

## ASSIGNMENT LIST (ICS 204)

<b>1. Incident Name:</b>		<b>2. Operational Period:</b> Date From: _____ Date To: _____ Time From: _____ Time To: _____		<b>3.</b> <b>Branch:</b> _____ <b>Division:</b> _____ <b>Group:</b> _____ <b>Staging Area:</b> _____
<b>4. Operations Personnel:</b> <u>Name</u> _____ <u>Contact Number(s)</u> _____ Operations Section Chief: _____ Branch Director: _____ Division/Group Supervisor: _____				
<b>5. Resources Assigned:</b>		# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	
Resource Identifier	Leader			
				Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
<b>6. Work Assignments:</b>				
<b>7. Special Instructions:</b>				
<b>8. Communications</b> (radio and/or phone contact numbers needed for this assignment): <u>Name/Function</u> _____ <u>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</u> _____ _____/_____ _____/_____ _____/_____ _____/_____				
<b>9. Prepared by:</b> Name: _____ Position/Title: _____ Signature: _____				
ICS 204	IAP Page _____	Date/Time: _____		