COMMUNICATIONS LIST (ICS 205A)

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

3. Basic Local Communications Information:

Incident Assigned Position	Name	Method(s) of Contact (phone, cell, repeater, etc.)
EC In Charge (at EOC)		
EOC Operator		
Windsor Shelter		
Smithfield Shelter		