

SCENARIO

<i>Writer(s):</i>	<i>Date:</i>	<i>Time:</i>
Case for: <input type="checkbox"/> animal attack <input type="checkbox"/> lost <input type="checkbox"/> suicide Other: <input type="checkbox"/> outside area & unaware <input type="checkbox"/> evasive <input type="checkbox"/> medical collapse <input type="checkbox"/> foul play		
Story (describe what might have happened):		
Facts Supporting:	Facts documented where?	
Facts Discounting:	Facts documented where?	
Probability: Very Low Low Medium High Very High		
Passed on/Done	How do we prove this scenario is true/false?	
Passed on/Done	If this scenario is true, what should we do?	