

# C.A.S.E.

## AIR CARRIER SECTION

### POLICIES AND PROCEDURES

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#### DATABASE CHANGE REQUEST FORM

Send to the Data Base Committee chair (listed in section 5-1-0).

|  |   |
|--|---|
| <b>CACS-10 required for change? Yes <input type="checkbox"/> No <input type="checkbox"/></b> |   |
| <b>Description of Proposed Change, to include requirements and background if applicable:</b> |   |
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|  |   |
|  |   |
| <b>Rationale for Proposed Change:</b>  |   |
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|  |   |
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|  |   |
|  |   |
| <b>Submitter's Name</b>  | <b>Company Name/ID Number</b>                                   |
| <b>Phone Number</b>  | <b>Date</b>   |
| <b>Data Base Committee Approval</b>  | <b>Yes <input type="checkbox"/> No <input type="checkbox"/></b> |
| <b>Testing Scenarios</b>   |   |
| <b>Implementation Date</b>   |   |

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