



CIVIL AIR PATROL
UNITED STATES AIR FORCE AUXILIARY

DATE: _____

MEMORANDUM FOR: NHQ CAP/LGM

FROM: HQS _____ CAP/CC

SUBJECT: AIRCRAFT MAJOR MAINTENANCE REIMBURSEMENT REQUEST

N NUMBER: MODEL: TTA: TTSMOH:

TYPE OF MAINTENANCE REQUESTED (CHECK ONE):

- ENGINE AIRFRAME INTERIOR AVIONICS INSTRUMENTS AD/SB HSI

DESCRIPTION OF WORK:

COST ESTIMATES: (ESTIMATES FOR PARTS AND LABOR ARE REQUIRED) IF THE TOTAL ESTIMATE OF THE REPAIR EXCEEDS \$2,500, PROVIDE TWO ESTIMATES FROM SEPARATE VENDORS.

VENDOR LABOR: VENDOR PARTS: NHQ PARTS:
\$ \$ \$

MAKE PAYMENT TO (CHECK ONE):

PROVIDE VENDOR NAME, MAILING ADDRESS & PHONE NUMBER FOR PARTS SHIPMENT AND/OR PAYMENT

REGION/WING []

OR

VENDOR []

If NHQ is paying vendor, mailing address and phone number required.

PRINT NAME WING COMMANDER/ MAINTENANCE OFFICER

SIGNATURE

PHONE #: () _____

FAX#: () _____

E-MAIL: _____

Table with 2 columns: GOOD FOR 90 DAYS, FOR NHQ CAP USE ONLY. Rows: CONTROL NUMBER, ISSUE DATE.