

PILOTS N PAWS FLIGHT RECORD

DATE _____

Note: for multi leg transports the sending party is the party that hands off the animals to the pilot.

SENDING PARTY _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____

SENDING PARTY _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____

SENDING PARTY _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____

PASSENGER DESCRIPTIONS (BREED, GENDER, APPROX AGE, WEIGHT)

PASSENGER #1 _____

PASSENGER #2 _____

PASSENGER #3 _____

PASSENGER #4 _____

PASSENGER #5 _____

SIGNATURES OF SENDING PARTIES: _____

Note, if more space is required for sending parties or passenger listing use a second record.

NAME OF PILOT _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____

AIRCRAFT REGISTRATION NUMBER _____ AIRCRAFT MAKE _____

AIRCRAFT MODEL _____ TOTAL NM _____ LOADED NM _____

STARTING TACH TIME _____ ENDING TACH TIME _____ HOURS _____

STARTING AIRPORT _____ ENDING AIRPORT _____

INTERMEDIATE AIRPORTS (LIST ALL) _____

RENTED _____ OWNED _____ COST PER HOUR _____ TOTAL COST _____

(Hourly cost on an owned aircraft may have to be supported by documentation)

OTHER COSTS INCURRED (attach receipts) SUCH AS PARKING OR LANDING FEES, ETC. _____

SIGNATURE OF PILOT_____

RECEIVING PARTY_____ **PHONE**_____

ADDRESS_____ **CITY**_____ **STATE**_____

RECEIVING PARTY_____ **PHONE**_____

ADDRESS_____ **CITY**_____ **STATE**_____

RECEIVING PARTY_____ **PHONE**_____

ADDRESS_____ **CITY**_____ **STATE**_____

SIGNATURES OF RECEIVING PARTIES:_____

ADDITIONAL RESCUE FLIGHT NOTES:

NOTE TO PILOT: Save this document with original signatures. This is your proof of the completed flight and record support your claim of a charitable deduction for a contribution of services.