

2009 Regional SS1000 Witness Form

Event Start/Ending Location: **Perkins Family Restaurant & Bakery** 2502 London Rd Duluth, MN

June 27, 2009 Alternate Route

This witness form : (Riders Name Addre				
License Number:		License Stat	e:	
Bike Year:	Make:	Mode	1:	
	Informat	ion for Start of Ride		
Date:		Odometer Reading:		
Time:	A.M. P.M.	Time Zone:		
	Starting V	Vitness Information		
Name:			e:	
Address:				
City:		State:	Zip:	
Signature:		Date:	Time:	
	Information	for End of Ride		
Date:		Odometer Reading:		
Time:	A.M. P.M.	Time Zone:		
	Ending Witr	ness Information		
ame: Phone:		e:		
Address:				
City:		State:	Zip:	
Signature:		Date:	Time:	



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Duluth, MN

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

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

(Fill in Name and Address above)



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

#	Date	Time-In (Zone)	Time-out (Zone)	Location	Odometer Reading
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					

(Fill in Name and Address above)