

## **Warranty Return Information**

Customer Name:	_Inv#
Part Number:	S/N
Total time since overhaul/repair- Hours_	Cycles:
Aircraft Owner:	
Aircraft Registration Number:	S/N
Aircraft Type:	
Signature/Certificate#	
Printed Name:	
Discrepancy: Please list description of fa performed below. Please be as detailed	•
Description of failure:	
Troubleshooting performed:	
A WARRANTY EVALUATION WILL NOT REQUIRED INFORMATION ABOVE IS (	COMPLETED
23220 W. 84 <sup>th</sup> St., Shawnee, KS 66227	~ ano
Ph# (913) 393-9400 Fax# (913) 393-940	
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