1980-2005
25th Anniversary

Aspen Helicopters INC

Oxnard, California 93030

Date _____

1 st Pilot _____

2nd Pilot _____

Copilot _____

Base _____

A/C# _____

Type _____

_____
CUSTOMER

_____
ADDRESS

_____

_____
Contract #, BILLEE CODE OR PO.#

WEATHER

Departure _____

Enroute _____

Destination _____

Alternate _____

PASSENGER NAMES	COMPANY I PAX	WGT I	CARGO	WGT	PAX I	LOCATIONS	START TIME	SHUTDOWN	FLIGHT TIME
			Total PAX						

☐ SEE ATTACHED MANIFEST

REMARKS:

TOTAL TIME

STDBY TIME

WEIGHT & BALANCE

	Flight #1 WGT.	IN.	MOM	Right #2 WGT.	IN.	MOM	Flight #3 WGT.	IN.	MOM
Empty									
Cargo (nose)									
cargo (nac.)									
Fuel (main)									
Fuel (outboard)									
Pilot(s)									
Row 1									
Row 2									
Row 3									
Row 4 or cargo side									
Cargo (rear)									
TOTAL									
MAGTOW	☐			☐			☐		
CG/MOM Limits	_____ to _____			_____ to _____			_____ to _____		
A/C within Wgt. & Bal.	_____			_____			_____		

CONDITIONS OF FLIGHT

TOTAL TIME	_____	OFFSHORE	_____
DAY	_____	PLATFORM LDG.	_____
NIGHT	_____	SHIP LDG.	_____
IFR	_____	MTN	_____
DAY T/O	_____	EXT	_____
DAY LDG.	_____	L/L	_____
NIGHT T/O	_____	PART 91	_____
NIGHT LDG.	_____	END HOBBS	_____
INST APP	_____	START HOBBS	_____
		TOTAL HOBBS	_____

☐ SEE ATTACHED WEIGHT AND BALANCE

Pilot's Signature _____ Remarks _____

CUSTOMER COPY