

Name of Engineer: _____ ARN _____			Journal Owner to Complete						
Entry No.	Aircraft Type Registration or Work Ref / Job No.	Work Performed (Including type of Maintenance and type of activity)	Was the work carried out under Direct or Routine Supervision?		LAME or Supervisor's Printed Name	Signature	LAME Number or Stamp	Date	MEA Unit & Assess. Condt.
			Direct	Routine					

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Approved by: Assessment Cell

Revision Date: 16/08/2021

Rev: 5.3

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