

Event Start/Ending Location:
Walthall Chevron
(I-75 Exit 149)
Byron, GA
September 10, 2011
Primary Route

This witness form is for:
(Riders Name Address)

License Number: $\qquad$ License State:

Bike Year:
Make: $\qquad$ Model:

## Information for Start of Ride

Date: $\qquad$ Odometer Reading: $\qquad$
Time: $\qquad$ A.M. P.M.

Time Zone:

## Starting Witness Information

Name: $\qquad$ Phone: $\qquad$
Address:
City: $\qquad$ State: $\qquad$ Zip:

Signature: $\qquad$ Date: $\qquad$ Time: $\qquad$
Information for End of Ride
Date: $\qquad$ Odometer Reading: $\qquad$
Time: $\qquad$

A.M. P.M.

Time Zone:

## Ending Witness Information

Name: $\qquad$ Phone: $\qquad$
Address:
City: $\qquad$ State: $\qquad$ Zip:

Signature: $\qquad$ Date: $\qquad$ Time: $\qquad$


Tourer's Forum

## 2011 Regional SS1000 Witness Form

Byron, GA
(Document all gas stops and any other stops longer than $\mathbf{2 0}$ minutes)
(Fill in Name and Address above)

| \# | Date | $\begin{gathered} \text { Time-In } \\ \text { (Zone) } \end{gathered}$ | Time-out (Zone) | Location | Odometer Reading |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 11 |  |  |  |  |  |
| 12 |  |  |  |  |  |
| 13 |  |  |  |  |  |
| 14 |  |  |  |  |  |
| 15 |  |  |  |  |  |
| 16 |  |  |  |  |  |



Tourer's Forum

## 2011 Regional SS1000 Witness Form

Byron, GA
(Document all gas stops and any other stops longer than 20 minutes)
(Fill in Name and Address above)

| \# | Date | $\begin{gathered} \text { Time-In } \\ \text { (Zone) } \end{gathered}$ | Time-out (Zone) | Location | Odometer Reading |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 17 |  |  |  |  |  |
| 18 |  |  |  |  |  |
| 19 |  |  |  |  |  |
| 20 |  |  |  |  |  |
| 21 |  |  |  |  |  |
| 22 |  |  |  |  |  |
| 23 |  |  |  |  |  |
| 24 |  |  |  |  |  |
| 25 |  |  |  |  |  |
| 26 |  |  |  |  |  |
| 27 |  |  |  |  |  |
| 28 |  |  |  |  |  |
| 29 |  |  |  |  |  |
| 30 |  |  |  |  |  |
| 31 |  |  |  |  |  |
| 32 |  |  |  |  |  |

