



US Department of Transportation
Federal Aviation Administration

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

OMB No. 2120-0020
Exp: 07/31/2026

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 N182FT	Serial No. 18256715		
	Make Textron (Cessna)	Model 182J	Series	
2. Owner	Name (As shown on registration certificate) Steve Abel		Address (As shown on registration certificate) PO BOX 1774	
	STEVES CHRISTMAS TREES INC		City DIAMOND SPRINGS	State CA
			Zip 95619-1774	Country

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 Michael K Weiss		<input checked="" type="checkbox"/> U. S. Certificated Mechanic	Manufacturer
Address 1234 County Road 206		<input type="checkbox"/> Foreign Certificated Mechanic	C. Certificate No. 3566362
City Giddings State Texas		<input type="checkbox"/> Certificated Repair Station	
Zip 78942 Country United States		<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 Michael K Weiss 01/01/2026 <i>Michael K Weiss</i>
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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 Flt. 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. IA3566362	Signature/Date of Authorized Individual Michael K Weiss 01/01/2026 <i>Michael K Weiss</i>
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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

N182FT

01/01/2026

Nationality and Registration Mark

Date

AFTT: 7580.8

Installed Oregon Aircraft Design Engine Mount Heat Shields IAW Oregon Aircraft Design Drawing List DR182IN1 and Installation Instructions II182 Rev. D dated 05/12/1999 per FAA AML # SA00496SE.

Weight and Balance calculated and entered into aircraft records.

END



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Federal Aviation Administration

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1. Aircraft	Nationality and Registration Mark N182FT	Serial No. 18256715	
	Make Textron (Cessna)	Model 182J	Series
2. Owner	Name (As shown on registration certificate) Steve Abel STEVES CHRISTMAS TREES INC	Address (As shown on registration certificate) Address PO BOX 1774 City DIAMOND SPRINGS State CA Zip 95619-1774 Country	

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input checked="" type="checkbox"/>	<input 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 Name Michael K Weiss Address 1234 County Road 206 City Giddings State Texas Zip 78942 Country United States		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"/> Certificated Maintenance Organization		C. Certificate No. 3566362
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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 Michael K Weiss <i>[Signature]</i> 01/01/2026
--	---

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. IA3566362	Signature/Date of Authorized Individual Michael K Weiss <i>[Signature]</i> 01/01/2026
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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

N182FT

01/01/2026

Nationality and Registration Mark

Date

AFTT: 7580.8

Found previously installed Whelen Orion 650E series LED navigation/strobe light assemblies, right P/N 01-0790877-01 (S/N 870053) and left P/N 01-0790877-02 (S/N 870088), verified installation IAW STC SA800EA and Whelen Aerospace Technologies ANTI-COLLISION LIGHT SYSTEMS INSTALLATION AND SERVICE MANUAL MARCH 2019. System function-checked normal.

Weight and Balance updated and entered into aircraft records.

See above referenced Install and Service Manual (Doc. # 05131 Rev. E) for Instructions For Continued Airworthiness.

—END—



US Department of Transportation
Federal Aviation Administration

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

Form Approved
OMB No. 2120-0020
5/31/2018

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 N182FT	Serial No. 18256715	
	Make CESSNA	Model 182J	Series 18256715
2. Owner	Name (As shown on registration certificate) STEVES CHRISTMAS TREES INC	Address (As shown on registration certificate) Address PO BOX 1774	
		City DIAMOND SPRINGS	State CA
		Zip 95619-1774	Country US

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 checked="" type="checkbox"/>	POWERPLANT	Continental	O-470-R	226910
<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. 3510045
Name <u>Hangtown Aviation</u>		<input checked="" type="checkbox"/> U. S. Certificated Mechanic	Manufacturer	
Address <u>3501 Airport Rd. H22</u>		<input type="checkbox"/> Foreign Certificated Mechanic		
City <u>Placerville</u> State <u>CA</u>		<input type="checkbox"/> Certificated Repair Station		
Zip <u>95667</u> Country <u>US</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 <u>22 June 2023</u>
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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	
Certificate or Designation No. 3138817		Signature/Date of Authorized Individual <u>6/22/23</u>		

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.)

182FT

06/16/2023

Nationality and Registration Mark

Date

1. R&R Right Magneto with SureFly SIM4N S/N 6C-2919016 per STC SE04349CH and Manufacturer's Instructions (Document No. SF1003, Revision #C).
2. Connected SureFly SIM in Right Magneto position to battery circuit at MASTER solenoid in tail section supplied Power Wire & Fuse (Surefly P/N 4&6C601) per STC SA04378CH and Manufacturer's Instructions (Document No. SF2001, Revision #B). Affixed supplied placard to the aircraft's instrument panel in view of pilot. Performed post-installation checks per Manufacturer's Instructions. Engine started and executed magneto run-up test with no problems observed.
3. Weight change negligible.
4. Inserted SureFly ICA's (Document No. SF1005, Revision #A for Engine & Document No. SF2005 Revision #B) in aircraft's records.
5. Inserted SureFly AFMS (Document No. SF2006 Revision #B) in POH/AFM.
6. Installed electronics international VI-2up RPM input channel for the RH magneto.

Additional Sheets Are Attached



US Department of Transportation
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Form Approved
OMB No. 2120-0020
2/28/2011

Electronic Tracking Number

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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 N182FT	Serial No. 18256715	
	Make CESSNA	Model 182J	Series 100
2. Owner	Name (As shown on registration certificate) STEVES CHRISTMAS TREES INC	Address (As shown on registration certificate) Address P.O. Box 1774	
		City Diamond Springs State CA	Zip 95619-1774 Country USA

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		C. Certificate No.	
Name Hangtown Aviation		<input checked="" type="checkbox"/>	U. S. Certificated Mechanic	Manufacturer	
Address 3501 Airport Rd. H34			Foreign Certificated Mechanic	3138817	
City Placerville State CA			Certificated Repair Station		
Zip 95667 Country USA			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
--	---

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 Flt. 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. 3138817	Signature/Date of Authorized Individual
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Work completed for [N182FT] on

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.

N182FT

8. Description of Work Accomplished

Nationality and Registration Mark

Date

Installed Electronics International fuel flow gauge and transducer in accordance with installation instructions and STC/AML SA00068SE dated October 15, 2012.

----- END -----

[] Additional Sheets Are Attached



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Form Approved
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2/28/2011

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1. Aircraft	Nationality and Registration Mark N182FT	Serial No. 18256715	
	Make Cessna	Model 182J	Series
2. Owner	Name (As shown on registration certificate) STEVES CHRISTMAS TREES INC	Address (As shown on registration certificate) Address PO BOX 1774	
		City Diamond Springs	State CA
		Zip 95619-1774	Country US

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input checked="" type="checkbox"/>	<input 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 Placerville Aviation	Address 3501 Airport Rd. City Placerville State CA Zip 95667 Country US	<input checked="" type="checkbox"/>	U. S. Certificated Mechanic
		<input type="checkbox"/>	Foreign Certificated Mechanic
		<input type="checkbox"/>	Certificated Repair Station
		<input type="checkbox"/>	Certificated Maintenance Organization
		C. Certificate No. A&P 3138817 IA	

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 1/20/2011
--	--

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	Inspection Authorization	Other (Specify)
Certificate or Designation No. 3138817 IA		Signature/Date of Authorized Individual 1/20/2011		

Work completed for [N182FT] on

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.

N182FT

01/20/2011

8. Description of Work Accomplished

Nationality and Registration Mark

Date

Installed new Flap trailing edge top and bottom skins. Skins are FAA/PMA'd from McFarland Aviation PN#s MC0523901-19, -20, -21 & -22.

----- END -----

[] Additional Sheets Are Attached



US 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

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1. Aircraft	Nationality and Registration Mark N182FT	Serial No. 18256715	
	Make Cessna	Model 182J	Series
2. Owner	Name (As shown on registration certificate) STEVES CHRISTMAS TREES INC		Address (As shown on registration certificate) PO BOX 1774
			City <u>Diamond Springs</u> State <u>CA</u> Zip <u>95619-1774</u> Country <u>US</u>

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input checked="" type="checkbox"/>	<input 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>Placerville Aviation</u>		<input checked="" type="checkbox"/>	U. S. Certificated Mechanic
Address <u>3501 Airport Rd.</u>			Foreign Certificated Mechanic
City <u>Placerville</u> State <u>CA</u>			Certificated Repair Station
Zip <u>95667</u> Country <u>US</u>			Certificated Maintenance Organization
		C. Certificate No. 545479682	

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 _____
--	--

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	Inspection Authorization	Other (Specify)

Certificate or Designation No. 3138817 IA	Signature/Date of Authorized Individual 1/20/2011
--	--

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.

N182FT

01/20/2011

8. Description of Work Accomplished

Nationality and Registration Mark

Date

Installed new right outboard flap track with new FAA/PMA'd McFarland PN# MC1221010-8.

----- END -----



US Department
of Transportation
**Federal Aviation
Administration**

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(Airframe, Powerplant, Propeller, or Appliance)**

Form Approved
OMB No. 2120-0020

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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 182J
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

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 DAVIDS AVIATION 3600 CAROL KENNEDY DR. CALAVERAS COUNTY AIRPORT SAN ANDREAS, CA 95249	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. AP2011632IA
--	--	--

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 MARCH 17, 2004	Signature of Authorized Individual <i>Paul R. Davids</i> PAUL R. DAVIDS
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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 3/17/04	Certificate or Designation No. AP2011632IA	Signature of Authorized Individual <i>Paul R. Davids</i> PAUL R. DAVIDS		

NOTICE

Weight and balance and operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with 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 DOOR STEWARD DOOR OPENING DEVICE IN ACCORDANCE WITH THE STC# SA1120SE.**
- **FUNCTIONAL TEST SATISFACTORILY ACCOMPLISHED.**

END

Additional Sheets Are Attached



US Department of Transportation
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1. Aircraft	Make CESSNA	Model 182J
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

3. For FAA Use Only

4. Unit Identification

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

6. Conformity Statement

A. Agency's Name and Address	B. Kind of Agency	C. Certificate No.
DAVIDS AVIATION 3600 CAROL KENNEDY DR. CALAVERAS COUNTY AIRPORT SAN ANDREAS, CA 95249	<input checked="" type="checkbox"/> U.S. Certificated Mechanic	AP2100632IA
	<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 MARCH 17, 2004	Signature of Authorized Individual PAUL R. DAVIDS
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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 3/17/04	Certificate or Designation No. AP2011632	Signature of Authorized Individual PAUL R. DAVIDS
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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.)

- **INSTALL ROSEN SUN VISORS IN ACCORDANCE WITH THE STC# SA00871SE.**
- **FUNCTIONAL TEST SATISFACTORILY ACCOMPLISHED.**

END

Additional Sheets Are Attached



US Department of Transportation
Federal Aviation Administration

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

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OMB No. 2120-0020

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1. Aircraft	Make CESSNA	Model 182J
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

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 DAVIDS AVIATION CALAVERAS COUNTY SIEPORT 3600 CAROL KENNEDY DR. SAN ANDREAS, CA 95249	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. 2011632
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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 OCTOBER 3, 2003	Signature of Authorized Individual PAUL R. DAVIDS
---------------------------------------	--

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 10/03/03		Certificate or Designation No. 2011632		Signature of Authorized Individual PAUL R. DAVIDS	

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 AIRWOLF OIL FILTER SYSTEM IN ACCORDANCE WITH THE
STC#SA00079NY. RAN UP, AND LEAK CHECKED.
- FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.

END



US 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 182
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

3. For FAA Use Only

The data/alteration herein complied 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

02/24/03 *[Signature]*
Date Signature SAC, FSDO

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	B. Kind of Agency	C. Certificate No.
DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	<input type="checkbox"/> U.S. Certificated Mechanic	UPNRO76L
	<input type="checkbox"/> Foreign Certificated Mechanic	
	<input checked="" 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 FEBRUARY 24, 2003	Signature of Authorized Individual <i>[Signature]</i> PAUL R. DAVIDS
----------------------------------	---

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 2/24/03		Certificate or Designation No. UPNRO76L	Signature of Authorized Individual <i>[Signature]</i> PAUL R. DAVIDS	

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be combined 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 PLASTIC, LIGHTED GLARE SHIELD FROM AVION RESEARCH, PALO ALTO, CA. THIS GLARE SHIELD COVERS THE COMPLETE AREA FROM WINDSHIELD TO THE INSTRUMENT PANEL AND PROTRUDES AFT FOUR (4) more inches with two (2) EACH SIX (6) INCH NEON TWELVE (12) VOLT LAMPS WIRED TO AIRCRAFT SYSTEM WITH ONE (1) AMP POTTER BRUMFIELD CIRCUIT BREAKER AND TEN (10) OHM RHEOSTAT.

- FUNCTIONAL TEST SATISFACTORILY ACCOMPLISHED.

END

Additional Sheets Are Attached



US 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 182J
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

3. For FAA Use Only

The data/alteration herein complied 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.

02/24/03 *[Signature]*
Date Signature SAC.F500

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	B. Kind of Agency	C. Certificate No.
DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	<input type="checkbox"/> U.S. Certificated Mechanic	UPNRO76L
	<input type="checkbox"/> Foreign Certificated Mechanic	
	<input checked="" 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 FEBRUARY 24, 2003	Signature of Authorized Individual <i>[Signature]</i> PAUL R. DAVIDS
----------------------------------	---

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 2/24/03		Certificate or Designation No. UPNRO76L	Signature of Authorized Individual <i>[Signature]</i> PAUL R. DAVIDS	

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 ELECTRONICS INT. MANIFOLD PRESSURE GAUGE WITH
INSTALLATION MANUAL OI 0517012 DATED 9-30-97 AND STC# SA5926NM.**
- **FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.**

END



US 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 182
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

3. For FAA Use Only

The date/alteration herein complied with applicable airworthiness requirements and is approved only for the above described unit subject to conformity inspection by a person authorized under FAR 43.7.

02/24/03
Date *[Signature]*
Signature SAC.FSDO

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 DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. <div style="text-align: center; font-weight: bold; font-size: 1.2em;">UPNRO76L</div>
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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 FEBRUARY 24, 2003	Signature of Authorized Individual <i>[Signature]</i> PAUL R. DAVIDS
----------------------------------	---

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 2/24/03		Certificate or Designation No. UPNRO76L	Signature of Authorized Individual <i>[Signature]</i> PAUL R. DAVIDS	

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 ELECTRONICS INT. VOICE ANNUNCIATOR IN ACCORDANCE WITH MFR. INSTALLATION MANUAL II 0428971 DATED 4-48-97.**
- **FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.**

END



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 182
	Serial No. 18256715	Nationality and Registration Mark N92DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

3. For FAA Use Only

The work/alteration herein complied 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.

02/24/03
Date Signature SAC, FSDO

4. Unit Identification

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

6. Conformity Statement

A. Agency's Name and Address DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. UPNRO76L
--	--	---------------------------------------

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 February 24, 2003	Signature of Authorized Individual <i>Paul R. Davids</i> PAUL R. DAVIDS
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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 2/24/03		Certificate or Designation No. UPNRO76L	Signature of Authorized Individual <i>Paul R. Davids</i> PAUL R. DAVIDS	

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 DUAL ELECTRONICS INT. FUEL LEVEL GAUGES, MODEL FL-2RA-12, S.N. 54944 IN ACCORDANCE WITH INSTALLATION MANUAL 01-0131941A. CALIBRATED TO EXISTING SENDERS.**
- **FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.**

END



US 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 182
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

3. For FAA Use Only

The data/alteration herein complied 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.

02/24/03
Date Signature SAC, FSDO

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 DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. <p style="text-align: center; font-size: 1.2em;">UPNRO76L</p>
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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 FEBRUARY 24, 2003	Signature of Authorized Individual <i>Paul R. Davids</i> PAUL R. DAVIDS
----------------------------------	--

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 Flt. 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 2/24/03		Certificate or Designation No. UPNRO76L	Signature of Authorized Individual <i>Paul R. Davids</i> PAUL R. DAVIDS	

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 ELECTRONICS INT. SUPER CLOCK SC-5 IN ACCORDANCE WITH INST. 010313961 DATED 7-14-02.**
- **FUNCTIONAL TEST SATISFACTORILY ACCOMPLISHED.**

END



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 182 J
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

3. For FAA Use Only

The data/alteration herein complied with applicable airworthiness requirements and is approved only for the above described aircraft subject to conformity inspection by a person authorized in Part 43.9.

Date: 2/24/03 Signature: [Signature] SAC FSDO

4. Unit Identification

5. Type

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

6. Conformity Statement

A. Agency's Name and Address	B. Kind of Agency	C. Certificate No.
DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	<input type="checkbox"/> U.S. Certificated Mechanic	UPNRO76L
	<input type="checkbox"/> Foreign Certificated Mechanic	
	<input checked="" 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 FEBRUARY 24, 2003	Signature of Authorized Individual <u>[Signature]</u> PAUL R. DAVIDS
----------------------------------	---

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 2/24/03		Certificate or Designation No. UPNRO76L	Signature of Authorized Individual <u>[Signature]</u> PAUL R. DAVIDS	

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 FIBERGLASS COWL SYSTEM WITH REMOTE OIL COOLER
IN ACCORDANCE WITH PREVIOUSLY APPROVAL FORM 337 DATED
NOV. 3, 1995 RE: C182 - N92386, S.N. 60180.**
- **FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.**

END



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 182J
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

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 DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certified Mechanic <input type="checkbox"/> Foreign Certified Mechanic <input checked="" type="checkbox"/> Certified Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. UPNRO76L
---	--	--

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 FEBRUARY 24, 2003	Signature of Authorized Individual PAUL R. DAVIDS
---	--

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 2/24/03		Certificate or Designation No. UPNRO76L	Signature of Authorized Individual PAUL R. DAVIDS	

NOTICE

We and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be made 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 ORIGINAL INSTRUMENT PANEL ON LEFT SIDE TO MOUNT LATER STYLE GYROS IN "T" FASHION. PANEL FABRICATED FROM .040 2024T3 AND MOUNTED SAME MANNER AS ORIGINAL PANEL, BUT WITH SIX (6) MORE ISOLATORS.
- REMOVED ORIGINAL RIGHT PANEL TO FACILITATE NEW POWER INSTRUMENTS AND GAUGES, ALL 2 1/8 ELECTRONICS INT. INSTRUMENTS NOTED IN THEIR OWN FORM 337.
- CANTED UPPER PORTION OF PANEL TO FACILITATE READING OF LCD DIGITAL GAUGES. PANEL ALSO IS .040 2024T3 ALUMINUM MOUNTED SAME AS ORIGINAL.
- FUNCTIONAL AND FLIGHT SATISFACTORILY ACCOMPLISHED.

END



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 182J
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DONALD	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

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 DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. UPNRO76L
--	--	---------------------------------------

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 FEBRUARY 24, 2003	Signature of Authorized Individual <i>Paul R. Davids</i> PAUL R. DAVIDS
----------------------------------	--

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 2/24/03	Certificate or Designation No. UPNRO76L	Signature of Authorized Individual <i>Paul R. Davids</i> PAUL R. DAVIDS		

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 BAS SHOULDER HARNESS/REEL SYSTEM FOR THE FRONT SEATS IN ACCORDANCE WITH STC# SA2067NM.
- FUNCTIONAL AND FLIGHT TEST Satisfactorily Accomplished.

END

Additional Sheets Are Attached



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 182
	Serial No. 18256715	Nationality and Registration Mark NA29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

3. For FAA Use Only

4. Unit Identification

5. Type

	Make	Model	Serial No.	Repair	Alteration
	AIRFRAME	~~~~~ (As described in Item 1 above) ~~~~~			
POWERPLANT					
PROPELLER					
APPLIANCE	Type				
	Manufacturer				

6. Conformity Statement

A. Agency's Name and Address DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. UPNRO76L
--	--	---------------------------------------

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 FEBRUARY 24, 2003	Signature of Authorized Individual PAUL R. DAVIDS
----------------------------------	---

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 X	Repair Station	Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection 2/24/03	Certificate or Designation No. UPNRO76L	Signature of Authorized Individual PAUL R. DAVIDS		

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 ELECTRONICS INT. CARB TEMP GAUGE IN ACCORDANCE WITH INSTALLATION MANUAL OIL 0906941 AND STC# SA1626NM.**
- **FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.**

END

Additional Sheets Are Attached



US 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 182
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

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 DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DR. SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. UPNRO76L
---	---	--

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 FEBRUARY 24, 2003	Signature of Authorized Individual PAUL R. DAVIDS
----------------------------------	---

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 2/24/03		Certificate or Designation No. UPNRO76L	Signature of Authorized Individual PAUL R. DAVIDS	

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 ELECTRONICS INT. OIL PRESSURE/TEMP. GAUGE IN ACCORDANCE WITH MFG. INSTALLATION MANUAL OI 0520911 DATED 10/8/97 AND STC# SA5925NM.**
- **FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.**

END

Additional Sheets Are Attached



US 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 182
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

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 DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. <p style="text-align: center; font-size: 1.2em;">UPNRO76L</p>
---	---	---

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 FEBRUARY 24, 2003	Signature of Authorized Individual PAUL R. DAVIDS
----------------------------------	---

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 Flt. Standards Inspector	<input type="checkbox"/>	Manufacturer	<input type="checkbox"/>	Inspection Authorization	Other (Specify)
	FAA Designee	<input checked="" type="checkbox"/>	Repair Station	<input type="checkbox"/>	Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection 2/24/03		Certificate or Designation No. UPNRO76L		Signature of Authorized Individual PAUL R. DAVIDS		

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 ELECTRONICS INT. VOLT/AMP. GAUGE IN ACCORDANCE WITH STC# SA2693NM AND INSTALLATION MANUAL OI 041032 AND II 040934 DATED 2/24/92.
- FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.

END



US 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 182
	Serial No. 18256715	Nationality and Registration Mark N29DA
2. Owner	Name (As shown on registration certificate) WALTER, DOUGLAS	Address (As shown on registration certificate) 2798 BRYAN WAY PLACERVILLE, CA 95667

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 DAVIDS AVIATION CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDRES, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. UPNRO76L
--	---	--

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 FEBRUARY 24, 2003	Signature of Authorized Individual PAUL R. DAVIDS
----------------------------------	---

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 2/24/03		Certificate or Designation No. UPNRO76L		Signature of Authorized Individual PAUL R. DAVIDS	

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 EGT/CHT MULTI CHANNEL SYSTEM IN ACCORDANCE WITH STC# SA302NM AND INSTALLED MANUAL O 1072491 AND II 072091 DATED 2-1-93. REMOVED EXISTING FACTORY PROBE AND GAUGE, AND VERIFIED E.I. PROBE READS SAME AS FACTORY.
- FUNCTIONAL AND FLIGHT TEST SATISFACTORILY ACCOMPLISHED.

END



US 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 182J
	Serial No. 56715	Nationality and Registration Mark N2615F
2. Owner	Name (As shown on registration certificate) DAVIDS AVIATION	Address (As shown on registration certificate) 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249

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 DAVIDS AVIATION CALAVERAS AVIATION 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No. UPNRO76L
---	---	--

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 SEPTEMBER 27, 1994	Signature of Authorized Individual PAUL R. DAVIDS
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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	X	Repair Station	Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection SEPTEMBER 27, 1994		Certificate or Designation No. UPNRO76L		Signature of Authorized Individual PAUL R. DAVIDS	

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 AVIAONICS WEST AM/FM RADIO IN ACCORDANCE WITH MFR. INSTRUCTIONS.
- INSTALLED TERRA TRI NAV C W/TN960NAV RECEIVER I.A.W. MFR. INSTRUCTIONS.
- INSTALLED KMA 12 AUDIO PANEL I.A.W. MFR. INSTRUCTIONS.
- INSTALLED KING KX 170B W/VOR-LOC I.A.W. MFR. INSTRUCTIONS.
- INSTALLED KS AVIONICS EGT/CHT I.A.W. MFR INSTRUCTIONS.
- ALL INSTALLATIONS I.A.W. AC 43.13, APP. 2A, PARA. 21 THROUGH 23, FABRICATED HARNESS NEEDED WITH TEFZEL WIRE CONFORMING TO MIL SPEC. 22759/16 and 18 UTILIZING TERMINATIONS PER MFR. SPECIFICATIONS AND INSTALLED HARNESS I.A.W. AC 43.13, APP. 2A, PARA 27 AND MFR. RECOMMENDATIONS.
- PERFORMED STATIC LOAD TEST ON RACK ASSEMBLY PER AC 43.13, APP. 2A, PARA. 1 THROUGH 3.
- RECOMPUTED WEIGHT AND BALANCE. TOTAL ELECTRICAL LOAD DOES NOT EXCEED 80% capacity.
- REVISED EQUIPMENT LIST.

- - - - - THE END - - - - -

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

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.

1. AIRCRAFT	MAKE CESSNA	MODEL 182J
	SERIAL NO. 18265715	NATIONALITY AND REGISTRATION MARK N2615F
2. OWNER	NAME (As shown on registration certificate) WHITE, BLAIR	ADDRESS (As shown on registration certificate) P. O. BOX 1980 MURPHYS, CA 95247

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 SUPERPLANE CALAVERAS COUNTY AIRPORT 3600 CAROL KENNEDY DRIVE SAN ANDREAS, CA 95249	B. KIND OF AGENCY U.S. CERTIFICATED MECHANIC FOREIGN CERTIFICATED MECHANIC <input checked="" type="checkbox"/> CERTIFICATED REPAIR STATION MANUFACTURER	C. CERTIFICATE NO. CLASS I & 3 UPNR076L
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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 FEBRUARY 26, 1993	SIGNATURE OF AUTHORIZED INDIVIDUAL <i>Paul R. Davids</i> Paul R. Davids
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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 PT. STANDARDS INSPECTOR	MANUFACTURER	INSPECTION AUTHORIZATION	OTHER (Specify)
	FAA DESIGNEE	<input checked="" type="checkbox"/> REPAIR STATION	CANADIAN DEPARTMENT OF TRANSPORT INSPECTOR OF AIRCRAFT	
DATE OF APPROVAL OR REJECTION FEBRUARY 26, 1993	CERTIFICATE OR DESIGNATION NO. UPNR076L	SIGNATURE OF AUTHORIZED INDIVIDUAL <i>Paul R. Davids</i> Paul R. Davids		

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

- INSTALLED WHEEL PANT KIT IN ACCORDANCE WITH STC# SA22381 NM.
- INSTALLED FLAP & AILERON KIT IN ACCORDANCE WITH STC# SA 2382 NM.
- FLIGHT TEST SATISFACTORILY COMPLETED.

----- THE END -----

ADDITIONAL SHEETS ARE ATTACHED

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

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.

1. AIRCRAFT	MAKE Cessna	MODEL 182J
	SERIAL NO. 18256715	NATIONALITY AND REGISTRATION MARK N2615F
2. OWNER	NAME (As shown on registration certificate) Pease, Norman C. Pease, Janet E.	ADDRESS (As shown on registration certificate) 48 Donald Dr. Orinda, CA 94563

3. FOR FAA USE ONLY

4. UNIT IDENTIFICATION

5. TYPE

	MODEL	SERIAL NO.	5. TYPE	
			REPAIR	ALTERATION
AIRFRAME	(As described in item 1 above)			XX
POWERPLANT				
PROPELLER				
APPLIANCE	TYPE			
	MANUFACTURER			

6. CONFORMITY STATEMENT

A. AGENCY'S NAME AND ADDRESS	B. KIND OF AGENCY	C. CERTIFICATE NO.
Redwood Aviation Ent. 2238 Airport Blvd. Santa Rosa, CA 95401	<input type="checkbox"/> U.S. CERTIFICATED MECHANIC	407-15
	<input type="checkbox"/> FOREIGN CERTIFICATED MECHANIC	R-I&II
	<input checked="" type="checkbox"/> CERTIFICATED REPAIR STATION	L-R
	<input type="checkbox"/> MANUFACTURER	L-SS

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 5/20/80	SIGNATURE OF AUTHORIZED INDIVIDUAL <i>Robert D. Lorda</i> Robert D. Lorda 2291894
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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 FLT. STANDARDS INSPECTOR	MANUFACTURER	INSPECTION AUTHORIZATION	OTHER (Specify)
		FAA DESIGNEE	<input checked="" type="checkbox"/> REPAIR STATION	CANADIAN DEPARTMENT OF TRANSPORT INSPECTOR OF AIRCRAFT
DATE OF APPROVAL OR SECTION 5/20/80		CERTIFICATE OR DESIGNATION NO. 407-15	SIGNATURE OF AUTHORIZED INDIVIDUAL <i>Robert D. Lorda</i> Robert D. Lorda 2291894	

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 Cessna RT515R system. Installed King KX175B, KI201C, Comant CI121. Com. Antenna. Equipment installed in accordance with manufacturer's recommendations and AC43-13, 1A Chapter 11 Section 1,2,3,7, Chapter 13, Chapter 15 Section 1,2,4,5,6, AC43-13, 2A Chapter 1,2,3. New weight and balance computed.

END

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

Form Approved
 Budget Bureau No. 04-10,001
 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) for instructions and disposition of this form.

1. AIRCRAFT	MAKE CESSNA	MODEL 182J
	SERIAL NO. 182256715	NATIONALITY AND REGISTRATION MARK N2615F
2. OWNER	NAME (As shown on registration certificate) PEASE, Norman C. Janet E.	ADDRESS (As shown on registration certificate) 48 Donald Drive Orinda, Calif. 94563

3. FOR FAA USE ONLY

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	B. KIND OF AGENCY	C. CERTIFICATE NO.
Robert A. RHOADS 5880 Sandy Lane Loomis, Calif. 95650	<input checked="" type="checkbox"/> U.S. CERTIFICATED MECHANIC <input type="checkbox"/> FOREIGN CERTIFICATED MECHANIC <input type="checkbox"/> CERTIFICATED REPAIR STATION <input type="checkbox"/> MANUFACTURER	m 1208664

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 11/25/75	SIGNATURE OF AUTHORIZED INDIVIDUAL <i>Robert A. Rhoads</i> Robert A. RHOADS
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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 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 11/25/75	CERTIFICATE OR DESIGNATION NO. 1208664	SIGNATURE OF AUTHORIZED INDIVIDUAL <i>Robert A. Rhoads</i> Robert A. RHOADS		

1. Installed the following:
 - a. Brittan B2C Basic Stabilization Kit (CSA-1)
 - b. Brittan B11 AccuTrak Kit #410-019-505
2. Approved basis for Auto Pilot
 - a. STC #SA1473WE
 - B. STC #SA1455WE
3. All work accomplished using manufactures installation and service instructions and AC43-13-1 and AD43-13-2, chapters 2 and 3.
4. Equipment list revised
5. Flight handbook revised
6. Weight and balance revised
7. Log book entry complied with

END

ADDITIONAL SHEETS ARE ATTACHED

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 the following radio equipment:

- 1 ea. King KMA-12 audio amp./marker beacon panel
- 1 ea. King KX-160 nav./comm. with KS-505 power supply and KI-211 omni/glide slope head.
- 1 ea. King KR-80 A.D.F. and antenna
- 1 ea. King KN-60 D.M.E.
- 1 ea. Wilcox 1014 A transponder and remote control unit.

All work conforms to the standards set forth in F.A.R. part 43 and the equipment manufacturers installation instructions. Continuous electrical demand does not exceed 80% of system capacity.
Nothing follows.

ADDITIONAL SHEETS ARE ATTACHED