

**LAM-GAT EYEWITNESS for TURN POINT \_\_\_\_**

Date: \_\_\_\_\_ Local Time: \_\_\_\_\_ AM/PM

License Number: \_\_\_\_\_ Odometer Reading: \_\_\_\_\_ KM

Make: \_\_\_\_\_ Model: \_\_\_\_\_

Rider Name: \_\_\_\_\_

This location is: \_\_\_\_\_

Witness Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

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