

|                                                                        |                  |
|------------------------------------------------------------------------|------------------|
| <b>NATIONAL TRANSPORTATION SAFETY BOARD</b><br><b>EVIDENCE CONTROL</b> | ACCIDENT NUMBER: |
|                                                                        | ERA 24FA 206     |

For Use In All Modal Investigations

|                                                                                                                          |                                  |                                                     |
|--------------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------------------------------|
| OFFICE<br><br>Aviation Safety                                                                                            | DATE OF ACCIDENT<br><br>5/2/2024 | ACCIDENT LOCATION (City & State)<br><br>AUGUSTA, GA |
| EVIDENCE OBTAINED BY:                                                                                                    |                                  |                                                     |
| <input checked="" type="checkbox"/> EVIDENCE OBTAINED FROM:                                                              | LOCATION OR PERSON INFORMATION   | DATE                                                |
| <input type="checkbox"/> EVIDENCE RECEIVED FROM:                                                                         | ATLANTA AIR RECOVERY             | 5/4/2024                                            |
| EVIDENCE CONTROL NUMBER<br><br>- -                                                                                       | GRIFFIN, GA                      | GROUP                                               |
| DESCRIPTION ( <input type="checkbox"/> BIN ITEM - HAS BEEN SEPARATED <input type="checkbox"/><br>2 MAGNETOS FROM N629 BE |                                  |                                                     |

OWNER OR OWNER'S REPRESENTATIVE

|                                   |            |
|-----------------------------------|------------|
| FIRST NAME:<br>WBME LLC           | LAST NAME: |
| ADDRESS:<br>WARRENVILLE, SC       |            |
| PHONE:                            | EMAIL:     |
| RETURNED <input type="checkbox"/> | DATE:      |
| CONTACT:                          |            |

CHAIN OF CUSTODY

|                                                                |                                             |                     |
|----------------------------------------------------------------|---------------------------------------------|---------------------|
| RELEASED BY:<br>R. HICKS / IIC                                 | RELEASED TO:<br>PHILLIP GRICE / CONTINENTAL | DATE:<br>5/6/2024   |
| PURPOSE:<br>SHIP UNITS FOR TESTING UPS# 1Z A4E 7150 2998 63265 |                                             |                     |
| RELEASED BY:<br>P. GRICE / CONTINENTAL                         | RELEASED TO:<br>ATLANTA AIR RECOVERY        | DATE:<br>10/16/2024 |
| PURPOSE:<br>RETURN MAGS TO SALVAGE UPS# 1Z 1616 090 3684 78717 |                                             |                     |
| RELEASED BY:                                                   | RELEASED TO:                                | DATE:               |
| PURPOSE:                                                       |                                             |                     |
| RELEASED BY:                                                   | RELEASED TO:                                | DATE:               |
| PURPOSE:                                                       |                                             |                     |
| RELEASED BY:                                                   | RELEASED TO:                                | DATE:               |
| PURPOSE:                                                       |                                             |                     |

**NATIONAL TRANSPORTATION SAFETY BOARD**  
EVIDENCE CONTROL

ACCIDENT NUMBER:  
*ERA24FA 206*

For Use In All Modal Investigations

|                                                                                                                                          |                                                                                  |                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------------------------------------------------------|
| OFFICE<br><br>Aviation Safety                                                                                                            | DATE OF ACCIDENT<br><br><i>5/2/2024</i>                                          | ACCIDENT LOCATION (City & State)<br><br><i>AUGUSTA, GA</i> |
| EVIDENCE OBTAINED BY:                                                                                                                    |                                                                                  |                                                            |
| <input checked="" type="checkbox"/> EVIDENCE OBTAINED FROM:                                                                              | LOCATION OR PERSON INFORMATION<br><br><i>ACCIDENT SITE</i><br><i>AUGUSTA, GA</i> | DATE<br><br><i>5/3/2024</i>                                |
| <input type="checkbox"/> EVIDENCE RECEIVED FROM:                                                                                         |                                                                                  | GROUP                                                      |
| EVIDENCE CONTROL NUMBER<br><br>- -                                                                                                       |                                                                                  |                                                            |
| DESCRIPTION ( <input type="checkbox"/> BIN ITEM - HAS BEEN SEPARATED <input type="checkbox"/><br><i>FIRE-DAMAGED SD CARD FROM GARMIN</i> |                                                                                  |                                                            |

**OWNER OR OWNER'S REPRESENTATIVE**

|                                        |            |
|----------------------------------------|------------|
| FIRST NAME:<br><br><i>WBME LLC</i>     | LAST NAME: |
| ADDRESS:<br><br><i>WARRENVILLE, SC</i> |            |
| PHONE:                                 | EMAIL:     |
| RETURNED <input type="checkbox"/>      | DATE:      |
| CONTACT:                               |            |

**CHAIN OF CUSTODY**

|                                                                               |                                             |                            |
|-------------------------------------------------------------------------------|---------------------------------------------|----------------------------|
| RELEASED BY:<br><i>R. HICKS/11C</i>                                           | RELEASED TO:<br><i>NTSB HQ RE 40</i>        | DATE:<br><i>5/6/2024</i>   |
| PURPOSE:<br><i>MAIL SD CARD TO VEHICLE RECORDERS LAB # 1ZA4E7150292071356</i> |                                             |                            |
| RELEASED BY:<br><i>G. KAWAMOTO/RE-40</i>                                      | RELEASED TO:<br><i>ATLANTA AIR RECOVERY</i> | DATE:<br><i>10/15/2024</i> |
| PURPOSE:<br><i>RETURN SD CARD TO SALVAGE UPS # 1ZA4E7154295823776</i>         |                                             |                            |
| RELEASED BY:                                                                  | RELEASED TO:                                | DATE:                      |
| PURPOSE:                                                                      |                                             |                            |
| RELEASED BY:                                                                  | RELEASED TO:                                | DATE:                      |
| PURPOSE:                                                                      |                                             |                            |
| RELEASED BY:                                                                  | RELEASED TO:                                | DATE:                      |
| PURPOSE:                                                                      |                                             |                            |