

Name: _____

Date: _____

Contact Info: _____

Weather: cloudy/rainy/sunny/windy

Location _____

If necessary, call for clarification
Carlos 661-406-3387

Time	Female				Male				Pedestrian			
	Helmet	No Hel- met	Sidewalk	Wrong Way	Helmet	No Hel- met	Sidewalk	Wrong Way	Female	Male	Disabled	Other
12:00 - 12:15												
12:15 - 12:30												
12:30 - 12:45												
12:45 - 1:00												
1:00 - 1:15												
1:15 - 1:30												
1:30 - 1:45												
1:45 - 2:00												
TO- TAL:												