAIR TIME _____                                      | <input type="checkbox"/> FUNCTION TEST   | <input type="checkbox"/> OVERHAUL  |
| <input type="checkbox"/> TEST FLIGHT REQUIRED                        | <input type="checkbox"/> COMPASS SWING REQUIRED        | <input type="checkbox"/> OTHER _____   |  |
| <input type="checkbox"/> STATIC LEAK TEST REQUIRED                   | <input type="checkbox"/> AIRCRAFT PLACARDED            | The aircraft and/or component identified was repaired and inspected in accordance with Federal Aviation Regulations and is approved for return to service. Pertinent details of the repair are on file at this agency under above work order No. |  |
| <input type="checkbox"/> MAINT. DEFERRED                             | REASON DEFERRED _____                                  | DATE <u>4-22-10</u>  | LOG BOOK ENTRY <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES |
| <input type="checkbox"/> ITEM DOES NOT AFFECT AIRWORTHINESS          |  | INSPECTOR <u>[Signature]</u>   |  |







# HORTON AVIATION LLC.

2732 Perimeter Rd. Ste.101 • N. Las Vegas, NV 89032

W.O.# 19-978  
 POLICY CROSS REF. W.O.#  
 WARRANTY MFG.  
 HAND CARRY

CUSTOMER BOB MARTIN DATE PROMISED \_\_\_\_\_  
 MAKE CESNA MODEL R182 S/N R1820046 HRS. 2528.7 REG. N4873A  
 CUSTOMER ASSIST ONLY

**DISCREPANCY**

DME ANTENNA BAD

|  |           |     |     |                          |                         |
|--|-----------|-----|-----|--------------------------|-------------------------|
| NOUN   | OLD MODEL | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| <input type="checkbox"/> EXCHANGE<br><input type="checkbox"/> LOANER | NEW MODEL | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| REMOVED F.O.M.   | MODEL     | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |
| REMOVED F.O.M.   | MODEL     | S/N | P/N | <input type="checkbox"/> | REINSTALLED AND CHECKED |

CONDITION RECEIVED \_\_\_\_\_ MOD STATUS \_\_\_\_\_

CORRECTIVE ACTION REMOVE AND REPLACE  
DME ANTENNA DACK SYSTEM  
GOOD

CORR. BY: [Signature] DATE: 04/26/00 BC INSP: \_\_\_\_\_ AC INSP: [Signature]

| QUAN.    | DESIGNATOR | DESCRIPTION    | PART NUMBER      | LIST PRICE EA. | AWP DATE |
|----------|------------|----------------|------------------|----------------|----------|
| <u>1</u> |            | <u>ANTENNA</u> | <u>10-302905</u> |                |          |
|          |            |                |                  |                |          |
|          |            |                |                  |                |          |
|          |            |                |                  |                |          |
|          |            |                |                  |                |          |
|          |            |                |                  |                |          |
|          |            |                |                  |                |          |
|          |            |                |                  |                |          |
|          |            |                |                  |                |          |
|          |            |                |                  |                |          |

|   |  |  |
|---|--|--|
| <input type="checkbox"/> RETURN TO MFG. FOR REPAIR          | <input type="checkbox"/> BENCH TEST  | <input checked="" type="checkbox"/> REPAIR   |
| <input type="checkbox"/> DISCREPANCY VERIFIED IN AIRCRAFT   | <input type="checkbox"/> FUNCTION TEST   | <input type="checkbox"/> OVERHAUL  |
| <input type="checkbox"/> TEST FLIGHT REQUIRED               | <input type="checkbox"/> OTHER _____   |  |
| <input type="checkbox"/> STATIC LEAK TEST REQUIRED          | The aircraft and/or component identified was repaired and inspected in accordance with Federal Aviation Regulations and is approved for return to service. Pertinent details of the repair are on file at this agency under above work order No. |  |
| <input type="checkbox"/> MAINT. DEFERRED                    | DATE <u>04/26/00</u>   | LOG BOOK ENTRY <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES |
| REASON DEFERRED _____                                       | INSPECTOR <u>[Signature]</u>   |  |
| <input type="checkbox"/> ITEM DOES NOT AFFECT AIRWORTHINESS |  |  |

