## **EYEWITNESS FORM for START of RIDE**

Date:	Local Time:	AM/PM
License Number:	Odometer Rea	ding: Miles (Kilometers)
License State:	Make & Mode	el:
This witness form is		
	(Rider's Name	
The location of this s	stop is:	
	First Witness (Please Print)	Second (optional) Witness
Witness Name:	First witness (Flease Frint)	· •
Address:		
Phone: (Note: Obtaining a p your award)	hone number where we can contact you	r eyewitnesses will speed up the issuing of
Signature:		

## **EYEWITNESS FORM for END of RIDE**

Date:	Lo	cal Time:	AM/PM	
License Number:	Od	ometer Reading:		Miles (Kilometers)
License State:	Ma	ike & Model:		
This witness form is f	or:			
	(Ri	ders Name and addre	ess)	
The location of this st	op is:			
	First Witness (Please	Print)	Second (opt	ional) Witness
Witness Name:				
Address:				
Phone: (Note: Obtaining a phyour award)	one number where we can	contact your eyewitn	esses will spee	d up the issuing of
Signature:				

## LOG

Saddlesore/Bun-Burner-		
	(Fill in Name and Address above)	

DATE	TIME (include zone)	LOCATION	ODOMETER READING
	,		

## Checklist of documents needed for Iron Butt Association Saddlesore 1000 and Bun Burner 1500 certifications:

Copies of Witness forms (starting and ending, others)
Copies of Receipts (do not send originals!)
Map (may be photocopy) showing route with towns stopped in circled
Explanation of any problems encountered, for example, "In central Illinois, at my third gas stop, I was unable to get a dated receipt. I asked the attendant to sign his name on the back but he refused to do so. The phone number of the station is (555) 555-1212 - he will verify that I was there at 10 a.m. on August 4, 2001."
Also, please complete the following information for your certificate (it goes to the person that does the certificate and not the verification team):
Ride you completed (circle): SaddleSore 1000 or Bun-Burner 1500