



# Data Submittal Form

90-33769 R2

TO: Hawker Beechcraft Corporation  
 Supplier Data B43-South  
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From: Company Name\*: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 E-Mail Address\*: \_\_\_\_\_  
 Contact Person\*: \_\_\_\_\_  
 (Responses will be sent to this address)

ATTN (HBC Contact Name): \_\_\_\_\_ Date: \_\_\_\_\_  
 Title: \_\_\_\_\_

Supplier P/N*: _____	Program: _____
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Notification of change for information only (concurrence not required)  \*Required Field  
 Supplier proposed FAA Classification  Major  Minor  
 Response preference (check one)  Email  Mail

### Below HBC Only

#### Document Review

- Approved (See Comments)
- Approved with change (See Comments)
- Not Approved (See Comments)
- Additional Data Req. (See Comments)

#### Document Approval

- Approved (See Comments)
- Approved with change (See Comments)
- Not Approved (See Comments)
- Additional Data Req. (See Comments)

#### Responding HBC Representative

Signed: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

A copy of this document must be returned to the Supplier, attached with any response. A copy will be kept in the CM Dept.

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