APL	Version: 03	Date Effective: 13 Apr 2023	Document: SSE-039.USF	
Statement of Facts	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 3	

PRESIDENT EISENHOWER

LNITED STATES OF AMERICA

06 FEB 2024

36-17N 122-58W

STATEMENT OF FACTS

I, undersigned Paul Sallee, Master of the USA flagged M/V PRESIDENT EISENHOWER, call sign KPES, registered in WILMINGTON, DE USA IMO number 9295220, owned by WILMINGTON TRUST COMPANY and managed by AMERICAN PRESIDENT LINES, 82,794 Gross Register Tons and 48,047 Net Register Tons, Deadweight 93,558 Tons, length overall 299.89m, Breadth 42.8m, depth 24.6m, manned by 23 seamen including myself, fully and properly manned and furnished with everything necessary for such a vessel and intended voyage, vessel being seaworthy in all respects, main engine and machinery and bridge apparatus and aids to navigation and mooring equipment in good order, tests and inspections performed as per regulations and vessel's IMS procedures, loaded with cargo of about 31851 tons in containers, properly stowed, lashed and secured, with drafts 9.5 M fore and 9.9 M aft, do hereby declare the following:

06-FEB-2024

2135- While vessel is drifting for timed arrival at San Francisco Pilot station, AB on watch Octavio Ortega notices possible possible smoke on the port side of the vessel. 3M on watch Roman Zaretski sends AB Ortega to the port side main weather deck to investigate. AB Ortega notices a collapsed container on the port side Bay 42 and calls the bridge on the radio.

2145-Captain and Chief Mate notified. GPS Position: L 36-17N Long. 122-58 W Captain notifies DPA with initial phone call 2151-Power secured to Bay 42.

2206-SBE taken and vessel gets underway to minimize vessel motion.

2214-Chief Mate Dylan Carrara and Reefer Tech Kevin Haymer are sent to investigate the container stack and for other possible damage.

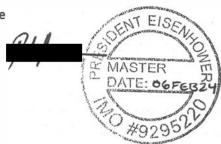
2241-Chief Mate confirms 24 containers are missing from the Bay Plan on Bay 42, 0 Hazardous and 1 reefer container.

2250- USOG Sector San Francisco notified

2255- Chief Mate and reefer finish initial investigation of Bay 42 and surrounding decks.

I hereby declare sincere the above statement for all intents and purposes of law

Master of the M/V President Eisenhower, Paul Sallee



	Statement of Witness or Non-witness	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 1
VESSEL	: PRESTORM GIS	ENHOWER VOY	/AGE: 040	
DATE:	07-FEB-2024		ATION: 36-17" 122	<u>-5</u> 3w
STATE	MENT OF:	WITNESS	N	ON-WITNESS
THE FO	LLOWING IS THE STATEMENT OF:	Roman	ZAZETSKI, 3	M ON WATCH
RESIDII	NG AT:_	(Name, Rank or Ratin	NG)	
REGAR	DING THE ACCIDENT OR INCIDENT O	CCURRING ON FEBRU	ARY 06,2021	(DATE)
INVOLV				propriate, or briefly describe incident)
	ere you an eyewitness to this		ete all applicable question	as below
	actly where were you when		NAVIGATION	
3. W	hat time did the accident tak	e place?	APPROX 213	35
4. W	hat type of work were you d	oing at the time?	NAVIGATIONA	
5. W	ho was working with you, or	working in the area?	AB OCTAVI	
_				
6. W	hat were the weather condit	ions and sea state?	ABOUT 3MS	WELL AND 2M SEAS
	escribe in detail exactly how			
	volved person, any protective equi clude a drawing of the area if it wil			
DISP	ATCHED AN AB TO	BECK TO INVE	RS ATE POSS	SIBLE SMOKE WHERE
8. H	ow long have you known the	involved person?		2.00
9. H	ave you ever worked with the	e individual on another	vessel?	
lf	yes, vessel name		_	
	o you know if this person has yes, when and where did the	•	ore?	
I HAVE	READ THE ABOVE STATEMENT. IT IS TRUE	AND CORRECT TO THE BEST OF M	Y KNOWLEDGE. THIS INFORMA	TION IS GIVEN OF MY OWN FREE WILL.
SIGNA	ATURE		DATE:	2/07/2024
WITN	ESSED BY: (print name)	P. Saute	Signature	: 1921
ADDR	ESS:			

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	Statement of Witness or Non-witness	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 1
VESSE	: PRESTOENT EISE	NHOWER VOI	/AGE:	
DATE:	07-FEB-2024	Loc	ATION: 36-17" 127	-58W
STAT	EMENT OF:	WITNESS	NO.	ON-WITNESS
THE FO	OLLOWING IS THE STATEMENT OF:	OCTAUIC (NAME, RANK OR RATI	D OPTEGA, AB	ON WATCH
RESID	ING AT:_	(NAIVIE , NAINE OR NAII	NG)	
REGAR	DING THE ACCIDENT OR INCIDENT O	CCURRING ON A ENG	6,2024	(DATE)
INVOL	sal-a l-a	08 T		propriate, or briefly describe incident)
	/ere you an eyewitness to this NO, ccmplete only No 2 below and		ete all applicable question	s below
2. E	xactly where were you when	the incident occurred?	ON T	HE BRIDGE
3. V	hat time did the accident tak	e place?	213	5 HRS
4. V	Vhat type of work were you d	oing at the time?	ON WATCH	AND WOK OUT
5. V	Vho was working with you, or	working in the area?	3RD MATE	ROMAN ZARETSKI
6. V	What were the weather condit	ions and sea state?	MODERATE WI	EATHER, HEAVY YWELL
ir Ir	escribe in detail exactly how avolved person, any protective equinclude a drawing of the area if it will both the second of the area if it will both the second of the area if it will both the second of the second of the area if it will both the second of	pment or PPE in use and a g I help to better understand	eneral description of the a	rea where the incident occurred.
	low long have you known the			
9. H	lave you ever worked with th	e individual on another	vessel? YES	
1	fyes, vessel name_MV_Kom	OKUKI LAST SI	<u>11</u> P)	
10. 0	Oo you know if this person has f yes, when and where did the	ever been injured befo		
	ATURE	AND CORRECT TO THE BEST OF M		TION IS GIVEN OF MY OWN FREE WILL.
	NESSED BY: (print name)	Mran E- Com	Signature	

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	Statement of Witness or Non-witness	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 1	
VESS	SEL: PRESIDENT ELS	LOC	YAGE: OCI CO CATION: LA I OAI	CLAND	
STA	TEMENT OF:	WITNESS		ON-WITNESS	
THE	FOLLOWING IS THE STATEMENT OF:	the state of the s		PRO AT TIME OF LO	AD IN LAX
		(NAME, RANK OR RAT	ING)		
RESI	IDING AT:				
	ARDING THE ACCIDENT OR INCIDENT OF A	CONTAINEIS SPO	B42 ON DECK (name, rank or rating if a		ncident)
	Were you an eyewitness to thi If NO, complete only No 2 below and	sign the form. If YES comp	lete all applicable question	is below #1 36% Dores	ING INCLUE
2.	Exactly where were you when	the incident occurred?	BEATH	304, FENIX TE	RMINAL
	What time did the accident tak			ED APPX 1430 BEFOI ON 3/1, LASHED Z/Z Al	
4.	What type of work were you d	oing at the time?	DURING TIM	E OF LASH COMPLE SHING WAS COMPLE	TEGT
5.	Who was working with you, or	working in the area?		I EXCISITION TO	A STATE OF THE STA
	LONGSHOR	EMEN & FEN	IX TERMINA	L MANAGERS	S
6.	What were the weather condition	tions and sea state?	CALM	W/ APAX 12 14TS W	JIND
7.	Describe in detail exactly how involved person, any protective equi Include a drawing of the area if it will CLIMBING CATWAL	pment or PPE in use and a g I help to better understand	general description of the a the incident. Continue on	area where the incident occu additional sheets if necessa	urred. ry.:
2	ALL APAROPRIATE How long have you known the	PPE WORN.	NA		
	Have you ever worked with th				
	If yes, vessel name				
10.	Do you know if this person has If yes, when and where did the		ore? N/A		
	VE READ THE ABOVE STATEMENT. IT IS TRUE	AND CORRECT TO THE BEST OF M	DATE:	14.20.20	WILL.
	TNESSED BY: (print name)	P. SqUEE	Signature		

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	Statement of Witness or Non-witness	SSE Director	Executive VP	Page 1 of 1
VESSEL:	PRESIDENT EISE		OYAGE: OYO	 -
DATE:	6-FEB-7	<u>Ч</u> ь	cation: 36-17" 12	2-580
STATE	MENT OF:	WITNESS	(N	ON-WITNESS
THE FO	LOWING IS THE STATEMENT OF:	DYLAN	Otto	40
_		(NAME, RANK OR RA	TING)	
RESIDIN		2	6 FED 2024	(DATE)
INVOLV	ING: BAY 42	SHAINENS		ppropriate, or briefly describe incident)
1. We	ere you an eyewitness to thi	s matter? I sign the form. If YES comp		
2. Ex	actly where were you when	the incident occurred?	STATEROO	N/N
3. W	hat time did the accident ta	ke place?		
4. W	hat type of work were you o	oing at the time?		
5. W	ho was working with you, o	working in the area?		
6. W	hat were the weather condi	tions and sea state?		
inv	escribe in detail exactly how lolved person, any protective equal clude a drawing of the area if it wi	ipment or PPE in use and a	general description of the	area where the incident occurred.
8. Ho	ow long have you known the	involved person?	-	
9. Ha	ave you ever worked with th	e individual on anothe	r vessel?	
If ·	yes, vessel name			
	you know if this person ha yes, when and where did th		fore?	
I HAVE R	TURE	EAND CORRECT TO THE BEST OF		ATION IS GIVEN OF MY OWN FREE WILL.
WITNI	, =	TAVIO ORTE	Signatur	

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		Statement of Witness or Non-witness	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 1	
VES	SEL:	PRESIDENT EJ	SENHOWER VO	YAGE: <u>V040</u>		
DAT	E:	6-FEB	-24 Loc	ATION: 36-17N	122-58 W	
STA	TEN	MENT OF:	WITNESS		ON-WITNESS	
Тне	FOLI	LOWING IS THE STATEMENT OF:	PAUL (NAME, RANK OR RATI		TAIN	
RES	IDING	G AT:				
REG	ARDI	NG THE ACCIDENT OR INCIDENT O	CCURRING ONO6-	FEB-24	(DATE)	
INV	OLVIN	NG: N/A		(name, rank or rating if a	ppropriate, or briefly describe in	ncident)
1.		re you an eyewitness to this D, complete only No 2 below and			ns below	
2.	Exa	ctly where were you when t	the incident occurred?	IN MY	CABIN	
3.	Wh	at time did the accident tak	e place?			
4.	Wh	at type of work were you do	oing at the time?			
5.	Wh	o was working with you, or	working in the area?			
6.	Wh	at were the weather condit	ions and sea state?			
7.	invo	cribe in detail exactly how to lved person, any protective equipules and a drawing of the area if it will	oment or PPE in use and a g	eneral description of the	area where the incident occu	ırred.
8.	Hov	v long have you known the	involved person?			
9.	Hav	e you ever worked with the	individual on another	vessel?		
	If ye	es, vessel name		_		
		you know if this person has es, when and where did the	마음 마음 바람이 있다. HERCON	re?		
I HA\	/E REA	AD THE ABOVE STATEMENT. IT IS TRUE	AND CORRECT TO THE BEST OF M	Y KNOWLEDGE. THIS INFORMA	ATION IS GIVEN OF MY OWN FREE V	WILL.
SIG	NAT	URE		DATE:C	16-FEB-24	
WIT	NES	SED BY: (print name)		Signature	:	
ADI	ORES	SS:		797		

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	Statement of Witness or Non-witness	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 1
VESS	SEL: PRESEDENT EISEN		040	
DAT	re: GFEB2	. Ц	CATION: 36-17" 12	2-58W
<u>STA</u>	TEMENT OF:	WITNESS	(N	ION-WITNESS
THE	FOLLOWING IS THE STATEMENT OF:	ROBORT (NAME, RANK OR RA	FOLANI) 3M	
RESI	IDING AT:_			
REG	ARDING THE ACCIDENT OR INCIDENT	OCCURRING ON	FGS 2024	(DATE)
INVO	OLVING: CONTAINORS	B42	(name, rank or rating if a	ppropriate, or briefly describe incident)
	Were you an eyewitness to thi		olete all applicable questio	ns below
2.	Exactly where were you when	the incident occurred?	IN STATER	OOM
3.	What time did the accident tal	ke place?		il and the second secon
4.	What type of work were you d	oing at the time?		
5.	Who was working with you, or	working in the area?		
6.	What were the weather condi	tions and sea state?		
	Describe in detail exactly how involved person, any protective equinclude a drawing of the area if it wi	pment or PPE in use and a	general description of the	area where the incident occurred.
8.	How long have you known the	involved person?		
9.	Have you ever worked with th	e individual on anothe	r vessel?	
	If yes, vessel name			
10.	Do you know if this person has If yes, when and where did the		ore?	
	NATURE	AND CORRECT TO THE BEST OF M	MY KNOWLEDGE. THIS INFORMA	~ -
	TNESSED BY: (print name)	DMLAN F. CANA	Signature	:

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	Statement of Witness or Non-witness	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 1
Vecces	D	ENHOWER VO	AGE: 040	
VESSE	. Res		ATION: 36-17" 12	7~58W
DATE:		Loc		
STAT	EMENT OF: FRANK DUPL	WITNESS	(NO	ON-WITNESS
THE FO	DLLOWING IS THE STATEMENT OF:	(NAME, RANK OR RATH	NG) NG)	
RESIDI	NG AT:			
REGAR	DING THE ACCIDENT OR INCIDENT O	ccurring on 166	4604	(DATE)
INVOL	VING:	How Man	name, rank or rating if ap	propriate, or briefly describe incident)
	ere you an eyewitness to this NO, complete only No 2 below and		ete all applicable question	s below
2. E	cactly where were you when t	he incident occurred?	STATEPOOM	
3. W	hat time did the accident tak	e place?		
4. W	hat type of work were you do	oing at the time?		
5. W	ho was working with you, or	working in the area?		
6. W	hat were the weather condit	ions and sea state?		
in	escribe in detail exactly how to volved person, any protective equipolated a drawing of the area if it will	oment or PPE in use and a g	eneral description of the a	rea where the incident occurred.
8. H	ow long have you known the	involved person?		
9. H	ave you ever worked with the	individual on another	vessel?	
If	yes, vessel name		_	
	o you know if this person has yes, when and where did the	The second secon	re?	
I HAVE	READ THE ABOVE STATEMENT. IF IS TRUE	AND CORRECT TO THE BEST OF MY	KNOWLEDGE. THIS INFORMAT	TION IS GIVEN OF MY OWN FREE WILL.
SIGNA	ATURE		DATE: _2/0	1/2024
WITN	ESSED BY: (print name)	DYLAN CARRA	Signature:	
ADDR				

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	Statement of Witness or Non-witness	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 1
VESS	EL: PRESTOENT F	JSENHOWER N	OYAGE: OYO	
DATI	E: GFEB2	024 L	ocation: 36-17" 12	<u>2-</u> 58 ^w
STA [*]	TEMENT OF:	WITNESS	(N	ON-WITNESS
THE	FOLLOWING IS THE STATEMENT OF	ROMUL (NAME, RANK OR F		AB/D
RESI	DING AT:			
REGA	ARDING THE ACCIDENT OR INCIDENT	OCCURRING ON	42	(DATE) 2/6/24
INVO	DLVING:		(name, rank or rating if a	ppropriate, or briefly describe incident)
1	Were you an eyewitness to to to the state of	nd sign the form. If YES con		
	What time did the accident t		ir n <u>o leey care e</u>	
	What type of work were you	_		
5.	Who was working with you,	or working in the areas		
6.	What were the weather cond	litions and sea state?		
	Describe in detail exactly how involved person, any protective equal to the area if it was a drawing of the area if it was a second to the area if it was a	uipment or PPE in use and a	a general description of the	area where the incident occurred.
8.	How long have you known th	e involved person?		
9.	Have you ever worked with t	he individual on anoth	er vessel?	
	If yes, vessel name			
	Do you know if this person h If yes, when and where did t		efore?	
	NATURE	JE AND CORRECT TO THE BEST OF	MY KNOWLEDGE. THIS INFORMA	ATION IS GIVEN OF MY OWN FREE WILL. $2/9/24$
WIT	NESSED BY: (print name)	DULAN CAREA	✓ Signature	:
	PRESS:			

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	Statement of Witness or Non-witness	SSE Director	Executive VP	Page 1 of 1
VESSE			/OYAGE: 040	
DATE	(eteb2	<u>۲ - </u> ۱	OCATION: 36-17" 17	22-580
STAT	EMENT OF:	WITNESS		ON-WITNESS
THE F	OLLOWING IS THE STATEMENT OF		fo L. Boutist	a Aladay
Resin	ING AT:	(Name, Rank or	RATING)	
	RDING THE ACCIDENT OR INCIDEN	LOCCUBBING ON 13	AY 42	(DATE) 2/6/202.
		OCCURRING ON		ppropriate, or briefly describe incident)
INVOL	VING:	Was de la constitución de la con	(name, rank or rating it a	ppropriate, or briefly describe incidency
	Vere you an eyewitness to t		malete all applicable question	ns helow
	xactly where were you whe		5 A.S. F	
	What time did the accident t		A:	
	What type of work were you			
5. V	Vho was working with you,	or working in the areas		
6. V	What were the weather con-	ditions and sea state?		
ir	escribe in detail exactly how wolved person, any protective educated a drawing of the area if it was	uipment or PPE in use and	a general description of the	area where the incident occurred.
8. H	low long have you known tl	ne involved person?		
9. H	ave you ever worked with	he individual on anoth	er vessel?	
If	yes, vessel name			
10. C	o you know if this person h	as ever been injured b	efore?	
If	yes, when and where did t	he injury occur?		
	READ THE ABOVE STATEMENT. IT IS TR			ATION IS GIVEN OF MY OWN FREE WILL.
WITN	IESSED BY: (print name)	May CA	Signature	
	RESS:	7	Jignacure	

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	Statement of Witness Non-witness	or SSE Dire		Executive VP	Page 1 of 1	
VESSI		ETSEN HOWER				
DATE	6 FEB-7	<u> </u>	LOCA	TION: 36-17" 12	2-586	
STAT	TEMENT OF:	WITNESS		G	NON-WITNESS	
THE F	OLLOWING IS THE STATEMENT		WIPE		1207 1A	
		(NAME,	RANK OR RATING	5)		
RESID	DING AT:					
REGA	RDING THE ACCIDENT OR INCID	ENT OCCURRING ON			(DATE)	
INVO	LVING:			(name, rank or rating if	appropriate, or briefly descr	ibe incident)
	Were you an eyewitness to f NO, complete only No 2 below		YES comple			
2. [Exactly where were you w	hen the incident oc	curred?	IN MY RED	KNOW REST/NY	
3. \	What time did the acciden	t take place?		1 DON'T	KNOW	
4. \	What type of work were y	ou doing at the tim	e?			
5 1	Who was working with you	u or working in the	area?			
٠.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,				
6. 1	What were the weather co	onditions and sea st	tate?			
i	Describe in detail exactly help involved person, any protective include a drawing of the area if	equipment or PPE in u	ise and a ge	neral description of the	area where the incident	occurred.
8.	How long have you knowr	the involved perso	on?			
9.	Have you ever worked wit	h the individual on	another v	essel?		
	If yes, vessel name			_		
10.	Do you know if this person If yes, when and where di	n has ever been inju	W 67 540	re?		
	REREAD THE ABOVE STATEMENT. IT IS	S TRUE AND CORRECT TO TH	E BEST OF MY	KNOWLEDGE. THIS INFORM	1ATION IS GIVEN OF MY OWN 2 / 09 / 202	i
_		P	7			
	NESSED BY: (print name)	PAUL	ALLEE	Signatur	e:	
ADD	ORESS:					

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	Statement of Witness or Non-witness	SSE Director	Executive VP	Page 1 of 1
VESSEL:	PRESTDENT EISEN	HOWER VO	940 O40	
DATE:	6-FEB-24	Lo	CATION: 36-17" 127	L-58W
STATE	MENT OF:	WITNESS	No	ON-WITNESS
THE FOL	LOWING IS THE STATEMENT OF:	NAME, RANK OR RA	KEECAN BAR	
RESIDIN	G AT:			
REGARD	ING THE ACCIDENT OR INCIDENT O			
If N	ere you an eyewitness to thi O, complete only No 2 below and	sign the form. If YES comp	200	
2. Exa	actly where were you when	the incident occurred?	State room	
3. Wh	nat time did the accident tal	ke place?		
4. Wh	nat type of work were you d	oing at the time?		
5. Wh	no was working with you, or	working in the area?	<u> </u>	¥
6. W	nat w <mark>ere th</mark> e weather condi	tions and sea state?		
invo	scribe in detail exactly how bloved person, any protective equi ude a drawing of the area if it wi	pment or PPE in use and a	general description of the a	rea where the incident occurred.
8. Ho	w long have you known the	involved person?		
9. Ha	ve you ever worked with th	e individual on anothe	r vessel?	
If y	es, vessel name			
	you know if this person has es, when and where did the		ore?	
I HAVE RE	TURE	AND CORRECT TO THE BEST OF N	MY KNOWLEDGE. THIS INFORMATE:	- 6
WITNE	SSED BY: (print name)	P. SILLE	Signature	0.4
ADDRE	SS:			

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	Statement of Witness or Non-witness or SSE Director SSE Director Approved By: Statement of Witness or SSE Director Executive VP							
VESSEL: PRESIDENT EISENHOWER VOYAGE: 040								
	ATE: 6-FEB-24 LOCATION: 36-17" 122-58W							
STA	TEMENT OF: WITNESS NON-WITNESS							
THE	FOLLOWING IS THE STATEMENT OF: JACOB SPARKS 2AE (NAME, RANK OR RATING)							
RESI	DING AT:							
REG	ARDING THE ACCIDENT OR INCIDENT OCCURRING ON							
INVO	(name, rank or rating if appropriate, or briefly describe incide	nt)						
	Were you an eyewitness to this matter? If NO, complete only No 2 below and sign the form. If YES complete all applicable questions below Exactly where were you when the incident occurred? English Room							
4. What type of work were you doing at the time?5. Who was working with you, or working in the area?								
٥.	with was working with you, or working in the area:							
6.	What were the weather conditions and sea state?							
	Describe in detail exactly how this incident occurred. Include a description of the work being performed by the involved person, any protective equipment or PPE in use and a general description of the area where the incident occurred. Include a drawing of the area if it will help to better understand the incident. Continue on additional sheets if necessary.:							
8.	3. How long have you known the involved person?							
9.	. Have you ever worked with the individual on another vessel?							
	f yes, vessel name							
	O. Do you know if this person has ever been injured before? If yes, when and where did the injury occur?							
	E READ THE ABOVE STATEMENT. IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. THIS INFORMATION IS GIVEN OF MY OWN FREE WILL. DATE: FEB 09, 2024							
	NESSED BY: (print name) PAUL SALLEE Signature:							

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	Statement of Witness or Non-witness	Prepared By: SSE Director	Approved By: Executive VP	Page 1 of 1					
VESS	PRESIDENT EJSENHOWER VOYAGE:O40								
DATE	ATE: (0FEB24 LOCATION: 36-17" 122-58W								
STATEMENT OF: WITNESS NON-WITNESS									
THE	FOLLOWING IS THE STATEMENT OF:	(NAME, RANK OR RATI	V JIMENEZ	2-H					
REGA	DING AT: ARDING THE ACCIDENT OR INCIDENT DEVING:	occurring on 2/6			ncident)				
3	Were you an eyewitness to this matter? If NO, complete only No 2 below and sign the form. If YES complete all applicable questions below Exactly where were you when the incident occurred? Soperation CHISIN								
4.									
5.	. Who was working with you, or working in the area?								
6.	What were the weather conditions and sea state?								
	Describe in detail exactly how this incident occurred. Include a description of the work being performed by the involved person, any protective equipment or PPE in use and a general description of the area where the incident occurred. Include a drawing of the area if it will help to better understand the incident. Continue on additional sheets if necessary.:								
8.	How long have you known the	e involved person?							
9. Have you ever worked with the individual on another vessel?									
	If yes, vessel name		_						
10.	10. Do you know if this person has ever been injured before? If yes, when and where did the injury occur?								
	VE READ THE ABOVE STATEMENT. IT IS TRU	E AND CORRECT TO THE BEST OF N	DATE: 2/	ATION IS GIVEN OF MY OWN FREE	WILL.				
WITNESSED BY: (print name) PAUL SAUCE Signature:									

Date Ellective.

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