

2005 Regional SS1000 Witness Form Northern Michigan

Event Start Location: Extreme Power Sports 2572 S. Otsego Gaylord, MI 49753

Event Ending Location

Marathon

2859 S Otsego Ave

Gaylord, MI 49735

This witness form a (Riders Name and add				
License Number:		License State	e:	
Bike Year:	Make:	Model	:	
	Informa	tion for Start of Ride		
Date:		Odometer Reading:		
Time:	A.M. P.M.	Time Zone:		
	Starting V	Witness Information		
Name:		Phone	·:	
Address:				
City:		State:	Zip:	
Signature:		Date:	Time:	
	Information	for End of Ride		
Date:		Odometer Reading:		
Time:	A.M. P.M.	Time Zone:		
	Ending Wita	ness Information		
Name:	Phone:			
Address:				
City:		State:	Zip:	
Signature:		Date:	Time:	



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(Document all gas stops and any other stops longer than 20 minutes)

(Fill in Name and Address above)

#	Date	Time (Zone)	Location	Odometer Reading	GPS Reading
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					



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(Document all gas stops and any other stops longer than 20 minutes)

(Fill in Name and Address above)

#	Date	Time (Zone)	Location	Odometer Reading	GPS Reading
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					