

# ORGANIZATION ASSIGNMENT

<b>Mission Number</b>	<b>Operational Period</b>	<b>Date</b>	<b>Time</b>
- -			

<b>Incident Command</b>	<b>Name</b>	<b>Means of Contact at ICP</b>
<b>Incident Commander</b>		
<b>Deputy</b>		
<b>Safety Officer</b>		
<b>Information Officer</b>		
<b>Liaison Officer</b>		

<b>Operations Section</b>		
<b>Chief</b>		
<b>Deputy</b>		
<b>Staging Manager</b>		
<b>Air Ops Branch Director</b>		
<b>Helicopter Coordinator</b>		
<b>Fixed-Wing Coordinator</b>		
<b>Division/Group/Branch</b>		

<b>Planning Section</b>		
<b>Chief</b>		
<b>Deputy</b>		
<b>Resources Unit</b>		
<b>Situation Unit</b>		
<b>Documentation Unit</b>		
<b>Demobilization Unit</b>		
<b>Technical Specialists</b>		

<b>Logistics Section</b>		
<b>Chief</b>		
<b>Deputy</b>		
<b>Communication Unit</b>		
<b>Food Unit</b>		
<b>Medical Unit</b>		

<b>Non-SAR Agency Representatives</b>			
<b>Name of Agency</b>	<b>Name of Representative</b>	<b>Title</b>	<b>Contact Number</b>

<b>Prepared by</b>	
<b>Name:</b>	<b>Title:</b>