

## **RECORD CLAIM STATEMENT**



(please print or type)

| Part I | <ul> <li>flight crew information</li> </ul>   | ν, | 71 /                                    |               |          |  |           |  |
|--------|---|----|---|---------------|----------|--|-----------|--|
|        | Name of Pilot in  |    |   |               |          |  |           |  |
|        | Command:  |    |   |               |          |  | Sex:      |  |
|        |   |    |   |               |          |  | Country   |  |
|        | FAI Sporting License #:   |    | Dates Valid                             | :             |          |  | of issue: |  |
|        | Name(s) of  |    |   |               |          |  |           |  |
|        | Crew/Copilot(s):  |    |   |               |          |  | Sex:      |  |
|        |   |    |   |               |          |  | Country   |  |
|        | FAI Sporting License #:   |    | Dates Valid                             | :             |          |  | of issue: |  |
|        |   |    |   |               |          |  |           |  |
| Part I | l – aircraft / record information   | 1  |   |               |          |  |           |  |
|        | A:  |    | Α:                                      | C+ M          | J = 1.   |  |           |  |
|        | Aircraft Manufacturer:  |    | Aircraft Model:  Actual Takeoff Weight: |               |          |  |           |  |
|        | Aircraft Registration No.:  |    |   |               |          |  |           |  |
|        | , in crare registration res.  |    | , teradi Tark                           | ع.ت ۱۱۰۰      | ,,,,,,   |  |           |  |
|        | Engine Manufacturer:  |    | En                                      | Engine Model: |          |  |           |  |
|        |   |    |   |               |          |  |           |  |
|        | Engine Power Rating:  |    | Number                                  | of Engin      | es:      |  |           |  |
|        | Record Title:   |    |   |               |          |  |           |  |
|        | Record Title:   |    |   |               |          |  |           |  |
|        | Date of Record:   |    | Record Cl                               | ass / Gro     | up:      |  |           |  |
|        | Summary of Record(s)  |    | 1,000,0                                 | <u></u>       | <u> </u> |  |           |  |
|        | Claimed   |    |   |               |          |  |           |  |
|        | (include estimated  |    |   |               |          |  |           |  |
|        | performance, i.e., speed,   |    |   |               |          |  |           |  |
|        | distance, altitude):  |    |   |               |          |  |           |  |
|        | List Forms Being Sent by  |    |   |               |          |  |           |  |
|        | ATC Directly to NAA:  |    |   |               |          |  |           |  |
| •      |   |    |   |               |          |  |           |  |
| Part I | ll — claimant information   | 1  |   |               |          |  |           |  |
|        | Nlamas  |    |   |               |          |  |           |  |
|        | Name:   |    |   |               |          |  |           |  |
|        | Title:  |    |   |               |          |  |           |  |
|        |   |    |   |               |          |  |           |  |
|        | Address:  |    |   |               |          |  |           |  |
|        | Addi ess.   |    |   |               |          |  |           |  |
|        |   |    |   |               |          |  |           |  |
|        | Phone Number:   |    | E-mail:                                 |               |          |  |           |  |
|        | This is to certify that these records were established in accordance with the rules and regulations of the FAI    |    |   |               |          |  |           |  |
|        | Sporting Code General Section and the Sporting Code pertaining to this record classification, and that the record |    |   |               |          |  |           |  |
|        | was properly controlled and measured by qualified officials.  |    |   |               |          |  |           |  |
|        | ,   | 1  |   |               |          |  |           |  |
|        | Signature:  |    |   | Date:         |          |  |           |  |