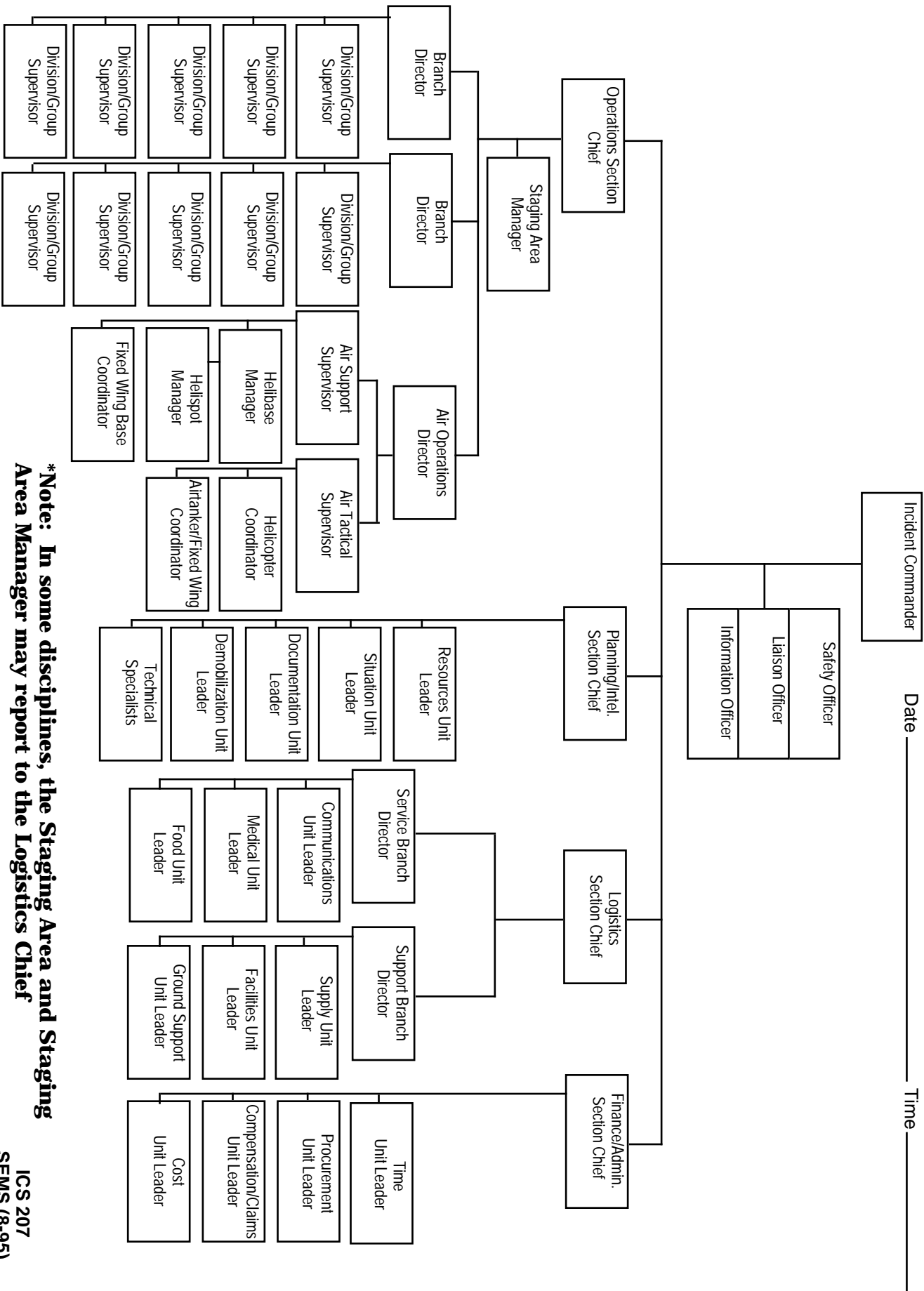


Incident Name _____

Operational Period _____

Date _____ Time _____



***Note: In some disciplines, the Staging Area and Staging Area Manager may report to the Logistics Chief**