

1. Incident Name	2. Prepared by: (name) Date: _____ Time: _____	INCIDENT BRIEFING ICS 201-CERT
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5. Initial Response Objectives, Current Actions, Planned Actions, Potential	

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6. Current Organization (fill in additional appropriate organization)

Command

— Safety Officer _____

— Communication Officer _____

— Information Officer _____

Operations Section	Planning Section	Logistics Section	Finance/Admin

Staging	Medical	Search & Rescue	Fire Suppression

