

<b>1. Incident Name</b>	<b>2. Prepared by:</b> (name) Date: _____ Time: _____	INCIDENT BRIEFING ICS 201-CG
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<b>3. Map/Sketch</b> (include sketch, showing the total area of operations, the incident site/area, overflight results, trajectories, impacted shorelines, or other graphics depicting situational and response status)
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<b>4. Current Situation:</b>



<b>1. Incident Name</b>	<b>2. Prepared by:</b> (name) Date: _____ Time: _____	INCIDENT BRIEFING ICS 201-CG
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**6. Current Organization** (fill in additional appropriate organization)

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— Safety Officer \_\_\_\_\_

— Liaison Officer \_\_\_\_\_

— Public Information Officer \_\_\_\_\_

Operations Section  
 \_\_\_\_\_

Planning Section  
 \_\_\_\_\_

Logistics Section  
 \_\_\_\_\_

Finance Section  
 \_\_\_\_\_

