Federal Aviation Admin Flight Standards District 26805 East 68 th Avenue	ct Office , Suite 200	= 11 8 _{1 22}	
PAY 303-342-1176	49-0339		
o Whom It May Conce	rn:	24 25	
his is my annual prog	ram letter for the follow	ving aircraft certified i	n Experimental
xhibition/Air Racing fi	rom,Month & Ye	ear Mont	h & Year
l Number:	Seri	al Number:	
Make:	Mod	Model:	
Aircraft's Home Base A	Airport:	Des	ignator:
Registered Owner:		Phone:	
	4		
_			
PURPOSE:			
Estimated time or num	ber of flights:		
plan to attend the follo		e next year:	
plan to attend the following	owing events within th	e next year:	AIRPORT ID
plan to attend the follo		e next year:	AIRPORT
plan to attend the follo	owing events within th	e next year:	AIRPORT
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plan to attend the follo	owing events within th	e next year:	AIRPORT
DATES OF ATTENDANCE 1. This program will This program ma	owing events within th	LOCATION (City & State) cal FSDO annually. or cancel events, by s	AIRPORT
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