ACTIVITY LOG (ICS 214)

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

ACTIVITY LOG (ICS 214)

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

7. Activity Log (continuation)**:**

Date/Time	Notable Activities