

**NATIONAL TRANSPORTATION SAFETY BOARD
EVIDENCE CONTROL**

ACCIDENT NUMBER:
ERA14LA178

For Use In All Modal Investigations

OFFICE Aviation Safety	DATE OF ACCIDENT 3/30/2014	ACCIDENT LOCATION (City & State) BAY ST. LOUIS, MS
EVIDENCE OBTAINED BY:		
☐ EVIDENCE OBTAINED FROM:	LOCATION OR PERSON INFORMATION	DATE
☒ EVIDENCE RECEIVED FROM:	LARRY LOEDING	4/8/2014
EVIDENCE CONTROL NUMBER ERA14LA178-001 -	D'Iberville, MS 39540	GROUP IIC
DESCRIPTION (☐ BIN ITEM - HAS BEEN SEPARATED ☐ TWO PARTIAL SEGMENTS OF ALUMINUM FUEL LINES W/ FITTINGS		

OWNER OR OWNER'S REPRESENTATIVE

FIRST NAME: / LAST NAME LARRY LOEDING	LAST NAME:
ADDRESS: D'Iberville MS 39540	
PHONE: [REDACTED]	EMAIL: [REDACTED] @ [REDACTED]
RETURNED ☒	DATE: 6/4/2014
CONTACT: LOEDING	

CHAIN OF CUSTODY

RELEASED BY: LARRY LOEDING (OWNER)	RELEASED TO: R. HICKS IIC	DATE: 4/8/2014
PURPOSE: OBTAIN PARTS FOR EXAMINATION		
RELEASED BY: R. HICKS (IIC)	RELEASED TO: MIKE BUDINSKI RE-30	DATE: 5/25/2014
PURPOSE: LAB EXAM UPS TRACK# 1Z A39 78T 02 9076 9259		
RELEASED BY: JOE EPPERSON RE-30	RELEASED TO: LARRY LOEDING (OWNER)	DATE: 6/4/2014
PURPOSE: RETURN TO OWNER UPS TRACK# 1Z A4E 7150391655510		
RELEASED BY:	RELEASED TO:	DATE:
PURPOSE:		
RELEASED BY:	RELEASED TO:	DATE:
PURPOSE:		

UPS CampusShip: View/Print Label

1. **Ensure there are no other shipping or tracking labels attached to your package.** Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
2. **Fold the printed sheet containing the label at the line so that the entire shipping label is visible.** Place the label on a single side of the package and cover it completely with clear plastic shipping tape. Do not cover any seams or closures on the package with the label. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.
3. **GETTING YOUR SHIPMENT TO UPS**
UPS locations include the UPS Store®, UPS drop boxes, UPS customer centers, authorized retail outlets and UPS drivers.
Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages.
Hand the package to any UPS driver in your area.
Take your package to any location of The UPS Store®, UPS Drop Box, UPS Customer Center, UPS Alliances (Office Depot® or Staples®) or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

FOLD HERE

1 LBS		1 OF 1	
SHIP TO:		DWT: 12,9,4	
MIKE BUDINSKI			
NTSB			
490 L'ENFANT PLAZA EAST, SW			
WASHINGTON DC 20594			
MD 201 9-47			
UPS 2ND DAY AIR		2	
TRACKING #: 1Z A39 78T 02 9076 9259			
BILLING: P/P			
Reference # 1: ERA14LA178			
CS 16.2.03. WNT1E100 51.04.04/2014			

**NATIONAL TRANSPORTATION SAFETY BOARD
MATERIALS LABORATORY DIVISION
RECEIPT OF RETURNED PARTS**

ACCIDENT/INCIDENT IDENTIFICATION		
PLACE:	Bay St Louis, MS	
DATE / VEHICLE:	3/30/2014	Bellanca 8KCAB, N11FS
NTSB NO. / IIC:	ERA14LA178	Ralph Hicks, AS-ERA
THE FOLLOWING PARTS, PIECES OR COMPONENTS, FROM THE ABOVE ACCIDENT/INCIDENT		
2 Segments of aluminum fuel line from fuel header tank Box 10x8x7 1 lbs		
ARE BEING RETURNED VIA (CARRIER NAMED):		UPS Ground
WITH TRACKING NUMBER:		1ZA4E7150391655510
WHICH HAS BEEN ADDRESSED TO:		
NAME :	Larry Loeding	
COMPANY :	Owner	
ADDRESS :	[REDACTED] D'iberville, MS 39540	
TELEPHONE:	[REDACTED]	

PLEASE VERIFY THAT THE ABOVE COMPONENTS HAVE BEEN RECEIVED BY WRITING YOUR NAME, SIGNATURE, AND DATE BELOW THEN SENDING THE COMPLETED FORM TO:

Mike Budinski, CHIEF, MATERIALS LABORATORY DIVISION, (RE-30),
NATIONAL TRANSPORTATION SAFETY BOARD,
490 L'ENFANT PLAZA EAST, SW,
WASHINGTON, D.C. 20594.

A PREADDRESSED, FRANKED ENVELOPE IS ATTACHED FOR YOUR CONVENIENCE.

IF ANY DISCREPANCIES ARE FOUND, IMMEDIATELY CALL (202) 314-6530.

WRITER'S NAME AND INITIALS	Epperson _____ email report	DATE	6-4-2014
NTSB REPRESENTATIVE PACKING PARTS	Epperson	DATE	6-4-2014
NAME AND SIGNATURE OF RECIPIENT OR RECIPIENT'S REPRESENTATIVE	Print _____ Sign _____	DATE	