Sunday

INCIDENT ACTION PLAN HIGHWAY INCIDENT

CA-TNF-001295 P5QJ8A (0517)



OPERATIONAL PERIOD



8/20/2023

0600

to

8/21/2023

0600



DAY 0600-1800 / NIGHT SHIFT NOT STAFFED

INCIDENT OBJECTIVES (ICS 202)

	LINI OBJECTI	VES (ICS	202)		
1. Incident Name:	2. Operational Period:	Date From:	8/20/2023	Date To:	8/21/2023
HIGHWAY		Time From:	0600	Time To:	0600
3. Objective(s):					
Leaders Intent and Incident Strategy					
Commit resources only when there is a reasonable	e expectation of success in	protecting life, crit	tical property, a	and infrastr	ucture.
Effectively implement a full suppression and values	s-driven strategy utilizing a	mix of tactice (dire	act indirect on	d point are	tantian)
when and where the probability of success is high,	and risk is commensurate	with the identified	values.	ia point-pro	tection)
Success is defined as safely achieving objectives v					•
relationships with surrounding communities and ho	est agencies.	osure, while comr	nitted to servic	e and enha	incing
Incident Values					
- The safety of incident personnel and the public.					
- Residents within the Community of the Town of	Washington.				
- Keep the fire on Forest Agency Lands.	•				
- Air quality and smoke sensitive areas such as co	ammunities highways and	l American and a Constant			
Relationships with local, state, county, and the p		i transportation coi	ridors.		
relationships with local, state, county, and the p	UDIIC.				
Incident Objectives					
- Provide for the safety of incident responders and	I the public through the apr	olication and imple	mentation of so	ound rick	
management strategies.	, app	and imple	montation of s	Juliu IISK	
- Incident values are communicated and protected	to the extent possible from	n adverse fire and	incident activit	ies.	
 Engage Resource Advisors to minimize adverse 	impacts to incident values.				
- Effectively manage incident cost through the sele	ection and implementation	of strategies and t	actics that have	e a high pro	obability of
success in meeting objectives.					
Coordinate with Fire Management to support any TER as requested.	new fire starts to help pro	vide timely, safe, a	and efficient ini	tial attack v	vithin the
TFR as requested.					
ncident Requirements					
•					
Manage the Highway Fire within the direction of t	he delegation of authority,	leader's intent, and	d Resource Ad	visors.	
Create and maintain a work environment in which	n people are treated with re	espect and dignity.			
Track and record all ground and resource disturb	ing suppression efforts.				
	∕es □ No ☑				
Approved Site Safety Plan(s) Located at: Incident Action Plan					
ICS 203 ICS 215A	☐ ICC 205 A				
ICS 204 ICS 220	ICS 205 A Training Message				
ICS 205 Facility Maps	Travel Map				
✓ ICS 206 ✓ Weather Forecast	Demob Plan	County F	lealth Message	9	
ICS 208 Fire Behavior	Finance Message	ICS 214	sitti Moodagi	-	
	osition/Title: PSC	Signature:			
Approved by Incident Commander:	ason Flores, Eric Husmanr	n Signature:	1311	BCT3C+	
CS 202					NIMS IAP

Weather Forecast	Latitude: 39.3397	Longitude:	-120.7915		Update	NWS Fire Weather
1. Incident Name:	2. Operational Period:	Date From:	8/20/23	Date To:	8/21/23	Last Update
HIGHWAY		Time From:	0600	Time To		
IWS Office = STO, Zone = CAZZ Fire Weather Planning Forecast . Isolated Thunderstorms Poss DISCUSSION Threat of isola . Inghtning strikes outside of . Inghtning strikes outside . Inghtning	t for Interior Northern Casible, Mainly Over Mountained Showers and thunders main precipitation cores in the precipitation possible late is Breezy northerly winds of the precipitation possible late is breezy northerly winds of the precipitation possible late is breezy northerly winds of the precipitation of the precipitati	alifornia Natiins corms continue are possible. Sunday into Me expected Sunday dest of the showers and t 45-55except	ional Weathers, mainly	er Service over the crend into	e Sacramento CA 1259 mountains today. Gu p early next week wi	sty outflow wind and
morning, then a chance of shothunderstorms in the afternoom Amax Temperature	on. lower elevationsexcept rees cooler. percent lower elevations. cent up. vinds 5 to 11 mph shifting. vinds 7 to 13 mph. reasing to 2 in the aftern	t 61-71except				
UNDAY NIGHT Sky/Weather	A slight chance of thun e of showers in the eveni. lower elevationsexcept percent. inds 9 to 15 mph. inds 9 to 15 mph with loc	ng, then 45-53 al gusts up				
ONDAY Sky/WeatherShowers slight chance of thunderstorms flax Temperature67-73 l sligher elevations. In Humidity68-83 p 10-Foot Winds Valleys/Lwr SlopesSouth w Ridges/Upr SlopesSouth w AL1 incre WR80 perc	s in the afternoon. lower elevationsexcept percent. vinds 9 to 15 mph. vinds 9 to 15 mph. vasing to 3 late in the me	53-63				

Date/Time:

8/19/23

PREPARED BY:

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operatio	nal Period: Date From:	8/20/2023	Date To:	8/21/2023
HIGH			Time From:		Time To:	0600
3. Incident Command			7. Operation Sect	·		
	Jason Flores, Eric Hu	smann (t)		Greg Lowdermill	(
	Dave Jeffries		Planning Ops	Terry Lim		
	Lucas Lambert		Night Ops			
Information Officer			Staging Area	WHITE CLOUD		
Liaison Officer			Branch	I THE		
4. Agency/Organization			Division/Group	Α	Gabe Herre	era
Agency/Organization	Nam	е	Division/Group	M/W	Brian Pimer	ntel
CalTrans	Shelly Pangman		Division/Group			
SPI	Joe King		Division/Group			251
			Division/Group			
			Branch	II .		
			Division/Group			
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			Branch	a H		
			Division/Group			
			Division/Group			
			Division/Group			
			Division/Group			
			Division/Group			
			Branch	IV	Reservable	
			Division/Group			
. Planning Section:			Division/Group			
Chief	Jim Irving		Division/Group			
Deputy			Division/Group			
Resource Unit	Leslie McCormick		Division/Group			
Situation Unit			Branch	V		
Documentation Unit	Meaghan Pang		Division/Group			
Demobilization Unit			Division/Group			
GISS	Matt House		Division/Group			
FBAN			Division/Group			
IMET			Division/Group			
Training Tech Spec			Air Operations Brai	nch	Director:	
			Air Support G	Group Supervisor		
			Air Tactical G	roup Supervisor		
Logistics Section				elibase Manager		_
	Dave Alicia					
Ordering Unit E	The state of the s		8. Finance/Administ	tration Section:		
Base Camp Manager (Cory Rutherglen		Chief			
Ground Support Unit	-		Time Unit			
Communications Unit			Procurement Unit			
Medical Unit			Comp/Claims Unit			
			Cost Unit			
	-					
repared By: Name:	im Irving Po	osition/Title:				

ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED INFORMATION//BASIC

1. Incident Name:			2. Operat	ional Period:		,	3. Branch	Division Division
Н	IGHWAY	-	Date Fron	n: 08/20/23	Date To:	- 1000 Education	o. Branch	A
4. Operations Pe	rconnel		Time Fron	n: 0600	Time To:	0600	1 .	
Operations Section Chic		I 111					Page 1 of 1	l Alpha
Branch Directo		iermiik			Night Op			
Division/Group Superviso		ara			Branch Safet			
5. Resources Assi		- I a	** A II D		Air Attacl	K:	1	TO STORY STORY
Resource Identifier	gilou.	ALS LWE		esources are		1 5	La Baldia	
ENG3 NEU LOS PII	NOS F88	ALS LVVL		eader	Personne		Hours	Reporting Location
ENG6 AEU AZAFM		DI .		S, JERRAN H		E-1	0600-1800	
	ARIZORATII		MIELSEN,	VINCENT E	4 +/-	E-28	0600-1800	
						-		
**								
				E				
	-							
						-		
						-		
6. Work Assignmen								
Mop up 100 ft. in fror	n control lines.							
7. Special Instruction	ne:							
· · · opoolal mistractio	,,,,,							
3. Communications							1111	
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Mode	Notes
ire Net	1 -	COMMAND	170.6000		164.9375	146.2		
R5 T4	3	TACTICAL	166.5500	0.0	166.5500	0.0	A	Tone 5
A/G	2	R TO GROU			167.8125			
CALCORD	7	TACTICAL	156.0750	(T6) 156.7	156.0750	(T6) 156.7	A	
				, , , , , , ,	.00.0700	(10) 100.7		
. Prepared by: Nam	e:	Leslie McCo	rmick		RESL)	
	_					Signature:	han.	
CS 204			Date/Time:	8/19/2023	2200	_ gradio	Doro	connel Count: 7
IMS IAP							reis	sonnel Count: 7

ASSIGNMENT LIST (ICS 204 WF) CONTROLLED UNCLASSIFIED INFORMATION//BASIC

1. Incident Name	:			2. Operat	ional Period:			3. Branch	Division
	HIGHWAY			Date From		Date To:	08/21/23 0600	1	M/W
4. Operations P	ersonnel:							Page 1 of 1	Mike/Whiskey
Operations Section Ch	nief: Greg Lowo	lermilk				Night Ops	3:	1. 290 . 0	o, vviiionoy
Branch Direc						Branch Safety	/ :		
Division/Group Supervi	sor: Brian Pime	ntel				Air Attack	c:		
5. Resources Ass	igned:			** All R	esources are	12 Hour **			
Resource Identifier	r	ALS	LWD	Le	eader	Personnel	Request #	Hours	Reporting Location
TRUCKEE IHC			•	PIMENT	EL, BRIAN	20	C-17	0600-1800	
CRW1 - BEAR DIV	/IDE IHC		8/23	ANDERS	SON, BRIAN	22	C-15	0600-1800	
ENG3 - 373 (CA-T			8/30	OKERN	IAN, KYLE	5	E-54	0600-1800	
ENG3 - 334 (CA-T			8/29	RODRIG	UEZ, ALEX	5	E-52	0600-1800	
ENG3 - 371 (CA-T	NF)		8/29	MARLO	O, LOGAN	5	E-53	0600-1800	
WTT2 ROGERS			8/29	HUNN	I, LARRY	1	E-6	0600-1800	
WT2 HIGGINS			9/1	VONTHA	DEN, MARK	2	E-23	0600-1800	
WTT2 - T2 - 231 (C			8/30	PRATSC	HNER, KAI	1	E-61	0600-1800	
CRW1 - KINGS RI	VER IHC		8/21	HAINES	, KELLY M	20	C-2	0600-1800	
DZR ROWAN				HITCHC	OCK, BEN	2	E-87	0600-1800	
								-	
								-	
6. Work Assignme	ents:								
Mop up 100 ft. in fro	om control lines	•							
7. Special Instruct	ions:								
8. Communication	s								
Name	Ch	Fund	tion	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Mode	Notes
Fire Net	1	COMM		170.6000	100 10110	164.9375	146.2	Wode	
R5 T5	4	TACT		167.1125	0.0	167.1125	0.0	A	Tone 5
A/G	2	R TO G		167.8125	0.0	167.8125	0.0		
CALCORD	7	TACT	_	156.0750	(T6) 156.7	156.0750	(T6) 156.7	A	
_	-				(12)	.55.07.00	(10) 100.7	Α .	
9. Prepared by: Na	me:	Leslie	McCor	mick		RESL		7	
	_						Signature:	h	-
CS 204				Date/Time:	8/19/2023	2200	0	Pers	connel Count: 83
IIMS IAD								. 510	Journ. 00

ASSIGNMENT LIST (ICS 204 WF)

CONTROLLED UNCLASSIFIED INFORMATION//BASIC

1. Incident Name:			2. Operat	ional Period:			3. Branch	Staging
HIG	HWAY		Date Fron		Date To: Time To:	08/21/23 0600		WHITE CLOU
4. Operations Perso	nnel:	No.	Time Tron	11. 0000	Time 10.	0000	Page 1 of	4
Operations Section Chief:		dermilk			Night Ops	3:	rage Oi	1
Branch Director:					Branch Safety			
Division/Group Supervisor:					Air Attack			
5. Resources Assigne	d:		** All R	esources are	12 Hour **			
Resource Identifier		ALS LWE	L	eader	Personnel	Request #	Hours	Reporting Location
T/F N/A TASK - TF710	2	-			20 +/-	E-17	0600-1800	
•		•						
*								

400						+		
						+		
						1		
							*	
+								
6. Work Assignments:								
Maintain 3-minute respo	nse time.							
7. Special Instructions	:							
8. Communications								
Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Mode	Notes
Fire Net	1	COMMAND	170.6000		164.9375	146.2		Tone 5
1.6					March March And Control			Tone o
241.0000								
CALCORD	7	TACTICAL	156.0750	(T6) 156.7	156.0750	(T6) 156.7	Α	
Dronared has News		1 11 11 1						
. Prepared by: Name:		Leslie McCo	rmick		RESL	Signature:	M	`
CS 204			Date/Time:	8/19/2023	2200	9.13.10	Por	sonnel Count: 20
IMS IAP							ren	sonnel Count: 20

Indidant Momo.							*3	CONTROLLED UNCLASSIFIED INFORMATION//BASIC
i. Incident Name:		2. Date/Time Prepared	pared	3. Operation	Operational Period:		-	
HIGHWAY	VAY	Date:	08/19/2023	Date From: 08/20/23	08/20/23	Date To:		08/21/23
Incident Channels	hannels	Time:	1930	Time From: 0600	0090	Time To:		0090
4. Communications								
Ch# Function	Name	Assigned To	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Mode	N
1 COMMAND	Fire Net	ALL DIVS	170.6000		164.9375	146.2		Tone 5
2 AIR TO GROUND	A/G	ALL DIVS	167.8125		167.8125			
3 TACTICAL	R5 T4	DIV A	166.5500	0.0	166.5500	0.0	A	
4 TACTICAL	R5 T5	DIV M/W	167.1125	0.0	167.1125	0.0	A	
5 TACTICAL	NIFC T2	NOT IN USE	168.2000	0.0	168.2000	0.0	4	
9								
7 TACTICAL	CALCORD	ALL DIVS	156.0750	(T6) 156.7	156.0750	(T6) 156.7	4	
8			- 1	3 (7			:	
6								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
5. Special Instructions								
This is a test								
6. Prepared by (Communications Unit Leader): Name:	ations Unit Leader): Na	ame: E.Tro	20%	0,	Signature:	July 1		
ICS 205 - CONTROLLED UNCLASSIFIED INFORMATION//BASIC	UNCLASSIFIED INFO	DRMATION//BASI	O		Date/Time:	00/10/2002		

MEDICAL PLAN (ICS 206)

1. Incident Name:					2. Operational Peri	iod:	Dat	e From:	8/20/23	Date To:	8/21/23
HIG	GHWAY						Tim	e From:	0600	Time To:	0600
3. Medical Aid Stations:											
Name					Location		Coi	ntact Nun	nber/Freq	Parar	nedics
Western Sierra Medical Clinic			844 Old Tuni 95945	nel R	d, Grass Valley, CA		1-53	30-274-97	762		No
A. Transportation (in disease											
4. Transportation (indicate a		ina):			LaseEss			2 1 1 1 1			
Calstar Air Ambulance (Aubur		-	12750 Lineal		Location		_	Contact N			Service
Sierra Nevada Ground Ambul	,				y, Auburn 95603 Grass Valley 95945			80-887-82			LS
Bi County Ground Ambulance					Yuba City 95993		_	30-273-14 30-674-27			_S _S
Reach Air Ambulance (Oliveh					Dr., Oliverhurst 9596	1		16-208-16			_S
Treasury in 7 th Buildings (Onvolt	aroty		1400 OKY Ha	IDOI	Di., Olivernaist 9390	1	1-8	10-200-10	710	A	
5. Hospitals:											
		Addre	ess			Т	ravel	Time			
Hospital Name	Lat		Helipad		ontact Number(s)/ Frequency	Ai			Trauma	Burn	Llalia a d
Sierra Nevada Memorial Hospital	155 Glass	on Way	, Grass Valley, ng:39.2281,	1-53	0-274-6000	6 min		Ground 60-90	Center Level 4	Center	Helipad
Sutter Rosevilla Medical Center		Plaza [Or., Roseville,	1.01	6.704.4000	00		mins			
Sutter Rosevilla Medical Ceriter	-121.2496 2315 Stoc		ng: 38.7660,	1-91	6-781-1800	20 mi	ins	60 mins	Level 2	~	Ш
U.C. Davis Burn Center	Sacramen 38.5549, -	to, CA	Lat/Long:	1-91	6-734-3636	27 mi	ns	90 mins	Level 1	~	~
6. Special Medical Emergence											
In the event of a medical emergency information to the Communication Center: 1. Delcare the nature of the emgential a. Medical injury/illness? b. is injury/illness life threatening.	Unit/Grass \ cy. g?	/alley C	ommunication	Nati Loc Poir Tran		ted by		Gro			
cleared for emergency traffic.				FOII	Lat:	ı	ong	:		_	
Identify the on-scene Point of Coname (i.e. POC is TFLD Smith)	ontact (POC)	by reso	ource and last		ent Unit ID: n EMT with Patient:	Yes_		_ No		_	
4. identify nature of incident, numb and location (geographic and GPS of	er injured, p coordinates)	atient a).	ssessment(s)	Age				Femal		-	
5. Identify on-scene medical person EMT Jones)	nnel by posi	tion and	dname (i.e.	wi	Emergencies - Sec tnesses for later inv events.	estig	ne ar atior	n. Keep a	ccurate lo	og	
6. Identify preferred method of pati	ent transpor	rt.									
7. Request any additional resource	s and/or eqւ	uipment	needed.								
8. Document all information receive phone.	ed and trans	mitted o	on the radio or								14
Identify any changes in the on-so personnel as they occur.	cene Point o	f Conta	ct or medical						-		
☐ Check box if aviation ass	sets are ut	ilized f	or rescue. If a	asset	s are used, coordina	te with	n Air	Operation	ıs.		
7. Prepared by (Medical Unit	Leader):					Signa	turo		1		
8. Approved by (Safety Office	er):	Lucas	Lambert			Signa					
ICS 206	NIMS IAP				Date/Time		/	7	1		
							-6	/	~		

SAFETY MESSAGE/PLAN (ICS 208)

A 55		יון ווואל באוד ווב	200)		
1. Incident Name:	2. Operational Period:	Date From:	8/20/23	Date To:	8/21/23
HIGHWAY		Time From:	0600	Time To:	0600
D : : 0:				Time to.	0000

Driving: Steep, narrow, dusty roads throughout fire area. Maintain safe following distances and appropriate speed when traversing roads. Drive with headlights on at all times.

Working on steep, uneven terrain. Be mindful of rolling materials and crews that may be working downhill.

Hazardous Trees and Snags: Be alert of snags due to tree mortality and drought. Crews are working in a very hazardous area with numerous dead trees, stay diligent and flag hazardous areas. Avoid taking breaks under trees.

Maintain situational awareness. Look up, Look down, Look around

Stay hydrated!!! Time to think = time to drink. Document rest and hydration on 214.

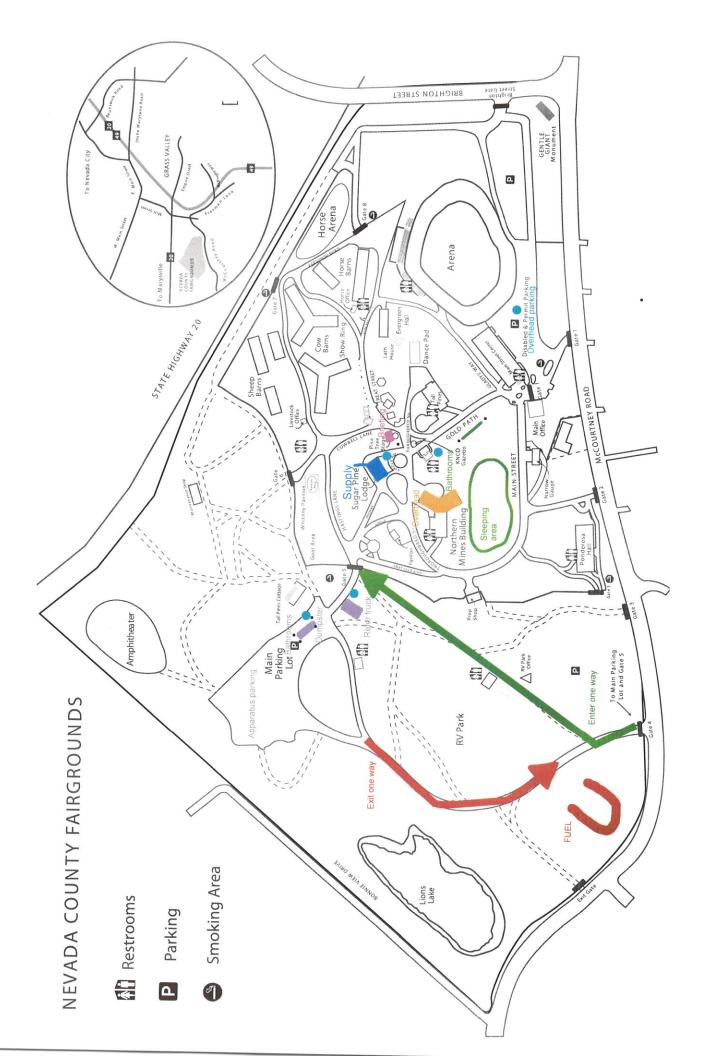
Remain mindful of what is going on around you! LCES!

HEADS UP!!! Lookout for SNAGS when working around areas with burned trees. Evaluate all wind damaged trees with large limbs before working under around them.

Stay informed of changing weather conditions. Review IRPG Thunderstorm Safety pg. 17

INCIDENT ACTION PLAN SAFETY ANALYSIS (ICS 215A)

1. Incident Name:	2. Operational Period:	Date From:	8/20/23	Date To:	8/21/23
HIGHWAY		Time From:	0600	Time To:	0600
Incident Area	Hazard/Risks		Mitigations		
ALL	FATIGUE		necessary. Drink water be	gns of fatigue and efore, during and a gns of heat disorde	after your shift.
ALL	DRIVING HAZARDS		every turn. SL Drive with hea always look be	dlights on, use wh	neel chocks and
ALL	WEATHER			familiar with weat onditions on the g	
ALL	DEHYDRATION		Drink water be Logistics will h	fore, during, and a ave water availab	after your shift. le.
ALL	ANIMAL ATTACK		aggressive ani	from animals and mals. Be mindful elop into infection.	of any injuries
ALL	ROLLING MATERIAL		Communicate you. Be aware	ork locations of cr with individuals th of loose rock and	at may below rolling material.
ALL	HAZARD TREES		overhead haza do so. Flag the	tuational awarene ards. Mitigate the h hazard and comi e chain of commai	nazard if safe to municate the
ē					
					,
5. Prepared By: Lucas Lam	bert Position/Title	: SOF	Signature:	Doch	,
ICS 215A	Date/Time: 8/19/20	023 / 2030	Signature.	1	



GENERAL MESSAGE (ICS 213)

1. Incident Name (Optional): Highway			AN RESEARCH SEASON RECOGNISATION AND AN ARCHITECTURE
2. To (Name and Position): Highway Expanded	d		
3. From (Name and Position): Eric Truax ORD	M-T (925) 216-2119		
4. Subject: Per Diem transition 8/20/23		5. Date: 08/19/2023	6. Time 1250
7. Messsage:			
At 1300 hours 8/20/23 the incident will no			
longer provide three meals. All personnel			
will be transitioned to per diem breakfast			
and dinner. Incident to supply lunch.			
8. Approved by: Name: Cory Rutherglen	Signature:	Position/Title: BCMG	
8. Approved by: Name: Cory Rutherglen 9. Reply:	Signature:	Position/Title: BCMG	
	Signature:	Position/Title: BCMG	
9. Reply:			
	Signature: Position/Title: Date/Time:	Position/Title: BCMG	

HIGHWAY FIRE FINANCE

CA-TNF-000998 P5QJ8A (0517)

Please send your Finance documents and/or questions to the following:

Email: 2023.highway.finance@firenet.gov

Use the following **keywords** in the **subject line** of your email so they get routed to the proper location:

Personnel Time (Agency Overhead, Agency Crews/Engines, AD's, Cooperators)

<u>Subject Line of email should include any of the following options:</u>

• CTR, Crew Time Report, Time, Overhead

Contract Equip/Crews (VIPR, National Contract Crews, etc)

<u>Subject Line of email should include any of the following options:</u>

• Shift Ticket, Equipment, Contractor

Write legibly and be sure to add your Request# in the right-hand corner of your shift ticket.

Please make sure your CTR's and Shift Tickets are signed by a government official

Finance Phone #: (541) 554-9789 (DO NOT Send any finance documents via text)

PLEASE ENSURE THE BELOW DOCUMENTS ARE EMAILED TO FINANCE:

Agoncu	Contract Equipment/Contract Crews: Agreement/Manifest Resource Order	Cooperator: Cooperative Agreement Resource Order
		Shift TicketInspection Forms

HIGHWAY INCIDENT

CA-TNF-001295

DEMOBILIZATION CHECK-OUT PROCESS

This incident is using a virtual checkout process for demobilization. Please do not leave the incident until the follow steps have been completed!

- 1. 24 hours prior to demobilization date, please ensure that:
 - Your incident supervisor has submitted a Demob Request in coordination with the Demob unit.
 - If you need a flight arranged for you, please submit a Flight Request Form.



Demob Request Form

- 2. On your demob date, please check out with the following units.
 - Supply Unit Return gear and supplies.
 - Ground Support/Weed Wash Return pool NERV rentals, receive inspections, etc.
 - Communications Unit Return Radios and other communications equipment.
 - Time/Finance Ensure that all CTRs and/or shift tickets have been submitted and you have received your final, signed OF-288 Time Report or OF-286 invoice.



Flight Request Form

- Once you have completed the above steps, please fill out the Demob
 Checkout Form and contact the Demob Unit Leader to confirm your release
 from the incident. PLEASE DO NOT FILL OUT THE DEMOB RELEASE FORM
 UNTIL ALL PRIOR STEPS BEEN COMPLETED!
 - Demob Unit Leader: (530) 559-1100, <u>2023.highway.demob@firenet.gov</u>



Demob Checkout Form

HIGHWAY 3. Unit Name/Designators S. Personnel Assigned/Designators NAME ICS POSITION INDEPENDENTIAL STATEMENT OF THE PROOF OF THE		UNIT	T LOG (IC	S 214)						
3. Unit Name/Designators 4. Unit Leader (Name and ICS Position) 5. Personnel Assigned/Designators NAME ICS POSITION HOME BASE Activity Log (Continue on Reverse) TIME MAJOR EVENTS MAJOR EVENTS	1. Incident Name:		2. Ope	rational Period:	Date From:	8/20/23	Date To:	8/21/23		
4. Unit Leader (Name and ICS Position) 5. Personnel Assigned/Designators NAME ICS POSITION HOME BASE ICS POSITION H		Y					Time To:	0600		
NAME ICS POSITION HOME BASE	3. Unit Name/Designators									
Activity Log (Continue on Reverse) TIME MAJOR EVENTS MAJOR EVENTS	5. Personnel Assigned/Designator	rs								
Activity Log (Continue on Reverse) TIME MAJOR EVENTS MAJOR EVENTS	NAME		ICS	POSITION		HOME I	BASE			
Activity Log (Continue on Reverse) TIME MAJOR EVENTS MAJOR EVENTS							J, (OL			
Activity Log (Continue on Reverse) TIME MAJOR EVENTS MAJOR EVENTS										
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6. Activity Log	HIGHWAY			Time From:	0600	Time To:	0600
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