



US Department
of Transportation
Federal Aviation
Administration

MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)

OMB No. 2120-0020
Exp: 8/31/2014

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark USA N4125U	Serial No. 150-60125		
	Make CESSNA	Model 150C	Series 100	
2. Owner	Name (As shown on registration certificate) LARRY MEHIAFF		Address (As shown on registration certificate)	
			Address PO BOX 68	
			City KAYLOR	State SD
			Zip 57354	Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input type="checkbox"/>	AIRFRAME	_____	(As described in Item 1 above)	_____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	POWERPLANT	CONT	0-200-A	3655-2-A
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No. 1812777IA
Name <u>ROGER RUDNICK</u>		<input checked="" type="checkbox"/>	U. S. Certificated Mechanic	
Address <u>417 E 14TH ST</u>		<input type="checkbox"/>	Foreign Certificated Mechanic	
City <u>SO SIOUX CITY</u> State <u>NE</u>		<input type="checkbox"/>	Certificated Repair Station	
Zip <u>68776</u> Country <u>USA</u>		<input type="checkbox"/>	Certificated Maintenance Organization	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual 2-10-15
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7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is Approved Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/>	Inspection Authorization
				Other (Specify)

Certificate or Designation No. 1812777IA	Signature/Date of Authorized Individual 2-10-15
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NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

USA N4125U

2-10-2015

Nationality and Registration Mark

Date

INSTALLATION OF REAL GASKET CORPORATION CONTINENTAL ENGINE PUSHROD TUBE MODIFICATION I/A/W REAL GASKET CORPORATION DRAWING LISTS AND INSTALLATION INSTRUCTIONS PER THE ATTACHED APPROVED MODEL LIST [AML] INSPECTION OF THE PUSHROD TUBE I/A/W REAL GASKET CORPORATION DRAWING NO. 9807, PAGE [4] REVISION DATED JULY 2, 1998. AND I/A/W STC SE00533SE. NO WT OR BALANCE CHANGE.

-----END-----

Additional Sheets Are Attached

Department of Transportation -- Federal Aviation Administration

Supplemental Type Certificate

Number SE00533SE

This certificate issued to

Real Gaskets Tennessee
2506 Stateline Road
Elizabethton, TN 37643

certifies that the change in the type design for the following product with the limitations and conditions therefore as specified herein meets the airworthiness requirements of Part * of the * Regulations.

Original Product Type Certificate Number: *See attached FAA Approved Model List (AML)
Make: No. SE00533SE for a list of approved engine models
Model: and applicable airworthiness regulations.

Description of Type Design Change: Installation of Real Gasket Corporation Continental Engine Pushrod Tube Modification in accordance with Real Gasket Corporation Drawing Lists and Installation Instructions per the attached Approved Model List (AML). Inspection of the pushrod tube modification in accordance with Real Gasket Corporation Drawing No. 9807, Page 4, Revision dated July 2, 1998.

Limitations and Conditions: Approval of this change in type design applies to the engine models listed on the AML only. This approval should not be extended to other engines of these models on which other previously approved modifications are incorporated unless it is determined that the relationship between this change and any of those other previously approved modifications, including changes in type design, will introduce no adverse effect upon the airworthiness of that engine. A copy of this Certificate and FAA AML No. SE00533SE must be maintained as part of the permanent records for the modified engine.

If the holder agrees to permit another person to use this certificate to alter the product, the holder shall give the other person written evidence of that permission.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: March 28, 1995

Date reissued: 7/13/2001; 11/15/2011

Date of issuance: July 6, 1998

Date amended:



By direction of the Administrator
(Signature)
Melvin D. Taylor
Manager
Atlanta Aircraft Certification Office
(Title)

FAA APPROVED MODEL LIST (AML) SE00533SE

FOR Real Gaskets Tennessee

ISSUE DATE: July 6, 1998

ITEM	ENGINE MAKE	ENGINE MODEL	TYPE CERTIFICATE NUMBER	CERTIFICATION BASIS FOR ALTERATION	FAA SEALED DRAWING LIST	INSTALLATION INSTRUCTIONS	AML AMENDED DATE
1	CONTINENTAL	A-65 SERIES	E-205	CAR 13	RG200PR	2/14/2012	10/14/1998
2	CONTINENTAL	A-75 SERIES	E-213	CAR 13	RG200PR	2/14/2012	10/14/1998
3	CONTINENTAL	C-75 SERIES	E-233	CAR 13	RG200PR	2/14/2012	10/14/1998
4	CONTINENTAL	C-85 SERIES	E-233	CAR 13	RG200PR	2/14/2012	10/14/1998
5	CONTINENTAL	C-90 SERIES	E-252	CAR 13	RG200PR	2/14/2012	10/14/1998
6	CONTINENTAL	0-200 SERIES	E-252	CAR 13	RG200PR	2/14/2012	10/14/1998
7	CONTINENTAL	C-125-2	E-236	CAR 13	RG200PR	2/14/2012	10/14/1998
8	CONTINENTAL	C-145-2, -2H, -2HP	E-253	CAR 13	RG200PR	2/14/2012	10/14/1998
9	CONTINENTAL	O-300-A, -B, -C, -D, -E	E-253	CAR 13	RG200PR	2/14/2012	10/14/1998
10	CONTINENTAL	GO-300-A, -B, -C, -D, -E, -F	E-298	CAR 13	RG200PR	2/14/2012	10/14/1998

FAA APPROVED: 
Marjager, Atlanta Aircraft Certification Office

Amended: October 14, 1998; October 19, 2012

Reissued: July 13, 2001; November 15, 2011; February 6, 2012



U.S. Department
of Transportation
Federal Aviation
Administration

MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)

Form Approved
OMB No. 2120-0020
2/28/2011

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation (49 U.S.C. §46301(a)).

1. Aircraft	Nationality and Registration Mark 4125U	Serial No. 15060125	
	Make Cessna	Model 150D	Series
2. Owner	Name (As shown on registration certificate) Larsen David E. Larsen Christina A	Address (As shown on registration certificate)	
		Address <u>PO Box 353</u> City <u>Alcester</u> State <u>SD</u> Zip <u>57001-0353</u> Country <u>USA</u>	

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	_____	(As described in item 1 above)	_____
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency	
Name <u>Dan Byker</u>	Address <u>1885 460th St</u> City <u>Hawarden</u> State <u>IA</u> Zip <u>51023</u> Country <u>USA</u>	<input checked="" type="checkbox"/> U.S. Certificated Mechanic	Manufacturer
		<input type="checkbox"/> Foreign Certificated Mechanic	C. Certificate No.
		<input type="checkbox"/> Certificated Repair Station	303 2178
		<input type="checkbox"/> Certificated Maintenance Organization	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual Dan Byker 8/8/2013 8/8/2013
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7. Approval for Return To Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is APPROVED REJECTED

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	Other (Specify)
Certificate or Designation No. 303 2178		Signature/Date of Authorized Individual Dan Byker 8/8/2013 8/8/2013		

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N4125U

Nationality and Registration Mark

8/8/2013

Date

Installed BN-1 spinner in accordance with STC SA4-302

Additional Sheets Are Attached

FAA



U.S. Department of Transportation
Federal Aviation Administration

MAJOR REPAIR AND ALTERATION
(Airframe, Powerplant, Propeller, or Appliance)

Form Approved
OMB No. 2120-0020

For FAA Use Only

Office Identification

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958).

1. Aircraft	Make Cessna	Model 150D
	Serial No. 15060125	Nationality and Registration Mark N4125W
2. Owner	Name (As shown on registration certificate) Larsen David E Larsen Christina A	Address (As shown on registration certificate) PO Box 353 Alcester, SD 57001-0353

3. For FAA Use Only

4. Unit Identification				5. Type		
Unit	Make	Model	Serial No.	Repair	Alteration	
AIRFRAME	(As described in item 1 above)					
POWERPLANT	Continental	O-200A	3655-2-A		X	
PROPELLER						
APPLIANCE	Type					
	Manufacturer					

6. Conformity Statement

A. Agency's Name and Address	B. Kind of Agency	C. Certificate No.
Dan Byker 1885 460th St Hawarden, IA 51023	<input checked="" type="checkbox"/> U.S. Certificated Mechanic	3032178
	<input type="checkbox"/> Foreign Certificated Mechanic	
	<input type="checkbox"/> Certificated Repair Station	
	<input type="checkbox"/> Manufacturer	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Date 11-07-06	Signature of Authorized Individual <i>Dan Byker</i>
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7. Approval for Return To Service

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is APPROVED REJECTED

BY	FAA Fit. Standards Inspector	Manufacturer	<input checked="" type="checkbox"/>	Inspection Authorization	Other (Specify)
	FAA Designee	Repair Station		Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection 11-07-06		Certificate or Designation No. 3032178	Signature of Authorized Individual <i>Dan Byker</i>		

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

Installed Avglas airbox repair kit p/n FG-100, IAW STC SE00164SE, and Avglas dwg B5.

******* NOTHING FOLLOWS *******

Additional Sheets Are Attached

FAA copy



U.S. Department of Transportation
Federal Aviation Administration

MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)

Form Approved
OMB No. 2120-0020

For FAA Use Only

Office Identification

CE-01 Qui

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958).

1. Aircraft	Make Cessna	Model 150D
	Serial No. 15060125	Nationality and Registration Mark 4125U
2. Owner	Name (As shown on registration certificate) David E. Larsen	Address (As shown on registration certificate) P.O. Box 353 Alcester, SD 57001-0353

3. For FAA Use Only

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4. Unit Identification

5. Type

Unit	Make	Model	Serial No.	Repair	Alteration
AIRFRAME	(As described in item 1 above)				
POWERPLANT	Continental	O-200A	3655-2-A		X
PROPELLER					
APPLIANCE	Type				
	Manufacturer				

6. Conformity Statement

A. Agency's Name and Address Dan Byker 1885 460th St. Hawarden, IA 51023	B. Kind of Agency	C. Certificate No. 3032178
	<input checked="" type="checkbox"/> U.S. Certificated Mechanic	
	<input type="checkbox"/> Foreign Certificated Mechanic	
	<input type="checkbox"/> Certificated Repair Station	
<input type="checkbox"/> Manufacturer		

D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Date
6/29/06

Signature of Authorized Individual

7. Approval for Return To Service

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is APPROVED REJECTED

BY	FAA Fit. Standards Inspector	Manufacturer	<input checked="" type="checkbox"/>	Inspection Authorization	Other (Specify)
	FAA Designee	Repair Station		Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection 6/29/06		Certificate or Designation No. 3032178		Signature of Authorized Individual	

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

Cessna 150D, s/n 15060125, N4125U

Installed F&M Enterprises oil filter adapter, model T.A.F.-L, IAW STC SE7559SW and Model T.A.F.-L installation instructions.

Warning! One half-inch clearance must be maintained around the filter can. The only approved filters for this installation are: Champion CH48108 and AC-OF53-A

***** NOTHING FOLLOWS *****

Additional Sheets Are Attached



MAJOR REPAIR AND ALTERATION
(Airframe, Powerplant, Propeller, or Appliance)

Form Approved
OMB No. 2120-0020
For FAA Use Only
Office Identification
GL27.227 FSDU

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958).

1. Aircraft	Make Cessna	Model C150D
	Serial No. 15060125	Nationality and Registration Mark N4125U
2. Owner	Name (As shown on registration certificate) Sioux Aero Inc.	Address (As shown on registration certificate) 4244 Elmwood Ave
	Dennis Struck	Ireton IA 51027

3. For FAA Use Only
THE DATA IDENTIFIED HEREIN COMPLIES WITH APPLICABLE AIRWORTHINESS REQUIREMENTS AND IS APPROVED ONLY FOR THE ABOVE DESCRIBED AIRCRAFT SUBJECT TO CONFORMITY INSPECTION BY A PERSON AUTHORIZED IN FAR 43.7
Mark Satman 6-9-99 RRP FSDO
APPROVING FAA INSPECTOR DATE DISTRICT OFFICE

4. Unit Identification				5. Type	
Unit	Make	Model	Serial No.	Repair	Alteration
AIRFRAME	(As described in Item 1 above)				X
POWERPLANT					
PROPELLER					
APPLIANCE	Type				
	Manufacturer				

6. Conformity Statement

A. Agency's Name and Address Business Aviation 3501 Aviation Ave Sioux Falls SD 57104	B. Kind of Agency	C. Certificate No. DDNR793K
	<input type="checkbox"/> U.S. Certificated Mechanic	
	<input type="checkbox"/> Foreign Certificated Mechanic	
	<input checked="" type="checkbox"/> Certificated Repair Station	
	Manufacturer	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Date 05/29/99	Signature of Authorized Individual Mark Satman <i>Mark Satman</i>
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7. Approval for Return To Service

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is APPROVED REJECTED

BY	FAA Fit. Standards Inspector	Manufacturer	Inspection Authorization	Other (Specify)
	FAA Designee	<input checked="" type="checkbox"/> Repair Station	Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection 6/9/99	Certificate or Designation No. CRS DDNR793K	Signature of Authorized Individual <i>Mark Satman</i>		

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N4125U

VFR

1. Installed GX65 GPS Com as a VFR unit into FS 13.0, AT50A Into FS 13.1, AR850 Mode C Encoder Into FS 14.2 and PM501 Intercom Into FS 14.5. Installation Of GX 65 was Completed IAW manufacturers Instructions. The Unit was ground tested and All Operations Checks Were good. Labeled Panel GPS For VFR Only.
2. Installed AT50A Transponder (FS13.1) and AR850 Mode C Encoder (FS14.2) In accordance with manufacturers Instructions, Completed Integrated System (correlation and transponder test) IAW FAR 91.413 Para B and Far 43 appendix E para C. All Systems tested Good.
3. Installed PM501 Intercom IAW manufacturers Instructions as a two place intercom. operational tests were good.
4. The Above described installations were In accordance with AC43.13-1A chapters 5,11,15 and AC43.13-2A chapters 1,2,3. and AC20-138. The Installations do not interfere with any other existing installed equipment nor do they cause a condition of current draw of over 80% rated all output.
5. The weight and balance and equipment list have been updated this date and aircraft log books were updated this date.
6. The Manuals Listed below will provide guidance for any further airworthiness tests that may arise in the future. GX65 560-0959-01 AT50A 03604-602 AR850 3725-0600 PM501 01269401.

END

Following Approval for return to service by completion of section 7 of this FAA Form 337, a flight evaluation is required to confirm that all systems operate normally, safely, and in accordance with manufacturers specifications and the functional flight requirements of AC20-138, Para 7c (I) (iv). The GPS remained Placarded FOR VFR ONLY>

Flight Eval Satisfactory

6/9/99 

Date of Flight Eval

6/9/99

02125U

DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION				Form Approved Budget Bureau No. 04-R06-1	
MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)				FOR FAA USE ONLY	
INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form.				OFFICE IDENTIFICATION AGL-GADO-4	
1. AIRCRAFT	MAKE	Cessna		MODEL	150D
	SERIAL NO.	1506025		NATIONALITY AND REGISTRATION MARK	N4125U
2. OWNER	NAME (As shown on registration certificate)			ADDRESS (As shown on registration certificate)	
	Thomas A Gillott Marvin A Dopp			5701 Garfield Ave South Minneapolis, MN. 55419	
3. FOR FAA USE ONLY					
4. UNIT IDENTIFICATION					
UNIT	MAKE	MODEL	SERIAL NO.	5. TYPE	
AIRFRAME	***** (As described in item 1 above) *****			REPAIR	ALTERATION
POWERPLANT	Continental	O-200A	3655-2-A		X
PROPELLER					
APPLIANCE	TYPE				
	MANUFACTURER				
6. CONFORMITY STATEMENT					
A. AGENCY'S NAME AND ADDRESS			B. KIND OF AGENCY		C. CERTIFICATE NO.
Douglas P Weske 5237 Louisiana Ave South Crystal, MN. 55428			<input checked="" type="checkbox"/> U.S. CERTIFICATED MECHANIC <input type="checkbox"/> FOREIGN CERTIFICATED MECHANIC <input type="checkbox"/> CERTIFICATED REPAIR STATION <input type="checkbox"/> MANUFACTURER		468889637
D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.					
DATE	10-13-84		SIGNATURE OF AUTHORIZED INDIVIDUAL Doug Weske		
7. APPROVAL FOR RETURN TO SERVICE					
Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> REJECTED					
BY	FAA FLT. STANDARDS INSPECTOR	MANUFACTURER	<input checked="" type="checkbox"/>	INSPECTION AUTHORIZATION	OTHER (Specify)
	FAA DESIGNEE	REPAIR STATION		CANADIAN DEPARTMENT OF TRANSPORT INSPECTOR OF AIRCRAFT	
DATE OF APPROVAL OR REJECTION	10-13-84	CERTIFICATE OR DESIGNATION NO.	1390683	SIGNATURE OF AUTHORIZED INDIVIDUAL Paul Weske	

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

B. DESCRIPTION OF WORK ACCOMPLISHED (If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

Installed placard on aircraft for use of automotive fuels per SFC number SA633GL (aircraft) and SE634GL (engine) set engine idle speed 700 rpm

ADDITIONAL SHEETS ARE ATTACHED

FEDERAL AVIATION AGENCY
APPLICATION FOR AIRWORTHINESS CERTIFICATE

FORM APPROVED
BUDGET BUREAU NO. 04-R058.1

INSTRUCTIONS: Please print or type. Submit this form, original only, to an authorized Federal Aviation Agency Representative. Use attachments or extra sheets as necessary.

PART I AIRCRAFT DESCRIPTION	1. AIRCRAFT IDENTIFICATION NO. N 4125U	2. AIRCRAFT MAKE Cessna	3. AIRCRAFT MODEL 150D
	4. AIRCRAFT SERIAL NUMBER 15060125	5. ENGINE MAKE Continental	6. ENGINE MODEL 0-200-A
	7. NUMBER OF ENGINES One	8. PROPELLER MAKE McCauley	9. PROPELLER MODEL 1A100/MCM 6950
PART II CERTIFICATION REQUESTED	1. APPLICATION IS HEREBY MADE FOR: A. <input checked="" type="checkbox"/> ORIGINAL ISSUANCE OF CERTIFICATE (AIRCRAFT: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED <input type="checkbox"/> IMPORT) (CAR 1) B. <input type="checkbox"/> AMENDMENT OF CURRENT CERTIFICATE (CAR 1, 6); C. <input type="checkbox"/> MULTIPLE CERTIFICATE (REF. CAR 1 AND 8) D. <input type="checkbox"/> OTHER _____ (Specify)		
	2. AIRWORTHINESS CLASSIFICATION (Check appropriate item(s)) It is requested that an Airworthiness Certificate be issued to permit operation of the above described aircraft in the following classification(s): A. <input checked="" type="checkbox"/> STANDARD (NORMAL, UTILITY, AGRICULTURAL, TRANSPORT CATEGORIES) (REF. CAR 1) B. <input type="checkbox"/> LIMITED (REF. CAR 9) C. <input type="checkbox"/> RESTRICTED (REF. CAR 8) (Check operation(s) to be conducted) (1) <input type="checkbox"/> AGRICULTURAL AND PEST CONTROL (2) <input type="checkbox"/> AERIAL ADVERTISING (3) <input type="checkbox"/> AERIAL SURVEYING (4) <input type="checkbox"/> PATROLLING (5) <input type="checkbox"/> FOREST AND WILDLIFE CONSERVATION (6) <input type="checkbox"/> WEATHER CONTROL (7) <input type="checkbox"/> OTHER _____ (Specify) D. <input type="checkbox"/> EXPERIMENTAL (REF. CAR 1) (Check operation(s) to be conducted) (1) <input type="checkbox"/> AMATEUR-BUILT (2) <input type="checkbox"/> EXPERIMENT (RESEARCH AND DEVELOPMENT) (3) <input type="checkbox"/> EXHIBITION (4) <input type="checkbox"/> RACING (5) <input type="checkbox"/> TO SHOW COMPLIANCE WITH CAR E. <input type="checkbox"/> OTHER _____ (Specify)		
	3. HAS THE APPLICANT PREVIOUSLY BEEN DENIED AN AIRWORTHINESS CERTIFICATE FOR THIS AIRCRAFT? <input type="checkbox"/> YES (Explain) <input type="checkbox"/> NO		
PART III INSPECTION AGENCY VERIFICATION (Not applicable to newly manufactured aircraft)	1. IN ACCORDANCE WITH CAR 1.67(d) THE AIRCRAFT DESCRIBED ABOVE HAS BEEN INSPECTED AND FOUND AIRWORTHY BY: A. <input type="checkbox"/> AIRCRAFT MANUFACTURER (Name of Firm) _____ B. <input type="checkbox"/> CERTIFICATED DOMESTIC REPAIR STATION, CERTIFICATE NO. _____ C. <input type="checkbox"/> CERTIFICATED AIR CARRIER, CERTIFICATE NO. _____ D. <input type="checkbox"/> CERTIFICATED MECHANIC (Inspection Authorization) NO. _____		
	DATE _____	SIGNATURE OF AUTHORIZED INDIVIDUAL _____	TITLE _____
PART IV OWNER'S CERTIFICATION	I hereby certify that the aircraft described above has been inspected and is airworthy and eligible for the classification(s) requested. I further certify that I am the registered owner (or his agent) of this aircraft which is registered with the Federal Aviation Agency, as required by the Federal Aviation Act of 1958 and the applicable Federal Aviation Regulations and Regulations of the Administrator and that the following evidence of registration is displayed in the aircraft. (Check and complete appropriate item(s); this includes completion of items 1 and 2 on the reverse side of this form.)		
	1. <input type="checkbox"/> CERTIFICATE OF REGISTRATION, FAA FORM 500 (PART A) DATE OF ISSUE _____ 2. <input type="checkbox"/> APPLICATION FOR REGISTRATION, FAA FORM 500 (PART B). FAA FORM 500 FORWARDED TO _____ FAA AIRCRAFT REGISTRATION BRANCH ON (Date) _____ 3. <input checked="" type="checkbox"/> DEALER'S AIRCRAFT REGISTRATION CERTIFICATE, FAA FORM 1707 (Expiration date) 6-4-64 4. REGISTERED OWNER'S FULL NAME AND PERMANENT MAILING ADDRESS (No., Street, City, Zone and State) Cessna Aircraft Company 5800 Pawnee Road Wichita 10, Kansas		
	*In order to be eligible for registration an aircraft must be owned by a citizen of the United States as defined by Section 101(13) of the Federal Aviation Act of 1958.		5. SIGNATURE OF REGISTERED OWNER OR AUTHORIZED AGENT <i>John DeRosier</i>
6. DATE 10-4-63		7. TITLE Owner's Agent	
8. ATTACHMENTS (Check which) A. <input type="checkbox"/> FAA FORM 337 B. <input type="checkbox"/> FAA FORM 317 C. <input type="checkbox"/> WEIGHT AND BALANCE REPORT D. <input type="checkbox"/> DATA, DRAWINGS, PHOTOGRAPHS, ETC. (List separately) E. <input type="checkbox"/> OTHER (List separately)			

18 OCT 10 1963

FEDERAL AVIATION AGENCY
AIRCRAFT INSPECTION REPORT

(Items 1 and 2 will be verified and all other applicable items will be completed by an authorized FAA representative.)

1. AIRCRAFT CERTIFICATION BASIS
The aircraft described in PART I on the reverse of this form has been inspected and found to conform to the following:

A. AIRCRAFT SPECIFICATION OR TYPE CERTIFICATE DATA SHEET NO. 3A19 REVISION NO. 5
 B. AIRCRAFT LISTING, PAGE NO.(S) _____
 C. AIRWORTHINESS DIRECTIVE SUMMARY 1963 (YEAR) THROUGH CARD NO. 20
 D. SUPPLEMENTAL TYPE CERTIFICATE NO.(S) _____
 E. OTHER _____ (Specify)

2. AIRCRAFT AND ENGINE OPERATING RECORDS

A. AIRCRAFT NEW—NO PREVIOUS OPERATION OR MAINTENANCE HISTORY
 B. COMPLIANCE WITH APPLICABLE AIRWORTHINESS DIRECTIVES RECORDED
 C. AIRCRAFT RECORDS INDICATE THE AIRFRAME HAS BEEN OPERATED A TOTAL OF _____ HOURS
 D. ENGINE RECORDS INDICATE THE FOLLOWING OPERATION:
 SERIAL NO. _____ TOTAL HOURS _____ TIME SINCE OVERHAUL _____
 SERIAL NO. _____ TOTAL HOURS _____ TIME SINCE OVERHAUL _____
 SERIAL NO. _____ TOTAL HOURS _____ TIME SINCE OVERHAUL _____
 SERIAL NO. _____ TOTAL HOURS _____ TIME SINCE OVERHAUL _____

3. AIRWORTHINESS DOCUMENTATION

A. CURRENT OPERATING RESTRICTIONS (LIMITATIONS) COCKPIT DOOR CAR 3.777 (b) displayed in aircraft
 B. CURRENT OPERATING RESTRICTIONS (LIMITATIONS), AVAILABLE IN AIRCRAFT
 C. CURRENT APPROVED AIRCRAFT FLIGHT MANUAL, AVAILABLE IN AIRCRAFT
 D. CURRENT WEIGHT AND BALANCE INFORMATION, AVAILABLE IN AIRCRAFT
 E. THIS INSPECTION HAS BEEN RECORDED IN THE AIRCRAFT RECORDS
 F. FAA FORM 337, MAJOR REPAIR AND ALTERATION, (ATTACH WHEN REQUIRED)
 G. FAA FORM 317, STATEMENT OF CONFORMITY, (ATTACH WHEN REQUIRED)
 H. WEIGHT AND BALANCE REPORT, (ATTACH WHEN REQUIRED)
 I. DATA, DRAWINGS, PHOTOGRAPHS, ETC., (ATTACH WHEN REQUIRED)
 J. AIRWORTHINESS CERTIFICATE, FAA FORM 1362, ISSUED IN ACCORDANCE WITH CAR Part 1, Par. 1.67
 K. PREVIOUS FAA FORM 1362, ISSUED IN ACCORDANCE WITH CAR _____

BY _____ (Name of Issuing Representative) _____ (Designation Number)

4. FAA REPRESENTATIVE CERTIFICATION
I have inspected the aircraft described on the reverse and, on the basis of the application and the foregoing, find it conforms to its type certificate and that it is in condition for safe operation.

5. REGISTRATION INDICATED ON REVERSE IS PROPERLY DISPLAYED IN AIRCRAFT: YES NO (Explain)

6. DESIGNEE'S SIGNATURE: Executive Engineer, Commercial Div.
CESSNA AIRCRAFT COMPANY DESIGNATION NO. _____ DATE 10-4-63

7. FAA INSPECTOR'S SIGNATURE: Keith Tobin FAA DISTRICT OFFICE NO. _____ DATE _____

8. REMARKS: 33

A. ACCEPTED
 B. REINSPECTED
 C. SPOT CHECKED

9. ATTACHMENT(S) IN ADDITION TO THOSE LISTED ON REVERSE (List separately)

FAA

FEDEL AVIATION 10-19-64 19 37 Nov 7 '64

MAJOR REPAIR AND ALTERATION
(Airframe, Powerplant, Propeller, or Appliance) Modified by Operator #72

Form Approved
Budget Bureau No. 04-R060.1
FOR FAA USE ONLY
OFFICE IDENTIFICATION CE-GADO-1
MSP

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form.

1. AIRCRAFT	MAKE Cessna	MODEL 150
	SERIAL NO. 150 60125	NATIONALITY AND REGISTRATION MARK N 4125 U
2. OWNER	NAME (As shown on registration certificate) Jack F. Zwirtz	ADDRESS (As shown on registration certificate) 6041 Fourth Street Northeast Minneapolis, Minnesota

3. FOR FAA USE ONLY

4. UNIT IDENTIFICATION				5. TYPE	
UNIT	MAKE	MODEL	SERIAL NO.	REPAIR	ALTERATION
AIRFRAME	***** (As described in item 1 above) *****				X
POWERPLANT					
PROPELLER					
APPLIANCE	TYPE				
	MANUFACTURER				

6. CONFORMITY STATEMENT

A. AGENCY'S NAME AND ADDRESS Gordon A. Templeton 6000 Douglas Drive North Minneapolis, Minnesota 55429	B. KIND OF AGENCY <input checked="" type="checkbox"/> U.S. CERTIFICATED MECHANIC <input type="checkbox"/> FOREIGN CERTIFICATED MECHANIC <input type="checkbox"/> CERTIFICATED REPAIR STATION <input type="checkbox"/> MANUFACTURER	C. CERTIFICATE NO. A&P 1473587
---	--	-----------------------------------

D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

DATE 10-19-64	SIGNATURE OF AUTHORIZED INDIVIDUAL Gordon A. Templeton
------------------	---

7. APPROVAL FOR RETURN TO SERVICE

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Agency and is: APPROVED REJECTED

BY	FAA FLT. STANDARDS INSPECTOR	MANUFACTURER	<input checked="" type="checkbox"/>	INSPECTION AUTHORIZATION	OTHER (Specify)
	FAA DESIGNEE	REPAIR STATION		CANADIAN DEPARTMENT OF TRANSPORT INSPECTOR OF AIRCRAFT	

DATE OF APPROVAL OR REJECTION 10-19-64	CERTIFICATE OR DESIGNATION NO. A&P 1473587	SIGNATURE OF AUTHORIZED INDIVIDUAL Gordon A. Templeton
---	---	---

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. DESCRIPTION OF WORK ACCOMPLISHED (If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

Removed King KX100, power supply and omni head and installed Narco Mark III in instrument panel in hole provided by aircraft manufacturer. Installation made similiar to Cessna Electronics Manual, section 5013, figure 5-2 and radio manufacturer's instructions. Electrical load checked and found to be within limits. New Weight and Balance computed and equipment list changed.

RECEIVED

OCT 24 1966

G.A.D.O. #14
MINNEAPOLIS

ADDITIONAL SHEETS ARE ATTACHED

858 433

FEDERAL AVIATION AGENCY

Form approved by Operator #36
41-10524

MAJOR REPAIR AND ALTERATION FORM (AIRFRAME, POWERPLANT, PROPELLER OR APPLIANCE)

1. AIRCRAFT	MAKE Cessna	MODEL 150D	SERIAL NO. 15060125	NATIONALITY AND REGISTRATION MARK N4125U
2. OWNER	NAME (First, middle, last) Crystal Shamrock Inc.		ADDRESS (Street and number, city, zone and State) 6000 Douglas Drive No. Crystal Minn.	
3. COMPLETE ONLY FOR UNIT REPAIRED AND/OR ALTERED. DESCRIBE WORK ACCOMPLISHED ON REVERSE IN ACCORDANCE WITH CIVIL AERONAUTICS MANUAL 18.				
UNIT	MAKE	MODEL	SERIAL NO.	NATURE OF WORK (Check) MAJOR REPAIR MAJOR ALTERATION
a. AIRFRAME	***** (As described in item 1 above) *****			XX
b. POWERPLANT				
c. PROPELLER				
d. APPLIANCE	TYPE AND MANUFACTURER			
4. AIRCRAFT WEIGHT AND BALANCE DATA *AFTER the repairs and/or alterations described below were made. This item must be completed by repair or alteration agency. However, in the case of a spare component, it will not be completed until such component is installed in an aircraft. At this time, it will be completed by the installing agency, if applicable.				
CATEGORY	EMPTY WEIGHT (Pounds)*	EMPTY CENTER OF GRAVITY (Inches from datum)*	USEFUL LOAD (Pounds)*	
Utility	1065	32.4	535	
5. CONFORMITY STATEMENT (Complete and check)				
a. AGENCY'S NAME AND ADDRESS Arvid R. Westfall 6000 Douglas Drive No. Crystal Minn.		b. KIND OF AGENCY <input checked="" type="checkbox"/> U. S. Certified Mechanic. <input type="checkbox"/> Foreign Certified Mechanic. <input type="checkbox"/> Certified Repair Station. <input type="checkbox"/> Manufacturer. <input type="checkbox"/> (Check if repair or alteration was made under delegation option procedures.)		c. CERTIFICATE NO. A & P 154-5457
d. I certify that the repair and/or alteration made to the unit(s) identified under item 3 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 18 of the U. S. Civil Air Regulations and that the information furnished herein is true and correct to the best of my knowledge. Oct 22, 1964 (Date repair and/or alteration completed) Arvid R. Westfall (Signature of authorized individual)				
6. APPROVAL FOR RETURN TO SERVICE (Check and complete appropriate items) Pursuant to the authority specified below the unit identified in item 3 was inspected in the manner prescribed by the Administrator of the Federal Aviation Agency and is <input checked="" type="checkbox"/> APPROVED } BY { <input type="checkbox"/> FAA Designee <input type="checkbox"/> Manufacturer <input type="checkbox"/> Canadian Department of Transport Inspector of Aircraft <input type="checkbox"/> REJECTED } <input type="checkbox"/> FAA Flight Standards Inspector <input type="checkbox"/> Repair Station <input checked="" type="checkbox"/> Other (Specify) AC 3 OCT 27 1964 (Date of approval or rejection) AI 396876 Carl J. Fullmuth (Signature of authorized individual; title or identification number)				
7. TO BE COMPLETED ONLY BY FAA PERSONNEL				
a. <input type="checkbox"/> Forwarded for engineering comment <input type="checkbox"/> See attached memorandum				
b. <input checked="" type="checkbox"/> Accepted 10-26-64 (Date) <input type="checkbox"/> Reinspected (Date) <input type="checkbox"/> Spot Checked (Date)				
3-14 CE-GADO-14 (FAA designation number)		AMM NOV 13 1964 (Signature Flight Standards Inspector)		

INSTRUCTIONS

This form must be completed in duplicate each time a major repair and/or alteration is made of an aircraft, airframe, powerplant, propeller or appliance. After the repair and/or alteration has been inspected and item 6 completed, the original copy of this form will be made available to the aircraft owner for retention as part of the aircraft records. The duplicate copy is retained by the FAA for administrative purposes.

See CAM 18 for detailed instructions concerning the information to be furnished with this form and instructions concerning its preparation.

8. DESCRIPTION OF WORK ACCOMPLISHED.

Repair was made on right wing tip from station 174.00 to tip. Rear spar splice was made at station 16. Front spar was spliced at station 176. as per Cessna 100 series manual figure 19 - 7. All parts were Cessna new manufactured.

New parts list

Used Kit No SK40A50-1

- 1 ea. 0523515-3 rib
- 1 ea. 0523515-5 rib
- 1 ea. 0523701-4 tip
- 1 ea. 0721107-2 fairing
- 1 ea. 0523003-81 skin
- 1 ea. 0523003-83 skin
- 1 ea. 0523003-57 skin
- 1 ea. 0523515-4 rib
- 1 ea. 072608-2 rib
- 1 ea. 0523317-1 spar outer end used
- 1 ea. SK40A50-1 kit

End

*If additional space is needed attach additional sheets bearing aircraft nationality and registration mark and date work completed.

Check block if additional sheets are attached.

Filed by Operator #18

Form approved.
Budget Bureau No. 04-R060.

FEDERAL AVIATION AGENCY					
MAJOR REPAIR AND ALTERATION FORM (AIRFRAME, POWERPLANT, PROPELLER OR APPLIANCE)					
1. AIRCRAFT	MAKE Cessna	MODEL 160D	SERIAL NO. 150 60125	NATIONALITY AND REGISTRATION MARK 4125 U	
2. OWNER	NAME (First, middle, last) Crystal Shamrock, Inc.		ADDRESS (Street and number, city, zone and State) 5000 Douglas Drive North Minneapolis 29, Minnesota		
3. COMPLETE ONLY FOR UNIT REPAIRED AND/OR ALTERED. DESCRIBE WORK ACCOMPLISHED ON REVERSE IN ACCORDANCE WITH CIVIL AERONAUTICS MANUAL 18.					
UNIT	MAKE	MODEL	SERIAL NO.	NATURE OF WORK (Check) 2	
a. AIRFRAME	***** (As described in Item 1 above) *****			MAJOR REPAIR	MAJOR ALTERATION XX
b. POWERPLANT				THE ALTERATION IDENTIFIED HEREIN COMPLIES WITH APPLICABLE AIRWORTHINESS REQUIREMENTS AND IS APPROVED ONLY FOR THE ABOVE DESCRIBED AIRCRAFT SUBJECT TO CONFORMITY INSPECTION BY A PERSON AUTHORIZED IN CAR 18.11(b).	
c. PROPELLER				10-24-63 <i>Anthony Cilia</i> DATE FAA INSPECTOR	
d. APPLIANCE	TYPE AND MANUFACTURER			CE-GADO-14	
4. AIRCRAFT WEIGHT AND BALANCE DATA This item must be completed by repair or alteration agency. However, in the case of a spare component, it will not be completed until such component is installed in an aircraft. At this time, it will be completed by the installing agency, if applicable.					
CATEGORY		EMPTY WEIGHT (Pounds)*	EMPTY CENTER OF GRAVITY (Inches from datum)*	USEFUL LOAD (Pounds)*	
Utility		1060	32.4	550	
5. CONFORMITY STATEMENT (Complete and check)					
a. AGENCY'S NAME AND ADDRESS			b. KIND OF AGENCY		c. CERTIFICATE NO.
Arvid R. Westfall 5000 Douglas Drive North Minneapolis 29, Minnesota			<input checked="" type="checkbox"/> U. S. Certificated Mechanic. <input type="checkbox"/> Foreign Certificated Mechanic. <input type="checkbox"/> Certificated Repair Station. <input type="checkbox"/> Manufacturer. <input type="checkbox"/> (Check if repair or alteration was made under delegation option procedures.)		A&P 154 5157
d. I certify that the repair and/or alteration made to the unit(s) identified under item 3 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 18 of the U. S. Civil Air Regulations and that the information furnished herein is true and correct to the best of my knowledge.					
October 24, 1963 (Date repair and/or alteration completed)			<i>Arvid R. Westfall</i> (Signature of authorized individual)		
6. APPROVAL FOR RETURN TO SERVICE (Check and complete appropriate items)					
Pursuant to the authority specified below the unit identified in item 3 was inspected in the manner prescribed by the Administrator of the Federal Aviation Agency and is					
<input checked="" type="checkbox"/> APPROVED } BY { <input type="checkbox"/> FAA Designee <input type="checkbox"/> Manufacturer <input type="checkbox"/> Canadian Department of Transport Inspector of Aircraft <input type="checkbox"/> REJECTED <input checked="" type="checkbox"/> FAA Flight Standards Inspector <input type="checkbox"/> Repair Station <input type="checkbox"/> Other (Specify)					
10-24-63 (Date of approval or rejection)			ANTHONY CILIA <i>Anthony Cilia</i> (Signature of authorized individual; title or identification number)		
7. TO BE COMPLETED ONLY BY FAA PERSONNEL					
a. <input type="checkbox"/> Forwarded for engineering comment <input type="checkbox"/> See attached memorandum					
b. <input type="checkbox"/> Accepted _____ (Date) <input type="checkbox"/> Reinspected _____ (Date) <input checked="" type="checkbox"/> Spot Checked 10-24-63 (Date)					
CE-GADO-14 3-14 (FAA designation number)			<i>Anthony Cilia</i> (Signature Flight Standards Inspector)		

INSTRUCTIONS

This form must be completed in duplicate each time a major repair and/or alteration is made of an aircraft, airframe, power-plant, propeller or appliance. After the repair and/or alteration has been completed and inspected, the original copy of this form will be made available to the aircraft owner for retention as part of the aircraft records. The duplicate copy is retained by the FAA for administrative purposes.

See CAM 18 for detailed instructions concerning the information to be furnished with this form and instructions concerning its preparation.

B. DESCRIPTION OF WORK ACCOMPLISHED.

Removed Mark IV Narco Superhomer and installed King KX100 in radio panel where Mark IV was removed. Installed with 4 #8R sheet metal screws and 4 #8 U type tinnerman nuts, same as Superhomer that was removed. Power supply installed on inside of firewall with King mounting bracket and 4 #10 machine screws and nuts with lock washers. Installed ADF T-12B in hole cut out in radio panel below KX100 with 4 #8R sheet metal screws and 4 #8 U type tinnerman nuts. Installed ADF head in hole cut out 3 1/2 in. above glove box. Omni head was installed in instrument hole on panel to the right of left control wheel. Loop antenna was routed under floor boards and installed, at 42 in. station under fuselage. Electrical load check taken and found to be 27.35 amps.

Item	Weight	Arm	Moment
Airplane	1027.5	32.6	33498.5
Mark IV	-7.5	12.0	-90.0
King tuner unit	6.5	11.0	71.5
Power supply	3.8	2.0	7.6
Omni indicator	2.0	17.0	34.0
Cables	1.7	8.0	13.6
ADF control unit	5.0	14.0	70.0
Head	2.5	15.0	37.5
Cables and antennas	6.0	42.0	336.0
New E.W. and C.G.	1049.5	32.4	33976.7

OKLAHOMA CITY, OKLA.

NOV 6 8 38 AM '63

REGISTRATION BRANCH
GENERAL AVIATION
AGENCY - AIRCRAFT

*If additional space is needed attach additional sheets bearing aircraft identification and registration mark and date work completed.
Check block if additional sheets are attached.