

YEAR 20__ DATE	AIRCRAFT MAKE & MODEL	AIRCRAFT IDENT.	POINTS OF DEPARTURE & ARRIVAL		AIRCRAFT CATEGORY		GROUND TRAINER	TYPE OF PILOTING TIME	
			FROM	TO	AIRPLANE SEL	AIRPLANE MEL		DUAL RECEIVED	PILOT-IN- COMMAND
9/14	N807SE	C-172	OXB	ESN	1	8			1 8
9/17	N807SE	C-172	OXB	ESN	2	4		2 4	
10/12	N807SE	C-172	OXB	OXB	1	2			1 2
10/14	N646TB	C-172	OXB	WWD	1	4			1 4
11/14	N646TB	C-172	OXB	OXB	1	1		1 1	
11/13	N807SE	C-172	OXB	OXB	1	4		1 4	
11/15	N197ME	C-172	OXB	OXB	1	4		1 4	
PAGE TOTAL					10 7			6 3	4 4
AMOUNT FORWARD					6 4 6			5 1 6	3 2
TOTAL TO DATE					7 5			5 7 9	1 4 6

CONDITIONS OF FLIGHT					NO. INSTR. APPR.	NO. LDG. DAY NIGHT	TOTAL DURATION OF FLIGHT	REMARKS, PROCEDURES, MANEUVERS
DAY	NIGHT	CROSS- COUNTRY	ACTUAL INSTR.	SIMULATED INSTR.				
1 8		1 8				2	1 8	SOLO TO ESN + RETURN
2 4		2 4				2	2 4	Circle rdn p.p. ESN Remedy, Edge rdn, over climb, show rdn field.
1 2						1	1 2	S-TURNS, STEEP TURNS
1 4						1	1 4	FLIGHT TO WWD + BACK
1 1						1	1 1	Best Prep, MCA, Power off stalls, steep turns
1 4						4	1 4	ALL PROCEDURES 315021 OFST. NEX CAT 11/15
1 4				.5		2	1 4	Test Prep, Low wing, Power off stalls, steep turns, unusual attitudes, short field to - handovers
1 4						2	1 4	Test Prep, Low wing, Power off stalls, steep turns, short field to - handovers
		4 2		5		3	10 7	I certify that the statements made by me on this form are true.
		15 9		3 1		6 4	6 4 8	
		20 1		3 6		10	7 5 5	

PILOT

INITIAL SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) Michael G. Boyer,
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) Cessna 172

SIGNED [Signature] DATE 5/27/14
CFI NO. [Redacted] WET EXPIRATION DATE 5/27/2015

I certify that (First name, MI, Last name) Michael G. Boyer,
has received the required training to qualify for local solo flying. I have deter-
mined he/she meets the applicable requirements of §61.87(n) and is proficient
to make solo flights in (make and model aircraft) C-172 Skyhawk
until (maximum 90 days from date given) 5/27/14

Limitations: Under my direct supervision, WET, Daylight, 5000 feet
SIGNED [Signature] DATE 5/27/2014
CFI NO. [Redacted] WET EXPIRATION DATE 10/2015

ADDITIONAL AIRPORT WITHIN 25NM SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) Michael G. Boyer
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) KSBY
subject to the following conditions:

Ocean City Aviation Inc. Mainland
SIGNED [Signature] DATE 10/12/14
CFI NO. [Redacted] EXPIRATION DATE 1/31/15

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 _____

CROSS-COUNTRY SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) Michael G. Boyer,
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) C-172 Skyhawk

SIGNED [Signature] DATE 7/17/2014
CFI NO. [Redacted] WET EXPIRATION DATE 10/2015

I have reviewed the cross-country planning of (First name, MI, Last name) Michael G. Boyer
and find the planning and preparation to be correct
to make the solo flight from (location) OXB MEU CGE to (destination)
OXB via (route of flight) Direct
with landings at (name the airports) Accomack, Cambridge Airport
in a (make and model aircraft) C-172 on (date) 7/17/2014
List any applicable conditions or limitations: Wing 210KTS Ceiling 7500
SIGNED [Signature] DATE 7/17/14
CFI NO. [Redacted] WET EXPIRATION DATE 10/2015

ADDITIONAL SOLO ENDORSEMENTS

90-DAY SOLO

I certify that (First name, MI, Last name) Michael G. Boyer
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
skyhook until (max 90 days from date given) 11/20/14
Limitations: Day/night, VFR, C-150, OFA, 4000', Direct
SIGNED [Signature] DATE [Signature]
CFI NO. [Signature] EXPIRATION DATE 10/1/2015

I certify that (First name, MI, Last name) Michael G. Boyer
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) C-172
until (max 90 days from date given)

Limitations: Ocean, Airman, WA, etc.

SIGNED [Signature] DATE 10/10/14
CFI NO. [Signature] EXPIRATION DATE 11/24/15

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) Michael G. Boyer
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 following conditions: WV, 381,
GED, CFE, Ocean, Airman, WA, etc.

SIGNED [Signature] DATE 10/10/14
CFI NO. [Signature] EXPIRATION DATE 11/24/15

INITIAL SPORT PILOT ENDORSEMENTS

SOLO FLIGHT 1st 90-DAY

I certify that (First name, MI, Last name) _____, 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) _____ until (maximum 90 days from date given) _____.

DATE _____
EXPIRATION DATE _____

IN CLASS B, C, AND D AIRSPACE (req. each add'l 90-day period)

I certify that (First name, MI, Last name) _____, has received the required training of §61.94(a). I have determined he/she is proficient to conduct solo flights in (name of Class B, C, or D) _____ airspace. List any applicable conditions or limitations: _____.

SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

TAKING THE AERONAUTICAL KNOWLEDGE TEST

I certify that (First name, MI, Last name) Michael G. Boyer, has received the required aeronautical knowledge training of §61.309. I have determined that he/she is prepared for the (name the knowledge test) _____.

Private Pilot Airplane
SIGNED _____ DATE 8/20/2014
CFI NO. _____ EXPIRATION DATE 10/2015

TAKING THE SPORT PILOT PRACTICAL TEST

I certify that (First name, MI, Last name) _____, has received the required training of §§61.309 and 61.311 and met the experience requirements of §61.313. I have determined that he/she is prepared for the (category/class) _____ practical test.

SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

I certify that (First name, MI, Last name) _____, has received the required training and demonstrated satisfactory knowledge of deficient areas from the Sport Pilot knowledge test as required per §61.39 for the practical test.

SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

PASSING THE SPORT PILOT PRACTICAL TEST

I certify that (First name, MI, Last name) _____, has met the training and endorsement requirements of §§61.309, 61.311 and 61.313. I have determined him/her proficient to act as PIC of (category/class) _____ of light-sport aircraft.

SIGNED _____ DATE _____
PILOT CERT # _____ DPE # _____ EXP. DATE _____

PRIVATE PILOT ENDORSEMENTS

I certify that (First name, MI, Last name) _____,
has received the required training of §61.105 and/or I have reviewed the home
study curriculum and have determined he/she is prepared for the (name the
knowledge test) _____.

SIGNED _____ DATE _____

CFI NO. _____ EXPIRATION DATE _____

I certify that (First name, MI, Last name) MICHAEL G. BYER,
has received the required training of §§61.107 and 61.109 and have determined
he/she is prepared for the (name the practical test) PRIVATE P207
PRACTICAL TEST.

SIGNED _____ DATE 7/27/14

CFI NO. _____ EXPIRATION DATE 1/31/15

I certify that (First name, MI, Last name) Michael Byer,
has received the training as required by §61.39(a)(6)(i) within the preceding two
calendar months and have determined that he/she is prepared for the (name
the practical test) Private Pilot and has
demonstrated satisfactory knowledge of subject areas shown to be deficient on
his/her Airman Knowledge Test as required by §61.39(a)(6)(iii). 11/19/14

SIGNED _____ DATE _____

CFI NO. _____ EXPIRATION DATE 10/20/15

COMMERCIAL PILOT ENDORSEMENTS

I certify that (First name, MI, Last name) _____,
has received the required training of §61.125 and/or I have reviewed the home
study curriculum and have determined that he/she is prepared for the (name the
knowledge test) _____.

SIGNED _____ DATE _____

CFI NO. _____ EXPIRATION DATE _____

I certify that (First name, MI, Last name) _____,
has received the required training of §§61.127 and 61.129 and have determined
he/she is prepared for the (name the practical test) _____.

SIGNED _____ DATE _____

CFI NO. _____ EXPIRATION DATE _____

I certify that (First name, MI, Last name) _____,
has received the training as required by §61.39(a)(6)(i) within the preceding
calendar months and have determined that he/she is prepared for the (name
the practical test) _____.

demonstrated satisfactory knowledge of subject areas shown to be deficient on
his/her Airman Knowledge Test as required by §61.39(a)(6)(iii). _____

SIGNED _____ DATE _____

CFI NO. _____ EXPIRATION DATE _____

I HAVE REVIEWED THE CROSS-COUNTRY PLANNING OF MICHAEL G. ISLER AND FIND THE PLANNING & PREPARATION
TO BE CORRECT TO MAKE THE SAID FLIGHT FROM HONOLULU TO KESU & RETURN WITH LANDINGS AT KESU & HONOLULU
VIA DIRECT IN A C-172 ON 10/1/14. - O.C. AVIATION W/ REQUIREMENT.

exp 1/2/15 10/1/14.

I certify that Michael G. Boyer has presented to me a
Birth Certificate, no [REDACTED] establishing that he is
a US citizen or national in accordance with 49 CFR 1552.3 (h)

Date 2-22-14, S/S Edward J. Drinkwater Cert# [REDACTED] Exp. 11/14

TSA Citizenship Endorsement

I certify that Michael G. Boyer has presented to
me a original birth certificate

Number [REDACTED] establishing that
she/he is a US citizen or national per 49 CFR 1552.3(h)

Date: 4/12/14 [REDACTED]

I HAVE REVIEWED THE CROSS-COUNTRY
PLANNING OF MICHAEL G. BOYER AND FOUND
THE PLANNING AND PREPARATION TO BE
CORRECT TO MAKE THE SOLO FLIGHT FROM KMSV
TO KMSV - RETURN WITH LANDINGS AT KMSV
VIA DIRECT IN A C-130 ON 7/2/14, DC
AVIATION WA MEMO. 7/2/14.

[REDACTED] 11/14/15

I HAVE REVIEWED THE CROSS-COUNTRY PLANNING
OF MICHAEL G. BOYER AND FOUND THE PLANNING
AND PREPARATION TO BE CORRECT TO MAKE THE
SOLO FLIGHT FROM KMSV TO KMSV - RETURN, WITH
LANDINGS AT KMSV VIA DIRECT IN A C-130
ON 2/19/14. DC AVIATION WA MEMO. 2/19/14

[REDACTED] 11/14/15

Endorse student pilot certificate for initial cross-country flight.

I certify that _____ has received the required solo cross-country training. I find he/she has met the applicable requirements of § 61.93, and is proficient to make solo cross-country flights in a _____.

Date: _____ Signed: _____

CFI: _____ EXP: _____

I have reviewed the cross country planning of Michael G. Boyer and find the planning and preparation to be correct to make the solo flight from (OXB) Olean City to (WLD) Wayne County to (EDY) Summit to Olean City (OXB) via Direct with no stops at WLD, EDY and OXB in a Cessna 172 on 7/30/2014. Conditions: winds < 15 Kts. Ceiling 5000 or higher, Daylight, 10/1/14

Signed _____ Date 7/30/2014

CFI _____ FII NEI Expires 10/2015

Note: I have reviewed the flight plan (ATR 135° RADIAL 7.5 Miles, Start 10 mile) and will advise him of minimum altitude above 3000 feet.



AIRCRAFT OWNERS AND PILOTS ASSOCIATION



Name: Michael Bover
Member ID: [REDACTED]

CONDITIONS OF ISSUE: This certificate shall be in the personal possession of the airman at all times while exercising the privileges of his or her airman certificate. The issuance of a medical certificate by an Aviation Medical Examiner may be reversed by the FAA within 60 days. Section 61.19 of Title 14 of the Code of Federal Regulations (14 CFR part 61) sets forth the duration of a student pilot certificate. Unless otherwise limited, the duration of a medical certificate is set forth in 61.23. The holder of this certificate is governed by the provisions of 61.53 relating to medical deficiency (14 CFR part 61).

CERTIFICATED INSTRUCTOR'S ENDORSEMENT FOR STUDENT PILOTS

I certify that the holder of this certificate has met the requirements of the regulations and is competent for the following:

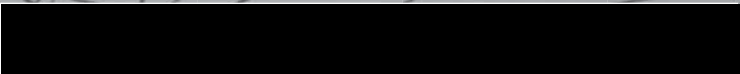
	Date	Make and Model of Aircraft	Instructor's Signature	Instructor's Cert.	
				No.	Exp. Date
A. To Solo The Following Aircraft	5/23/14	C-172	[Signature]	[REDACTED]	10/2015
B. To Make Solo cross-country Flights	7/	Aircraft Category Airplane Cessna 172	[Signature]	[REDACTED]	10/2015
		Glider			
		Rotorcraft			

Passenger-Carrying Prohibited
STUDENT PILOT CERTIFICATE

I HAVE REVIEWED THE CROSS-COUNTRY
FLYING OF MICHAEL C. BOVER AND FIND
[REDACTED] TO BE [REDACTED]

Endorse
for initial

Private **ASEL** FLIGHT TEST
SUCCESSFULLY COMPLETED THIS
DATE Nov. 19 2014 . AIRCRAFT
MAKE MODEL C-172
AIRCRAFT # N64678


DESIGNATED PILOT EXAMINER
DESIGNATION #EA-07-61

THINK FLIGHT