ACTIVITY LOG (ICS 214)

1. Incident Name:	2. Operational Period: Date From:	Date To:
	Time From:	Time To:

3. Name:	4. ICS Position:	5. Home Agency (and Unit):

6. Resources Assigned:

Name	ICS Position	Home Agency (and Unit)

7. Activity Log:

Date/Time	Notable Activities

8. Prepared by: Name: _____ Position/Title: _____ Signature: _____

ICS 214, Page 1   Date/Time: _____