CERTIFICATE OF TRUE COPY

I HEREBY CERTIFY that the attached is a true copy of Wesley Bryan Caves, date of birth Certification Branch, Federal Aviation Administration,	Supporting documents are or file in 1
	Signed and dated at Oklahoma City, Oklahoma this 1st day of April, 2013
	by Tina T. Ly
-	Compliance Specialist, Airmen Certification Branch (Title)
*************	(*************************************
I HEREBY CERTIFY th	at I, Tona K. Gates
is now and value at the time of signing, Manager, Airme Administration Department of Transportation, the legal faith and crease should be should b	n Certification Branch, Federal Aviation custodian of the aforesaid records, and that full
	IN WITNESS WHEREOF, I have hereunto subscribed my name and caused the seal of the U.S. Department of Transportation to be affixed this 1st day of April, 2013 at Oklahoma City, Oklahoma
The of one	Tona K. Gates
	(Signature)
_	Manager, Airmen Certification Branch
	(Title)
	Civil Aviation Registry U. S. Department of Transportation
ORM DOT F (10.94)	o. o. populinom of remiportation

FORM DOT F (10-94)

	II. TEMPO	RARY AIRMAN	CERTIFICA			III.Certificate No.
THIS CERTIFIE	S THAT IV.	WESLEY BRYAN	CAVES			
		TULSA OK 74132	2			
DATE OF BIRTH	HEIGHT is	n WEIGHT lbs	HAIR	EYES	SEX	NATIONALITY VI.
		ly qualified and is he to exercise the privi			e with the	e conditions of issuance of
Ratings and L AIRPLANE SIN RA-390S		E LAND; AIRPLAN	IE MULTIENO	GINE LAND;	INSTRU	JMENT AIRPLANE;
ENGLISH PRO	PFICIENT				The state of the s	

vii Airman's Signature XIII. THIS IS AN ORIGINAL ISSUANCE X A REISSUANCE OF THIS DATE OF SUPERSEDED AIRMAN CERTIFICATE GRADE OF CERTIFICATE 2/26/2012 EXAMINER'S DESIGNATION NO. OR INSPECTOR'S REG NO. BY DIRECTION OF THE ADMINISTRATOR X. DATE OF ISSUANCE X. SIGNATURE OF EXAMINER OR INSPECTOR 05/04/2012 05:20:01 PM KEVIN WALTER ROTHFUS DATE DESIGNATION EXPIRES IACRA E-SIGNED APPLICATION WP21 8/31/2012 FAA FORM 8060-4 (8-79) USE PREVIOUS EDITION IACRA Equivalent Application ID: 566869

XIV. CONDITIONS OF ISSUANCE

This is an interim certificate issued subject to the approval of the Federal Aviation Administration pending the issuance of a certificate of greater duration. It becomes void-

- 1. Upon the receipt of a certificate of greater duration to replace it;
- 2. Upon finding by the FAA that an error has been made in its issuance;
- 3. Upon a finding by the FAA that it was issued illegally or as the result of fraud or
- 4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and
- 5. In any case, at the expiration of 120 days from date of issuance.

	DEPARTMENT OF TRANSF	NITED STATES OF AMERICA ORTATION — FEDERAL AVIATION ADMINISTI AIRMAN CERTIFICATE					
	THIS CERTIFIES THAT	iv. WESLEY BRYAN CAVES					
		v.					
		TULSA OK 74132					
	DATE OF BIRTH HEIGHT	WEIGHT HAIR EYES	SEX NATIONALITY vi.				
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/ii. AIRMAN'S SIGNATURE	BY DIRECTIC	N OF THE ADMINISTRATOR	EXAMINER'S DESIGNATION NO. OR INSPECTOR'S REG. NO.				
RMA	x. DATE OF ISSUANCE xi. SIGNATURE OF EXAMINER OR INSPECTOR						
ii. A	05/04/2012 05:20:01 PM KEVIN WALTER ROTHFUS DATE DESIGNATION EXPIRES						
_	IACRA E-SIGNED APPLICATION WP21 8/31/2012						
IAAF	Om Coods (Core) COL PREVIOC	S EDITION Application Numbe	r: 566869 IACRA Equivalent				
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pend	ing the issuance of a ce	tificate of greater duration. It beca	omes void –				
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- Upon the receipt of a certificate of greater duration to replace it;
 Upon a finding by the FAA that an error has been made in its issuance;
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 Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and
 In any case, at the expiration of 120 days from date of issuance.



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E. Addre	ss							F. Ci	tizenship (Citizenship	p) Sp	ecify		•	speak, write, inglish langu	
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	C. 1. Name and Location of Training Agency or Training Center 1a. Certification Number Approved					er										
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Signature	of Appli	icant WE	SLEY B	RYAN CAV	ES E-SIGN			····					Date ()	5/04/20	12 01:50:0	9 PM

	***************************************	Recommendation	tales tha tast	
	I have personally instructed the applicant an		take the test.	Certificate Expires
Date	Instructor's Signature (Print Name & Sign)	Cent	moate No.	3/31/2013
05/04/2012 01:46:59 PM	MARVIN DENNIS ALEXANDER E-SIGN	Recommendation		3/31/2013
This applicant has successfully co		Recommendation		Course, and is
recommended for certification or I		test.		· ·
Date	Agency Name and Number		Official's Signatu	ire
			Title	
	Designated Examiner or Airm	an Cartification Bancocart	,	
pertinent requirements of 14 I have personally reviewed to I have personally tested and	_	cord, and certify that the individ sought. nd it to be appropriate and in ord pertinent procedures and standa (Original Attached)	ual meets the der, and have returned	
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CA			1 2.1	SIM) 1) 2.0 FTD) 2) 0.0
Certificate or Rating for Which Te	sted	Type(s) of Aircraft Used	Registration I	No.(s)
PRIVATE PILOT, AIRPLANE MULTIE RATING RA-390S	NGINE LAND ADDED TYPE	1) RAYTHN-390-390 2)	1) N26DK	2)
Date	Examiner's Signature (Print Name & Sign)	Certificate No.	Designation I	No. Designation Expires
05/04/2012 05:20:01 PM	KEVIN WALTER ROTHFUS E-SIGN			8/31/2012
	Evaluator's Record (Use For AT			
•	Inspector Examiner	Signature and	Certificate Number	Date Date
Oral		KEVIN WALTER ROTHFUS E-	SIGN	05/04/2012 05:18:17 PM
Approved Simulator/Training Dev	rice Check		0.01	05/04/0040 05:40:24 DM
Aircraft Flight Check Advanced Qualification Program	남 씀	KEVIN WALTER ROTHFUS E-	SIGN	05/04/2012 05:19:21 PM
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I have personally tested this appl and or necessary requirements w	Aviation Safety Inspector icant in accordance with or have otherwise vo		es with pertinent proce	dures, standards, policies,
<u> </u>	ficate Issued (Original Attached)	Disapproved Disapprov	al Notice issued (Orio	ginal Attached)
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Location of Test (Facility, City, Sta	ace)		Ground S	Simulator/FTD Flight
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Certificate or Rating for Which Te	ested		2) 1	· ·
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Student Pilot Certificate Is	└──		☐ Flight Instructor ☐ Renewal	Ground Instructor
Examiner's Recommenda		Competence License	Reinstate	ment
ACCEPTED RE		ed Course Graduate		enewal Based on
1		pproved FAA Qualification Crite		Training Course
Aeromedical Certification		FF	Test	Duties and
			Graduation Certificate	Responsibilities e No. Date
Training Course (FIRC) Name			Graduation Certificati	
Date Inspect	or's Signature (Print Name & Sign)		Certificate N	o. FAA District Office
				WP21
Attachments:	X Airman's Identification (ID)	ID:		
Student Pilot Certificate (co		Name: CAVES	, WESLEY BRYAN	······································
Knowledge Test Report	Form of ID	Date of Birth:		
X Temporary Airman Certifica	Number	Date of biltil		
Notice of Disapproval Superseded Airman Certific	ate Expiration Date	Certificate Number:		
LI Gaporadada Aliman Gertilic		Email Address:		
	Telephone Number			NON- 0052 DD 692 500



Department of Transportation Federal Aviation Administration

Airman Certificate and/or Rating Application

ADDITIONAL ADDRESS INFORMATION

Name (Last, First, Middle) CAVES, WESLEY BRYAN

Social Security Number DO NOT USE

Certificate Number Date Issued

5/4/2012

Permanent	Mailing	Address:

Address the applicant requests the certificate to be sent:

Street

P.O. Box

City, State, Zip Code TULSA OK 74132

Street P.O. Box

City, State, Zip Code

Physical	Description	as	entered:

Comments:

FAA Form 8710-1 (4-00) Supersedes Previous Edition

I. UNITED STATES OF AMERICA
DEPA.. (MENT OF TRANSPORTATION-FEDERAL AVIATION ADMINISTRATION

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III.Certificate No. PENDING

THIS	CFR'	TIFIFS	THAT

IV. WESLEY BRYAN CAVES

V.

TULSA OK 74132

DATE OF BIRTH	HEIGHT	WEIGHT	HAIR	EYES	SEX	NATIONALITY	VI.
	in	lbs					

IX. has been found to be properly qualified and is hereby authorized in accordance with the conditions of issuance or the reverse of this certificate to exercise the privileges of: PRIVATE PILOT

Ratings and Limitations

AIRPLANE SINGLE ENGINE LAND; AIRPLANE MULTIENGINE LAND; INSTRUMENT AIRPLANE

ENGLISH PROFICIENT



Airman's Signature

₽

THIS IS AN ORIGINAL ISSUANCE X A REISSUANCE OF THIS DATE OF SUPERSEDED AIRMAN CERTIFICATE

GRADE OF CERTIFICATE

BY DIRECTION OF THE ADMINISTRATOR

X. DATE OF ISSUANCE

O2/26/2012 08:49:29 PM

JENNIFER JAMES WISE

JACRA E-SIGNED APPLICATION SW15

TACRA E-SIGNED APPLICATION SW15

DATE OF SUPERSEDED AIRMAN CERTIFICATE

2/22/2012

EXAMINER'S DESIGNATION NO.

OR INSPECTOR'S REG NO.

DATE DESIGNATION EXPIRES

12/31/2014

FAA FORM 8060-4 (8-79) USE PREVIOUS EDITION

Application ID: 545673

IACRA Equivalent

XIV. CONDITIONS OF ISSUANCE

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- 3. Upon a finding by the FAA that it was issued illegally or as the result of fraud or
- 4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and
- 5. In any case, at the expiration of 120 days from date of issuance.

	DEPARTMENT OF TRANSP	NITED STATES OF AMERICA ORTATION - FEDERAL AVIATION ADMINISTRATION AIRMAN CERTIFICATE	iii. CERTIFICATE NO. PENDING					
	THIS CERTIFIES THAT	iv. WESLEY BRYAN CAVES						
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S. S.	BY DIRECTION OF THE ADMINISTRATOR EXAMINER'S DESIGNATION NO. OR INSPECTOR'S REG. NO.							
vii. AIRMAN'S	x. DATE OF ISSUANCE	xi. SIGNATURE OF EXAMINER OR INSPECTOR						
ii. Ali	02/26/2012 08:49:29 PM	JENNIFER JAMES WISE	DATE DESIGNATION EXPIRES					
			2/31/2014					
FAAF	orm 8060-4 (8-79) USE PREVIOU	S EDITION Application Number: 54567	3 IACRA Equivalent					
		VII	_					

XIV. CONDITIONS OF ISSUANCE

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3. Upon a finding by the FAA that is was issued illegally or as the result of fraud or mis-representation;

4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and

- Inspector if so requested; and
 5. In any case, at the expiration of 120 days from date of issuance.

Form	Approved	OMB No:	2120-0021
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E. Addre								F. Ci	tizenship(JSA	Citizenshi _l Other	p) Spe	ecify			speak, write English langu	124
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B.				rvice					2. D	SIM) ate Rated		FTD)) 10.0 2 e and Service	
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— Co	ourse		2.0	Curriculum F	rom Which	Graduate	d							3. Date		
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Ca	empletion errier's Ap aining Pro	proved		Name of Air	Carrier					2. Date		3. Which	Curriculum	Upgra	ade	Transition
III Record	of Pilo	t Time (Do	not wri	te in the sha												
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Rotor- craft				SIC		:	SIC				PIC SIC	PIC SIC				
Powered Lift				SIC	-		PIC SIC				PIC	PIC SIC				
Gliders													*			
Lighter Than Air																
Simulator																
Training Device																
PCATD									***							
V. Applica	IV Have you failed a test for this certificate or rating? Yes X No V. Applicant's Certification - I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that															
moy are to	DC 001	isidered a	s part of	tile basis it	or issuance	of any FA	A certificate	to me. I ha	ave also rea	ad and unc	derstand th	ne Privacy A	ct stateme	nt that acc	edge and I ag companies th	ree inat is form.
Signature			SLEY B	RYAN CAV	ES E-SIGN								Date 0	2/26/2012	2 08:41:29	PM

	I have nerconally instr	Instructor's ucted the applicant and	s Recommenda d consider this per		e the test	· ()	,	
Date		e (Print Name & Sign)	- consider this het	Certifica			Certificat	te Expires
02/26/2012 05:26:07 PM	THOMAS ROGER LUC			2.350		. [6/30/201	
TE OO.EO.O. F IVI			Recommendat	ion				
This applicant has successfully							Cou	urse, and is
recommended for certification of		lumbar		_ test.	Official's Ci	ture		
Date	Agency Name and N	vumper			Official's Signa	iuie		
			•		Title			
Student Pilot Certificate Is X I have personally reviewed pertinent requirements of I have personally reviewed I have personally tested a	sued (Copy attached) d this applicant's pilot log 14 CFR part 61 for the pi d this applicant's graduat	lot certificate or rating a ion certificate, and four int in accordance with p	cord, and certify the sought. Indicate the sought it to be appropripertinent procedure.	hat the individual riate and in order, res and standards	meets the			
		pproval Notice Issued						
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Certificate or Rating for Which PRIVATE PILOT, INSTRUMENT AI			Type(s) of Aircra PA-44-180			., 140.(5)	2)	
				2)	1) N290ND	N.1.	2)	tion C.
Date	Examiner's Signatur	re (Print Name & Sign)	[Certificate No.	Designation	11 140.	⊔esigna	tion Expires
02/26/2012 08:49:29 PM	JENNIFER JAMES WIS	SE E-SIGN ecord (Use For AT F					12/31/20	014
Oral Approved Simulator/Training D Aircraft Flight Check Advanced Qualification Progra	Ins Device Check	pector Examiner		Signature and Ce				Date
				n D				
I have personally tested this ap and or necessary requirements Approved - Temporary Ce	oplicant in accordance with the result indicated	below.	erified that this app	n Report plicant complies v Disapproval N		riginal Att	tached)	, policies,
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Certificate or Rating for Which	Tested		Type(s)) of Aircraft		Registrat		
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Reissue or Exchange o	dation REJECTED f Pilot Certificate nducted - report forwarde	Military (Foreign Approve	or Rating Based or Competence License ed Course Gradual pproved FAA Qua	te		atement Renewal B		
Training Course (FIRC) Name		, , , , , , , , , , , , , , , , , , ,		G	raduation Certific		Date	
Date Inspe	ector's Signature (Print	Name & Sign)			Certificate	No.	FAA Dis	strict Office
Attachments:	X Airman	's Identification (ID)		ID:	L		<u> </u>	
Student Pilot Certificate (copy) PASSPORT				ESLEY BRYAN			
Knowledge Test Report	Form of ID	_						
X Temporary Airman Certif	Number		Date of		1			
Notice of Disapproval Superseded Airman Cert			Certificate Nu Email Add	mber: PENDING				
	Telephone	Number	Linaii Add					



Department of Transportation Federal Aviation Administration

Airman Certificate and/or Rating Application

ADDITIONAL ADDRESS INFORMATION

Name (Last, First, Middle) CAVES, WESLEY BRYAN

Social Security Number

PENDING

Certificate Number
Date Issued

2/26/2012

Permanent	Mailing	Address:

Address the applicant requests the certificate to be sent:

Street

P.O. Box

City, State, Zip Code TULSA OK 74132

Street

P.O. Box

City, State, Zip Code

Phy	vsical	Descri	ption	as	entered:
	, oivui	20011	DUU	uJ	Cilicicu.

Comments:

FAA Form 8710-1 (4-00) Supersedes Previous Edition

I. UNITED STATES OF AMERICA

DEPA., (MENT OF TRANSPORTATION-FFDERAL AVIATION ADMINISTRATION)

	II. TEMPORARY AIRMAN CERTIFICATE
	THIS CERTIFIES THAT IV. WESLEY BRYAN CAVES
1	V.
	TULSA OK 74132
	DATE OF BIRTH HEIGHT WEIGHT HAIR EYES SEX NATIONALITY VI.
	IV has been found to be promptly use life does in the second seco
	IX. has been found to be properly qualified and is hereby authorized in accordance with the conditions of issuance of the reverse of this certificate to exercise the privileges of: PRIVATE PILOT
	Ratings and Limitations AIRPLANE SINGLE ENGINE LAND; AIRPLANE MULTIENGINE LAND
	ENGLISH PROFICIENT
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	XIII.
l	THIS IS X AN ORIGINAL ISSUANCE A REISSUANCE OF THIS DATE OF SUPERSEDED AIRMAN CERTIFICATE
ŀ	GRADE OF CERTIFICATE 4/29/2011 BY DIRECTION OF THE ADMINISTRATOR EXAMINER'S DESIGNATION NO.

OR INSPECTOR'S REG NO.

DATE DESIGNATION EXPIRES

IACRA Equivalent

12/31/2014

Application ID: 545672

XIV. CONDITIONS OF ISSUANCE

JENNIFER JAMES WISE

This is an interim certificate issued subject to the approval of the Federal Aviation Administration pending the issuance of a certificate of greater duration. It becomes void-

X. SIGNATURE OF EXAMINER OR INSPECTOR

IACRA E-SIGNED APPLICATION SW15

1. Upon the receipt of a certificate of greater duration to replace it;

vii Airman's Signature

X. DATE OF ISSUANCE

02/26/2012 08:47:22 PM

FAA FORM 8060-4 (8-79) USE PREVIOUS EDITION

- 2. Upon finding by the FAA that an error has been made in its issuance;
- 3. Upon a finding by the FAA that it was issued illegally or as the result of fraud or
- 4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and
- 5. In any case, at the expiration of 120 days from date of issuance.

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	DEPARTMENT OF THE	RANSPORT		RAL AVIATION		ON	iii. CERTIFICATE	ENO.
	THIS CERTIFIES TH	IAT İV.	WESLEY	BRYAN CA'	VES			
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	DATE OF BIRTH HE	EIGHT	WEIGHT	HAIR	EYES	SEX	NATIONALITY	vi.
		IN.		news Successive Succes	None trans			
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ш	RATINGS AND LIMITAT XII. AIRPLANE SII [LIMITATIONS	NGLE EN			SINE L	AND;		
vii. AIRMAN'S SIGNATURE	THIS IS MAN ORIGINA THIS GRADE OF CERT		E []A REISSUA	ANCE OF	DATE OF SU 4/29/2011	OTTOTOC	DED AIRMAN CER	TIFICATE
S.N.S	BY DIRE	ECTION C	F THE ADN	MINISTRAT	OR MANAGEMENT		MINER'S DESIGNA PECTOR'S REG. N	
RW	x. DATE OF ISSUANCE	E xi.	SIGNATURE O	FEXAMINER (OR INSPECTOR			
Ϋ́!. Α	02/26/2012 08:47:2	ZZ PIVII	NNIFER JAM RA E-SIGNED		SW15		E DESIGNATION E	XPIRES
FAAF	orm 8060-4 (8-79) USE PR				on Number: 54			RA Equivalent
 .		XI	V. CONDI	TIONS C	F ISSUAN	<u>ICE</u>		

AIV. CUNDITIONS OF ISSUANCE

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4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and

- 5. In any case, at the expiration of 120 days from date of issuance.



0				nsportation Administratio	n	Airr	nan Ce	ertifica	te and	l/or Ra	ating	Appli	cation			
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	•	First Middl Y BRYAN	e)					B. S	SN (US on	y)		C. Date	of Birth	. Place of Birth SA OK USA		
E. Addre								F. Ci	tizenship (JSA	Citizenship Other) Sp	ecify			, speak, write, English langu	1251
City, Sta								H. H	eight Ir	l. Weig		J. Ha	air k	(. Eyes	L. Sex	X Male Female
M. Do yo	u now h	old, or ha	ve you	ever held ar	FAA Pilot	Certificate	? No	l	rade Pilot 0 ATE PILOT			0.0	ertificate Nu	mber	P. Dat 4/29/2	e Issued 2011
Medical (Q. Do you hold a X Yes R. Class of Certificate S. Date Issued T. Name of Examiner Medical Certificate? No THIRD CLASS MEDICAL 1/17/2012 TO DENNIS DEAKINS U. Have you ever been convicted for violation of any Federal or State statutes relating to narcotic drugs, marijuana, or depressant V. Date of Final Conviction															
		r been co drugs or s			of any Fe	deral or Si	tate statutes	s relating to	narcotic dr	ugs, mariju	ana, or do		No	V. Dat	e of Final Co	nviction
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	ompletion equired T		ŀ	craft to be u PA-44-180	, -	t test requ	iired) 2)			1) 10.0	Time in t	2)	t SIM/FTD	1.	2b. Pilot in Co	
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Military Competence Obtained In Military 4a.Flown 10 hours PIC in last 12 months in the following Military Aircraft. 4b.US Military PIC & Instrument Check																
	aduate of	f	1.1	Name and L	ocation of T	raining Ag	jency or Tra	aining Cente	r			*		1a. Certi	ification Numb	per
D.	ourse	···	2.0	Curriculum F	rom Which	Graduate	d							3. Date		
Lic	older of Fo ense sued By	oreign	-	Country			2. Grade	of License					3. Number		ye	
E.	mpletion	of Air	+	Ratings Name of Air	Carrier					2. Date		2 107:	- C			
Ca	rrier's Ap aining Pro	proved		101110 017111	ournor .	_				z. Dale		3. Will	h Curricului Initial	⊓ Upgr	rade [Transition
III Record	of Pilot	t Time (Do	not wri	te in the sha	ded areas)	1		1	1	· i		1				
	Total	Instruction Received	Solo	Pilot In Command (PIC)	Country Instruction Received	Cross Country Solo	Cross Country PIC	Instrument	Night Instruction Received	Night Takeoff Landings	Night PIC	Night Takeoff Landing PIC	Flights	Number Aero-Tov		Number of Powered Launches
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Powered Lift			1	PIC SIC			PIC SIC				PIC	PIC				
Gliders													 			
Lighter Than Air													1		1	
Simulator																-
Training Device														1		
PCATD																
	V Have you failed a test for this certificate or rating? 7. Applicant's Certification - I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that															
V. Applica they are to	nt's Cer be con	tification - sidered a	· I certify s part o	that all stated the the that all the the that all the the that is for the that all the that all the that all the	ements and or issuance	l answers of any FA	provided by A certificate	y me on this e to me. I ha	application ave also re	n form are ad and und	complete derstand t	and true t he Privac	o the best o	f my knowle ent that ac	edge and I ag companies thi	ree that is form.
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Data		ctor's Signature (Print Name & Sign)	a consider tills p	Certificate		T	Certificat	te Expires
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02/26/2012 05:27:03 PM	THOW	AS ROGER LUCENTA E-SIGN Air Agency's	Recommend	ation				
This applicant has success		lour	Recommend				Cou	urse, and is
recommended for certificat	ion or rating wi	thout further		test.				
Date	Agend	y Name and Number			Official's Signat	ure		1
	l				Title			
		Designated Examiner or Airm	an Certification	on Representative	Report	-		
pertinent requirement I have personally revi	ewed this appli is of 14 CFR pa lewed this appli		cord, and certify sought. nd it to be appro	/ that the individual m	eets the nd have returne			
		ved - Temporary Certificate Issued proved - Disapproval Notice Issued						
Legation of Toot (Equility C		proved - Disapprovar Notice Issued	(Original / Macon		D	uration of	Test	
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NVS-NICHAND LEGID BOILE	o or, rozor, or					SIM) 0.0		1) 1.2
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Certificate or Rating for Wr	nich Tested		Type(s) of Aire	craft Used	Registration	No.(s)		
PRIVATE PILOT, AIRPLANE		AND	1) PA-44-180	2)	1) N290ND		2)	
Date	Exam	iner's Signature (Print Name & Sign)		Certificate No.	Designation	ı No.	Designa	tion Expires
02/26/2012 08:47:22 PM	JENNII	FER JAMES WISE E-SIGN					12/31/20	014
	Ev	valuator's Record (Use For ATI		and/or Type Rating Signature and Certi	gs) Soate Number			Date
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Approved Simulator/Traini Aircraft Flight Check	ing Device Che	~ H H						
Advanced Qualification Pr	ogram	片 片					-	
Advanced Qualification 1	ogram							
I have personally tested th and or necessary requirem	is applicant in a	Aviation Safety Inspector accordance with or have otherwise versult indicated below.	or or Technic erified that this a	ian Report pplicant complies wit	h pertinent proc	edures, st	andards,	policies,
		sued (Original Attached)	7 Disapprove	ed Disapproval No	tice issued (Or	iginal Att	ached)	
		L Conginal Attached)	_ Disappiove	d - Disapproval No	1	Duration		
Location of Test (Facility, C	ity, State)				Ground	Simulator		Flight
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Certificate or Rating for W	hich Tested		Туре	(s) of Aircraft		Registrati		
			1)	2)	<u></u>	1)	2)	
Student Pilot Certifi	icate Issued	Certificate of	or Rating Based	on Fli	ght Instructor	[Groun	d Instructor
Examiner's Recom	mendation	Military ⋅	Competence		Renewa	at		
ACCEPTED	REJECTE	D Foreign	License		Reinsta	tement		
Reissue or Exchan	ge of Pilot Cert	ificate Approve	ed Course Gradi	uate	Instructor F	Renewal B	ased on	
Special Medical tes	st conducted - r		pproved FAA Q	ualification Criteria	Activity		Training (
Aeromedical Certifi	cation Branch,	AAM-330			Test		Duties and Responsib	
Training Course (FIRC) N	ame			Gra	duation Certifica		Date	
D-4-	Inonactoria Cia	nature (Print Name & Sign)			Certificate	No	FAA Dis	strict Office
Date	inspector's Sign	lature (Fillit Name & Sign)			Continuate		SW15	5.110t O.11100
Attachments:		X Airman's Identification (ID)		ID:				
Student Pilot Certific	ate (copy)	PASSPORT USA		CAVES MES	LEY BRYAN			
Knowledge Test Rep		Form of ID		Name:		•		
X Temporary Airman C			Date	of Birth:				
Notice of Disapprova		Number 3/5/2017	Certificate I	lumbor				
Superseded Airman		Expiration Date	Certificate i	vuilibel.				
1 -		Telephone Number	Email A	ddress:				
I		reightione transper						



Department of Transportation Federal Aviation Administration

Airman Certificate and/or Rating Application

ADDITIONAL ADDRESS INFORMATION

Name (Last, First, Middle) CAVES, WESLEY BRYAN

Social Security Number Certificate Number



Date Issued 2/26/2012

Permanent Mailing Address:	Address the applicant requests the certificate to be sent

Street

P.O. Box

City, State, Zip Code TULSA OK 74132

Street
P.O. Box
City, State, Zip Code

Physical Description as entered:

Comments:

FAA Form 8710-1 (4-00) Supersedes Previous Edition

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XIII.

THIS IS AN ORIGINAL ISSUANCE GRADE OF CERTIFICATE
BY DIRECTION OF THE ADMINISTRATOR

X. DATE OF ISSUANCE

02/22/2012 05:48:58 PM

X A REISSUANCE OF THIS DATE OF SUPERSEDED AIRMAN CERTIFICATE

OR EXAMINER'S DESIGNATION NO.

X. SIGNATURE OF EXAMINER OR INSPECTOR JENNIFER JAMES WISE

OR INSPECTOR'S REG NO.

DATE DESIGNATION EXPIRES

FAA FORM 8060-4 (8-79) USE PREVIOUS EDITION Application ID: 539429

IACRA Equivalent

XIV. CONDITIONS OF ISSUANCE

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- 4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested: and
- 5. In any case, at the expiration of 120 days from date of issuance.

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	i. UN DEPARTMENT OF TRANSPO II. TEMPORARY	ORTAT		AL AVIATION		ON	iii. CERTIFICATE	NO.
	THIS CERTIFIES THAT	iv. ۱	WESLEY B	RYAN CAV	ES			
		٧.						
			TULSA OK	74132				
	DATE OF BIRTH HEIGHT		WEIGHT	HAIR	EYES	SEX	NATIONALITY	vi.
		iN.						
	ix. has been found to be reverse of this certific PRIVATE PILOT	proper ate to	rly qualified an exercise the pr	lishereby auti wileges of	örized in accord	ance wit	h the conditions of is	suance on the
	RATINGS AND LIMITATIONS XII. AIRPLANE SINGLE [LIMITATIONS]: ENG				NE			
딾	xiii.	The better TG, course TG, course The man The m	Productive Commence C			Commission Control		
/ii. AIRMAN'S SIGNATURE	THIS IS AN ORIGINAL ISSU, THIS GRADE OF CERTIFICATE	ANCE	XX REISSUA	NEE OF	DATE OF SU 4/29/2011	AC 3005	DED AIRMAN CERT	IFICATE
N'S	BY DIRECTIO	N OF	THEADM	INISTRATO	R		MINER'S DESIGNAT ECTOR'S REG. NO	
IRM/	x. DATE OF ISSUANCE				RINSPECTOR			
vii. A	02/22/2012 05:48:58 PM		INIFER JAME A E-SIGNED	S WISE	SW15		EDESIGNATION EX 1/2014	PIRES
FAA F	orm 8060-4 (8-79) USE PREVIOU	S EDIT	TION	Applicatio	n Number: 53	9429		RA Equivalent
This i	is an interim certificate is				FISSUAN		A: _ #: A .!	1 1 1-1-1-1-1

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A. Name CAVES, V	•	First Middle Y BRYAN	e)					B. S	SN (US on	y)		C. Date of	Birth	1	Place of Birth A OK USA	
E. Addre								F. Ci	tizenship(JSA [Citizenship Other	p) Spe	ecify	ì	· .	speak, write, nglish langua	
City, Sta								H. H	eight Ir	l. Weig	ght lb	J. Haii	K	. Eyes	L. Sex	X Male Female
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Medical (Q. Do you hold a X Yes R. Class of Certificate S. Date Issued T. Name of Examiner Medical Certificate? THIRD CLASS MEDICAL 1/17/2012 DENNIS DEAKINS U. Have you ever been convicted for violation of any Federal or State statutes relating to narcotic drugs, marijuana, or depressant V. Date of Final Conviction															
ľ		r been co drugs or si			of any Fe	deral or S	ate statutes	s relating to	narcotic dr	ugs, mariju [ana, or de	epressant X	٧o	V. Date	of Final Cor	viction
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Ap	aduate of	f	1. N	Name and L	ocation of T	raining A	gency or Tra	aining Cente	r					1a. Certifi	cation Numb	er
D.	ourse		+-	Curriculum F	rom Which	Graduate	d T							3. Date		
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III Record	of Pilot	Time (Do	not wri	te in the sha	aded areas)					*:-	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u> </u>	<u> </u>	
	Total	Instruction Received	Solo	Pilot In Command (PIC)	Cross Country Instruction Received	Cross Country Solo	Cross Country PIC	Instrument	Night Instruction Received	Night Takeoff Landings	Night PIC	Night Takeoff Landing PIC	Number of Flights	Number of Aero-Tows		Number of Powered Launches
Airplanes Rotor-	314.00	64.00	250.00	PIC 250.00 SIC	10.00	30.00	PIC 250.00 SIC	70.00	20.00	40.00	PIC 44.00 SIC	PIC 28.00 SIC				
craft				SIC			SIC				PIC SIC	PIC SIC	-			
Powered Lift				PIC SIC			PIC SIC				PIC	PIC			<u> </u>	
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Lighter Than Air																
Simulator															 	
Training Device					11.	ļ										
PCATD										 			<u> </u>			
IV Have y	V Have you failed a test for this certificate or rating?															
V. Applica	nt's Cer be con	tification - sidered as	I certify s part of	that all stat	ements and	d answers of any FA	provided by A certificate	/ me on this	application	form oro	complete :	and true to	the best of	my knowled	dge and I agr ompanies this	ee that
Signature	of Appli	cant WE	SLEY B	RYAN CAV	ES E-SIGN					4110					01:09:37 P	
AA Form	8710-1 A	4.00) Sur	oread	c Drouious	Edition			14.004.5								

Instructor's Recommendation					
	I have personally instructed the applicant ar			Cortificate Evniras	
Date	Instructor's Signature (Print Name & Sign)	Cert	ificate No:	Certificate Expires	
02/04/2012 12:35:46 PM	THOMAS ROGER LUCENTA E-SIGN	D		6/30/2012	
This applicant has successfully co	ompleted our	s Recommendation		Course, and is	
recommended for certification or r		test.			
Date	Agency Name and Number		Official's Signature		
			Title		
	Designated Examiner or Airm	nan Certification Represent	tative Report		
pertinent requirements of 14 I have personally reviewed the I have personally tested and.		ecord, and certify that the individual sought. Ind it to be appropriate and in or pertinent procedures and stand (Original Attached)	iual meets the der, and have returned th	ne certificate. ated below.	
Location of Test (Facility, City, Sta	<u> </u>		Dura	tion of Test	
RVS-RICHARD LLOYD JONES JR, T			Ground Si	imulator/FTD Flight	
			1 19 1	M) 0.0 1) 1.0 D) 0.0 2) 0.0	
		Type(a) of Aircraft Hand			
Certificate or Rating for Which Te PRIVATE PILOT, INSTRUMENT AIRP		Type(s) of Aircraft Used 1) LC-LC41-550FG 2)	Registration No 1) N581GL	2)	
Date	Examiner's Signature (Print Name & Sign) Certificate No	. Designation No	. Designation Expires	
			.	12/31/2014	
02/22/2012 05:48:58 PM	JENNIFER JAMES WISE E-SIGN Evaluator's Record (Use For AT	D Cortificate and/or Tune 5	Patings)	12/31/2014	
Oral Approved Simulator/Training Dev Aircraft Flight Check Advanced Qualification Program			Certificate Number	Date	
and or necessary requirements w	icant in accordance with or have otherwise v	tor or Technician Report rerified that this applicant compli Disapproved Disapprov	al Notice issued (Origin	nal Attached)	
Location of Test (Facility, City, Sta	ate)			ration of Test	
			Ground Sim SIM FTD		
Certificate or Rating for Which Te	ested	Type(s) of Aircraft	Re	gistration No.	
<u></u>		1)	2) 1)	2)	
Student Pilot Certificate Is Examiner's Recommendar ACCEPTED RE Reissue or Exchange of P Special Medical test condu	Flight Instructor Renewal Reinstatem Instructor Rene eria Test				
Training Course (FIRC) Name			Graduation Certificate I	No. Date	
Date Inspect	or's Signature (Print Name & Sign)		Certificate No.	FAA District Office SW15	
Attachments:	X Airman's Identification (ID)	ID:			
Student Pilot Certificate (co		Name: CAVES	S, WESLEY BRYAN		
X Knowledge Test Report	Form of ID	Data of Dirth			
X Temporary Airman Certifica	Number	Date of Birth		-	
Notice of Disapproval Superseded Airman Certific		Certificate Number: Email Address:			
	Telephone Number				



Department of Transportation Federal Aviation Administration

Airman Certificate and/or Rating Application

ADDITIONAL ADDRESS INFORMATION

Name (Last, First, Middle) CAVES, WESLEY BRYAN

Social Security Number

Certificate Number Date Issued

2/22/2012

Perma	nent	Mailina	Address	

Address the applicant requests the certificate to be sent:

Street

P.O. Box City, State, Zip Code TULSA OK 74132 Street P.O. Box

City, State, Zip Code

Physical Description as entered:

Comments:

FAA Form 8710-1 (4-00) Supersedes Previous Edition

U.S. DEPARTMENT OF TRANSPORTATION Federal Aviation Admininstration

Airman Knowledge Test Report

NAME: WESLEY BRYAN CAVES

APPLICANT ID:

EXAM: INSTRUMENT RATING AIRPLANE

EXAM ID: ■

EXAM DATE: 1/27/2012

EXAM SITE: LAS74102

SCORE: 82

GRADE: PASS

TAKE: 1

Below are subject matter knowledge codes in which questions were answered incorrectly. For code descriptions see the latest version of AC 60-25, Reference Materials and Subject Matter Knowledge Codes for Airman Knowledge Testing, available via the Internet: http://afs600.faa.gov. A single code may represent more than one incorrect response.

PLT012 PLT033 PLT075 PLT083 PLT090 PLT091 PLT141 PLT275 PLT296 PLT445 PLT511

EXPIRATION DATE: 1/31/2014

I. UNITED STATES OF AMERICA DEP, IMENT OF TRANSPORTATION-FEDERAL AVIATION ADMINISTRATION

	II. TEMPORARY AIRMAN CERTIFICA	III.Certificate No. PENDING	
	THIS CERTIFIES THAT IV. WESLEY BRYAN CAVES		
	v.		
	TULSA OK 74132		
	DATE OF BIRTH HEIGHT WEIGHT HAIR	EYES SEX	NATIONALITY VI.
	in lbs		
ı	IX. has been found to be properly qualified and is hereby authorize the reverse of this certificate to exercise the privileges of: PRIV	ed in accordance with the VATE PILOT	conditions of issuance or
	Ratings and Limitations AIRPLANE SINGLE ENGINE LAND		
	ENGLISH PROFICIENT		
ŀ	THIS IS X AN ORIGINAL ISSUANCE A REISSUANCE OF THIS	DATE OF SUPERSEDED	AIRMAN CERTIFICATE
l	GRADE OF CERTIFICATE BY DIRECTION OF THE ADMINISTRATOR	1/20/2011	CIOUATION NO
ĺ	DI DIRECTION OF THE ADMINISTRATOR	EXAMINER'S DE	JIGNA HON NO.

OR INSPECTOR'S REG NO.

DATE DESIGNATION EXPIRES

IACRA Equivalent

12/31/2011

Application ID: 455607

XIV. CONDITIONS OF ISSUANCE

JENNIFER JAMES WISE

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X. SIGNATURE OF EXAMINER OR INSPECTOR

IACRA E-SIGNED APPLICATION SW15

1. Upon the receipt of a certificate of greater duration to replace it;

vii Airman's Signature

X. DATE OF ISSUANCE

04/29/2011 11:49:16 AM

FAA FORM 8060-4 (8-79) USE PREVIOUS EDITION

- Upon finding by the FAA that an error has been made in its issuance;
 Upon a finding by the FAA that it was issued illegally or as the result of fraud or
- 4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and
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	DEPARTMENT OF TRANSP	NITED STATES OF AMERICA ORTATION — FEDERAL AVIATION ADMINISTRATIO AIRMAN CERTIFICATE	DN iii. CERTIFICATE NO. PENDING
	THIS CERTIFIES THAT	iv. WESLEY BRYAN CAVES	-
		v	
		TULSA OK 74132	
	DATE OF BIRTH HEIGHT	WEIGHT HAIR EYES	SEX NATIONALITY vi.
		IN.	
vii. AIRMAN'S SIGNATURE	PRIVATE PILOT RATINGS AND LIMITATIONS XII. AIRPLANE SINGLE PROFICIENT XIII. THIS IS MAN ORIGINAL ISSU, THIS GRADE OF CERTIFICATION THIS GRADE OF CERTIFICATIO	1/20/2011	ISH.
ANS		N OF THE ADMINISTRATOR	EXAMINER'S DESIGNATION NO. OR INSPECTOR'S REG. NO.
NR.	x. DATE OF ISSUANCE	xi. SIGNATURE OF EXAMINER OR INSPECTOR	
vii. ∤	04/29/2011 11:49:16 AM	JENNIFER JAMES WISE IACRA E-SIGNED APPLICATION SW15	DATE DESIGNATION EXPIRES 12/31/2011
FAA	Form 8060-4 (8-79) USE PREVIOU		

AV. CONDITIONS OF ISSUANCE

This is an interim certificate issued subject to the approval of the Federal Aviation Administration pending the issuance of a certificate of greater duration. It becomes void —

1. Upon the receipt of a certificate of greater duration to replace it,

2. Upon a finding by the FAA that an error has been made in its issuance;

3. Upon a finding by the FAA that is was issued illegally or as the result of fraud or mis-representation;

4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and

- 5. In any case, at the expiration of 120 days from date of issuance.

0		Departme Federal A	nt o. ্ ব	insportation Administration	on	Airr	nan Ce	ertifica	te and	i/or Ra	ating .	Applica	tion			
Fligh	on Inform tional R t Instruc cal Fligl	ating otor		X Air Initial	udent plane Single Rene	e-Engine ewal	Rein	X F Airplane Mul statement suance of	Private tiengine	Comm Rotoro Additi	raft onal Instru	Balloon [octor [ertificate [Airship	Transport	Glider	Instrument Powered-Lift
		First Middl Y BRYAN	e)			-		B. S	SN (US on)	y)		C. Date of B	irth		ace of Birth OK USA	
E. Addre					<u> </u>			F. Ci	lizenship (JSA	Citizenshi Other	o) Spe	ecify	1	-	peak, write, glish langua	& X Yes
City, Sta								H. He	eight In	I. Weig	jht lb	J. Hair s.	K. E	Eyes	L. Sex	X Male Female
M. Do yo	u now h	old, or ha	ve you	ever held ar	FAA Pilot	Certif cate	? No		rade Pilot C DENT PILO			O. Certif	icate Numl	per	P. Date 1/20/2	e Issued 011
Q. Do yo	Certifica	te?	ш	√o TH	Class of Ce	MEDICAL		1/20	ite Issued /2011			WARRE	of Examin			
or sti	mulant o	drugs or s	ubstan			deral or Si	ate statutes	relating to	narcotic dr	ugs, mariju	ana, or de	pressant X No		V. Date o	of Final Cor	viction
	ate or R	ating App		r on Basis of												
X Co	mpletion equired T	of est	1)	PA-42-100		t test requ	ired) 2)			1) 71.0 SIM)	Time in th	is aircraft SII 2) FTD)	ho	urs 1) 3	<u></u>	hours
' ~	litary ompetenc otained In		L	ervice Flown 10 hou	ırs PIC in la	st 12 mon	ths in the fo	llowing Milit		ate Rated	4b.	US Military F			nd Service	Number
	aduate o	f	1.	Name and L	ocation of T	raining Aç	gency or Tra	aining Cente	r		<u> </u>			1a. Certifica	ation Numbe	er
	proved ourse		2.	Curriculum F	rom Which	Graduate	d		3. Date							
Ho Lie	older of Fo ense ued By	oreign	-	Country Ratings			2. Grade	of License				3.1	Number			
Ca	mpletion rrier's Ap aining Pro	proved	1.	Name of Air	Carrier	· .				2. Date		3. Which C		Upgrad	e F	Transition
III Record	of Pilo	t Time (Do	not w	ite in the sha	aded areas)										<u> </u>	
	Total	Instruction Received	Solo	Pilot in Command (PIC)	Cross Country nstruction Received	Cross Country Solo	Cross Country PIC	Instrument	Night Instruction Received	Night Takeoff Landings	Night PIC	Night Takeoff Landing PIC	Number of Flights	Number of Aero-Tows	Number of Ground Launches	Number of Powered Launches
Airplanes Rotor-	71.00	35.90	35.10	SIC PIC	21.00	26.70	PIC 26,70 SIC	7.50	4.50	10.00	PIC SIC PIC	PIC SIC PIC				
craft Powered				SIC			SIC PIC				SIC	SIC				
Lift Gliders				SIC			SIC				SIC	SIC			-	
Lighter Than Air																
Simulator				1												
Training Device				-										-		
PCATD						<u> </u>										
V. Applica	nt's Cer	rtification -	I certif	ertificate or r	tements and	d answers	provided by	Yes	application	No form are	complete :	and true to th	e best of m	ny knowleds	ge and I agr	ee that
					-	or any FA	A certificate	e to me. Iha	ave also re	ad and und	erstand th	ne Privacy Ad	t statemen	t that accor	mpanies this	form.
Signature	Signature of Applicant WESLEY BRYAN CAVES E-SIGN Date 04/29/2011 09:32:54 AM															

			Recommendati		o tost	~ (eh	¥.	1
		instructed the applicant and	consider this person	Certificate			Certificate E	xpires
Date		ature (Print Name & Sign)		Certificate	140.	İ	6/30/2012	
04/29/2011 07:13:43 AM	THOMAS ROGER	LUCENTA E-SIGN	D				0/30/2012	
		Air Agency's	Recommendation	on			Cours	e, and is
This applicant has successful		or		test.				,
recommended for certification	Agency Name a				Official's Signa	ture		
Date	Agency Name a	ila Namber						
					Title			
		ated Examiner or Airm	an Certification	Representative	Report			I
Student Pilot Certificate	Issued (Copy attache	d)						-
X I have personally review	red this applicant's pilo	t logbook and/or training re ne pilot certificate or rating	cord, and certify the	it the individual me	eets the			
•						سمم مطاء اسم	ificato	I
I have personally review	red this applicant's gra	duation certificate, and four	nd it to be appropria	te and in order, ar	ng nave returne	diested b	olow	
X I have personally tested		plicant in accordance with		s and standart's w	illi lile result ill	ulcaleu D	elow.	
		nporary Certificate Issued Disapproval Notice Issued						
		- Jisappiovai Notice issued	(Original Attacheu)		Г	ouration o	Test	
Location of Test (Facility, City, RVS-RICHARD LLOYD JONES J				-	Ground	Simulat		light
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					1.8	FTD) 0	1	0.0
Certificate or Rating for Which	h Tested		Type(s) of Aircraft	Used	Registration			
PRIVATE PILOT, AIRPLANE SIN			PA-42-1000		1) N581GL	2)		
				2)				
Date	Examiner's Sign	nature (Print Name & Sign)	C€	ertificate No.	Designation	1 No.	Designation	n Expires
04/29/2011 11:49:16 AM	JENNIFER JAMES	S WISE E-SIGN	i 📰				12/31/2011	
	Evaluator	s Record (Use For AT	Certificate and	or Type Rating	s)	·····		
		Inspector Examiner		gnature and Certif			Da	ate
Oral								
Approved Simulator/Training	Device Check							
Aircraft Flight Check								
Advanced Qualification Progr	ram							
		viation Safety Inspect	or or Tochnician	Poport				
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and or necessary requiremen			striica triat triis appii	oant complice wa	r portinont proc	, oud., ob, c	tarrauras, p	
Approved - Temporary C		<u></u>	Disapproved	Disapproval Not	ice issued (O	riginal At	tached)	
Location of Test (Facility, City		[mai/mai/mai/mai/			T	Duration		
Location of Test (Facility, Oily	, State)				Ground	Simulato	r/FTD I	Flight
						SIM)	1)
					L	FTD)	2	?)
Certificate or Rating for Which	ch Tested		Type(s)	of Aircraft		Registra		
			1)	2)		1)	2)	
Student Pilot Certifica	te Issued	Certificate	or Rating Based on	☐ Flig	ght Instructor		Ground I	nstructor
Examiner's Recomme	endation	Military	Competence		Renewa	al		
ACCEPTED [REJECTED	Foreign	License		Reinsta	tement		
Reissue or Exchange	of Pilot Certificate	Approve	ed Course Graduate	•	Instructor F	Renewal E	Based on	
Special Medical test of	conducted - report forw	arded to 🔲 Other A	pproved FAA Qualif	ication Criteria	Activity		Training Cou	urse
Aeromedical Certificat	tion Branch, AAM-330)			Test		Duties and	
T : : (EIDO) No.				Grad	duation Certifica		Responsibilitie Date	28
Training Course (FIRC) Nam	1e			Giac	dation certifica	atc 140.	Date	
Dete	pector's Signature (F	rint Name & Sign\			Certificate	No	FAA Distri	ct Office
Date Ins	speciors Signature (F	This Name & Sign)			Ochunoate	140.		000
							SW15	
Attachments:	x Air	man's Identification (ID)	ID	:				
Student Pilot Certificate	, —	IVER'S LICENSE USA OK		ne: <u>CAVES, WESI</u>	LEY BRYAN			
Knowledge Test Report		fID	*					_
Temporary Airman Cert	tificate Numbe	r	Date of I	Birth:				
Notice of Disapproval	1/31/2		Certificate Num	ber: PENDING				
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I	reiehi							



Department of Transportation Federal Aviation Administration

Airman Certificate and/or Rating Application

ADDITIONAL ADDRESS INFORMATION

Social Security Number

Certificate Number

PENDING

Date Issued

4/29/2011

Dormanant	Mailina	Addrocci
Permanent	Malling	Adaress:

Address the applicant requests the certificate to be sent:

Street

P.O. Box

City, State, Zip Code TULSA OK 74132

Street P.O. Box

City, State, Zip Code

Physical Description as entered:

Comments:

FAA Form 8710-1 (4-00) Supersedes Previous Edition

U.S. DEPARTMENT OF TRANSPORTATION

Federal Aviation Admininstration

Airman Knowledge Test Report

NAME: WESLEY BRYAN CAVES

APPLICANT ID:

EXAM: PRIVATE PILOT AIRPLANE

EXAM ID:

EXAM DATE: 3/21/2011

EXAM SITE: LAS74102

SCORE: 83

GRADE: PASS

TAKE: 1

Below are subject matter knowledge codes in which questions were answered incorrectly. For code descriptions see the latest version of AC 60-25, Reference Materials and Subject Matter Knowledge Codes for Airman Knowledge Testing, available via the Internet: http://afs600.faa.gov. A single code may represent more than one incorrect response.

PLT012 PLT064 PLT072 PLT092 PLT141 PLT147 PLT161 PLT215 PLT463

EXPIRATION DATE: 3/31/2013