**Department of Transportation** Federal Aviation Administration **MEDICAL CERTIFICATE THIRD CLASS** This certifies that (Full name and address): CHAD Adrian WACHTER 2032 West Harbor Drive Bismarck ND 58504 USA Date of Birth Height | Weight Eyes Sex 04/30/1973 67 191 BROWN BLUE M has met the medical standards prescribed in part 67, Federal Aviation Regulations, for this class of Medical Certificate. Must have available glasses for near vision. Limitations Date of Examination Examiner's Designation No. 03/24/2020 000001728 Examiner Typed Name DALE A. KLEIN, MD AIRMAN'S SIGNATURE Control No.: 200009036318 Applicant ID: 2001908845 FAA Form 8500-9 (3-12) Supersedes Previous Edition NSN: 0052-00-670-7002

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