





U.S. COAST GUARD WITNESS / INVESTIGATOR STATEMENT FORM

Witness Name: _ Street Address: _	LeehAdnill	Ur "	Employer Namê: Employer Address:				
City/State/Zip: _Phone No: _Position:			City/State/Zip: Phone No: Lic/Doc/Last 4 SSN. #				
I, the undersigned reward:	ned, make the followi	ng statemen	t voluntari	ily, withou	it threat, du	ress or pro	mise of
Ve woo	hagging	west	and	Ylen	tried	to	turn
around.	We was	leaning	i Iv	port	and	start	roard
artrigger	tie-down o	hain.	broke	and	jv_	flew	M
into I	le rigging, a	el oro	level s	everyon	e to	get	out
the hour	e. I wen	A to	lrac	h do	or to	see	/
and w	e could me	et get	To	wine	h. Jo	se Toe	<u>×_</u>
Buch u	vent outers	le cl	guess	- Ham	or de	don't.	We
Flypped	and d w	on in	wheel.	house	. d	come	up
and see	n Joe Toe 4	Nick.	-cl	was	tryin	g To	get
on the	liotten a	l lio	t,	Neck	- 2004 /	take	ı
by the	c arrent a	nd Tol	- y cl	wa	tched	him	go
down a	nd never	come u	5 . L	amin	wa	2 11	ashed
in eng	ine room	and i	ve ,	talked	to	him	for
awhite /	1 how () when	no m	ore,	He	could	not	open
the clos	&						
2.	30jon we	Flippe	<u> </u>				
1 h	10UT 1/2 00	boat b	often				
4:01	D Miss ANA	ia re	Frieve	ed u	5.		V 1000-12-00 T-0-000-10-00
I have read my	y statement as docum knowledge and belie	ented above f, it is true a	(and, if ap	pplicable, o	on continua	tion pages), and to
					а	Louil	1/1
					_//	/24/	17
SIGNATURE	,				DA'	TE	