



The Standard
-PILOT MASTER LOG

ASA-SP-6

Address**Telephone**

Book No. 4

From Date _____

Hours**To Date****Hours**[illegible]

Year 20 ¹¹ Date	Aircraft Type (Make, Model, Variant)	Aircraft Ident. Mark, Reg. No.	Departure & Arrival		Miles Flown	Flight No.	Number of		No. Instr. Appr.	Aircraft Category and Class							Pilot Function				Instructor/ Examiner/ Ck. Pilot	
			From Time	To Time			TO Day Night	LDG Day Night		SE	ME					PIC (Solo, SPIC, PICUS)	Co-Pilot	Dual Received				
2/23/11	C172	N738XG	OPN	OPN			3	3			1	0								1	0	
3/4/11	C172	N738XG	OPN	OPN			2	2			7									7		
3/16/11	C172	N5351H	OPN	OPN			5	5			1	0								1	0	
3/27/11	C172	N5351H	OPN	OPN			7	7			1	0								1	0	
3/31/11	C172	N5351H	OPN	OPN			5	5			1	2								1	2	
4/6/11	C172	N5351H	OPN	OPN			10	10			0	8								0	8	
5/10/11	C172	N5351H	OPN	OPN			8	8			0	8								0	8	
5/22/11	C172	N738XG	OPN	OPN			10	10			1	3								1	3	
5/26/11	C172	N738XG	OPN	OPN			3	3			0	5								0	5	
5/27/11	C172	N738XG	OPN	OPN			5	5			1	0								1	0	
5/28/11	C172	N738XG	OPN	OPN			5	5			0	7								0	7	
5/31/11	C172	N738XG	OPN	OPN			3	3			0	5								0	5	
7/3/11	C172	N738XG	OPN	OPN			3	5			0	4								0	4	
7/5/11	C172	738XG	OPN	OPN			3	3			0	7					0	7				
7/11/11	C172	738XG	OPN	OPN			3	4			0	7					0	7				
7/13/11	C172	738XG	OPN	OPN			6	6			1	1					1	1				
Page Total																	2	5				
Amount Forward																	0					
Total to Date																	2	5				

Operational Conditions										Synthetic FTD			Total Duration of Flight	Remarks, Procedures, Maneuvers, Endorsements, PIC Name
Cross-Country		Night	Actual Instrument		Instrument (Hood)		Time of Session	Type of Instruction	Type and Device No.					
										1/15	1 0	Intro Flight, Taxi, Traffic Pattern, Turn to heading 3, 4/15		
										1/15	7	Radio Proc		
										1/15	1 0	Taxi, Check List, Traffic Pattern, Turn to heading C/D		
										1/15	1 0	Radio Proc, No Flap Landings		
										1/15	1 0	Radio Proc, (5) T/L, Flaps, Traffic Pattern, C/D		
										1/15	1 0	Traffic Pattern, (7) T/L, Flaps, Eng Proc		
										1/15	1 2	Radio Proc		
										1/15	0 2	AFD, Prop for X-country, Radio Proc, Eng Proc, 4000 Alt		
										1/15	0 2	Traffic Pattern		
										1/15	0 8	Traffic Pattern, Eng Proc if L, Sim Eng Failure T/L		
										1/15	0 8	New Soft Field Take Off		
										1/15	1 3	Short Field T/L, No Flap Landings		
										1/15	0 5	10 T/L, Full Flap Landings, Traffic Pattern, Radio Proc		
										1/15	0 5	45° X-land		
										1/15	1 0	Go Around, Sim Eng Failure on Take off		
										1/15	0 7	(3) T/L @ 5000, (1) Sim Eng Failure on Take off @ 5000		
										1/15	0 7	Intro Taxi, X-Country Ops		
										1/15	0 7	Forward Slides, Full Flap Landing		
										1/15	0 5	(3) T/L, Prep for Solo		
										1/15	0 4	(3) T/L, Prep for Solo		
											0 7	Solo		
											0 7	Solo		
											1 1	Solo Pattern traffic		

I certify that the statements made by me on this form are true.

Pilot's Signature

[illegible]

[illegible][illegible]

INITIAL SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) Wayne R. Merrill,
has satisfactorily completed the presolo knowledge exam of §61.87(b), received the
required presolo training required by §61.87(c), and has demonstrated the proficiency
of §61.87(d) and is proficient to make solo flights in (make and model aircraft) _____

SIGNED Cessna 172 N DATE 7-5-14
CFI NO. _____ EXPIRATION DATE 4/15

I certify that (First name, MI, Last name) Wayne R. Merrill,
has received the required training to qualify for local solo flying. I have determined
he/she meets the applicable requirements of §61.87(n) and is proficient to make solo
flights in (make and model aircraft) Cessna 172 N
until (maximum 90 days from date given) 10-5-14

Limitation _____ DATE 7-5-14
SIGNED _____ EXPIRATION DATE 4/15
CFI NO. _____

CROSS-COUNTRY SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) Wayne R. Merrill,
has received the required solo cross-country training and find he/she has met the
applicable requirements of §61.93, and is proficient to make solo cross-country flights
in a (make and model aircraft) Cessna 172

SIGNED _____ DATE 10-5-14
CFI NO. _____ EXPIRATION DATE 4/15

ADDITIONAL AIRPORT WITHIN 25NM SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) _____,
has received the required training of § 61.93(b)(1). I have determined that he/she is
proficient to practice solo takeoffs and landings at (airport name) _____
subject to the following conditions: _____

SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

I certify that (First name, MI, Last name) _____,
has received the required training of § 61.93(b)(1). I have determined that he/she is
proficient to practice solo takeoffs and landings at (airport name) _____
subject to the following conditions: _____

SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

I have reviewed the cross-country planning of (First name, MI, Last name) _____
Wayne R. Merrill and find the planning and preparation
to be correct to make the solo flight from (location) KOPN
to (destination) KOPN via (route of flight) Direct
with landings at (name the airports) KMLT
in a (make and model aircraft) C172 on (date) 10-5-14

List any applicable conditions or limitations: _____
SIGNED _____ DATE 10-5-14
CFI NO. 3 EXPIRATION DATE 4/15

ADDITIONAL SOLO ENDORSEMENTS**90-DAY SOLO**

I certify that (First name, MI, Last name) Wayne R. Morrill,
has received the required training to qualify for local solo flying. I have determined
he/she meets the applicable requirements of §61.87(n) and is proficient to make solo
flights in (make and model aircraft) Cessna 172
until (maximum 90 days from date given) 9-21-14.
Limitations: [REDACTED]
SIGNED _____ DATE 9-21-14
CFI NO. [REDACTED] EXPIRATION DATE 1/15

I certify that (First name, MI, Last name) Wayne R. Morrill,
has received the required training to qualify for local solo flying. I have determined
he/she meets the applicable requirements of §61.87(n) and is proficient to make solo
flights in (make and model aircraft) Cessna 172
until (maximum 90 days from date given) 5-1-15.
Limitations: [REDACTED]
SIGNED _____ DATE 2-1-15
CFI NO. 30 EXPIRATION DATE 1/15

NIGHT SOLO

I certify that (First name, MI, Last name) _____,
has received the required presolo training in a (make and model aircraft) _____
and determined he/she has demonstrated
the proficiency of §61.87(o) and is proficient to make solo flights at night in a
(make and model aircraft) _____.
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

CLASS B SOLO

I certify that (First name, MI, Last name) _____,
has received the required training of §61.95(a) and determined he/she is proficient
to conduct solo flights in (name of Class B) _____
airspace. List any applicable conditions or limitations: _____
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

I certify that (First name, MI, Last name) _____,
has received the required training of §61.95(a)(1) and determined that he/she is
proficient to conduct solo flight operations at (name of airport) _____
List any applicable conditions or limitations: _____
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

REPEAT X/C SOLO (LESS THAN 50 NM)

I certify that (First name, MI, Last name) _____,
has received the required training in both directions between and at both (airport
names) _____ and determined that he/she
is proficient in §61.93(b)(2) to conduct repeated solo cross-country flights over that
route, which is not more than 50NM from the point of departure, subject to the fol-
lowing conditions: _____
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

Each solo cross-country flight: FAR 61.93 (d)

After reviewing the cross country planning of Wayne R. Mierall
I attest that the preflight planning and preparation is correct and that
he/she is prepared to make the solo flight safely under the known
circumstances from KOPN to KOPN via
KACT with landings at KACT in a
C172 on 10-19-14.

Date: 10-19-14

Jef [redacted] YD