

Team Debriefing Tracking Team Supplement	Call sign	Incident Number	Op Period	Date
Discuss likelihood of finding tracks or sign on the trails				
Discuss likelihood of finding tracks or sign off trail				
Describe the location and nature of existing track traps				
Did you erase any existing track traps				
Did you create any new track traps				
Describe the route taken by any tracks you followed				
Why did you discontinue following these tracks				
<input type="checkbox"/> Individual track sketches attached <input type="checkbox"/> Track trap summary sketches attached				