Activity Log (ICS 214)

MODIFIED FOR ALACHUA COUNTY RADIO OPERATORS

| **1. Incident Name:** | | | **2. Operational Period:** Date From: Date To:   Time From: Time To: | | |
| --- | --- | --- | --- | --- | --- |
| **3. Name:** | | **4. ICS Position:**  **RADIO OPERATOR** | | | **5. Home Agency** (and Unit)**:**  **EOC** |
| **7. Activity Log:** | | | | | |
| Date/Time | Notable Activities | | | | |
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| **8. Prepared by:** Name: Position/Title: Signature: | | | | | |
| **ICS 214, Page** | | | | Date/Time: | |