# SEARCH AND RESCUE SASKATCHEWAN CHECKPOINT CONTROL

| Task / Mission #: | Checkpoint Name: | Checkpoint Staffed by: | | | Page ____ of _____ | Date (m/d/y): _____ / _____ / _____ |
|---|---|---|---|---|---|---|
| **Name (Printed)** | **Name (Signature)** | **Vehicle Plate #** | **Lot #/ Block # / Street Address** | **Time 24 hr** | **Direction** Circle only one! | **Comments area…** If not property owner, then visiting what property? Trailer plate #? Special notes? Valuables? |
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