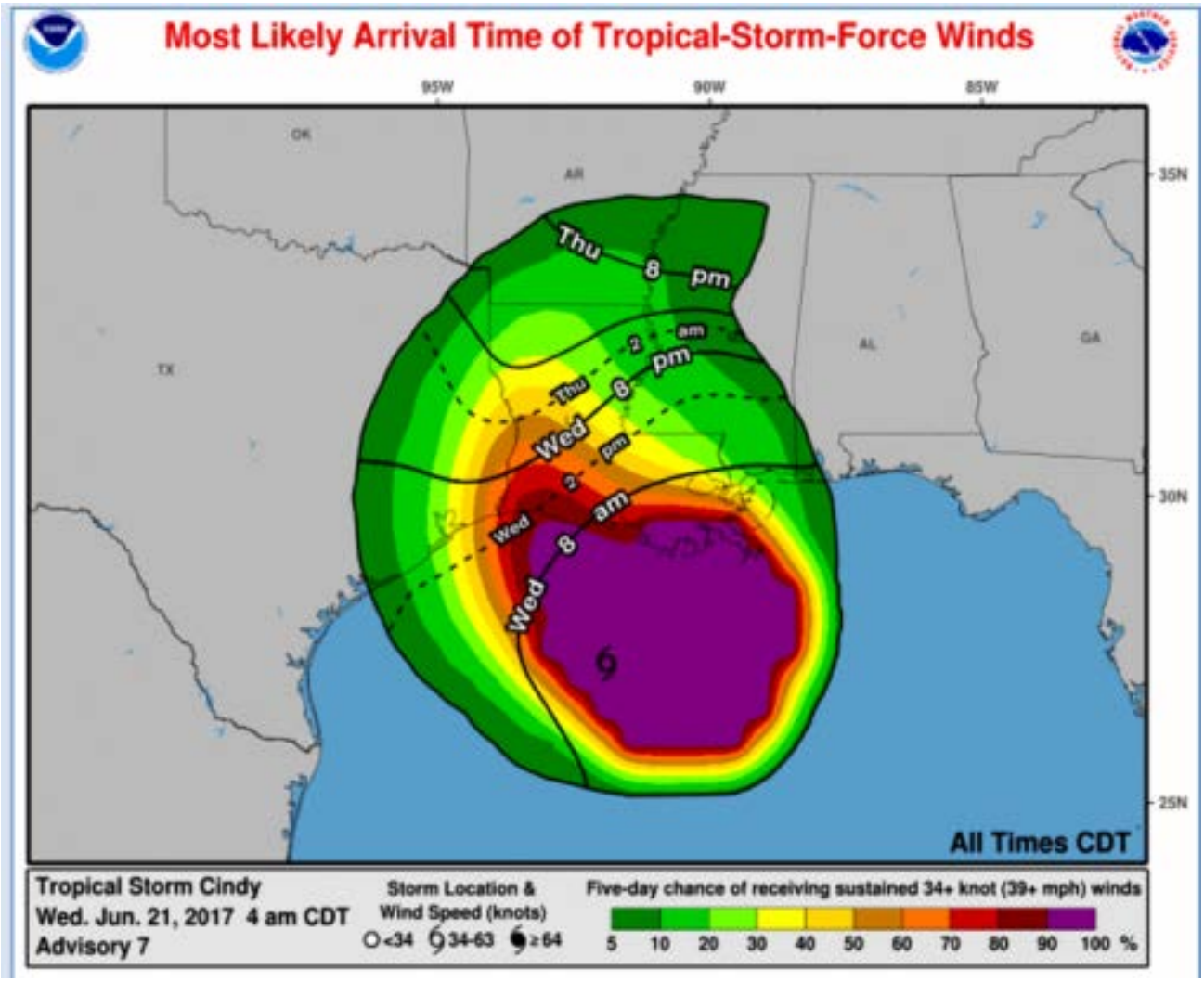
INCIDENT BRIEFING (ICS 201)

1. Incident Name:	2. Incident Number:	3. Date/Time Initiated:
TS Cindy	17-0018	Date: 6/21/2017 Time: 08:37 local

4. Map/Sketch (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, overflight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment)**:**



5. Situation Summary and Health and Safety Briefing (for briefings or transfer of command)**:** Recognize potential incident Health and Safety Hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards.

Local area unaffected by the storm at this time.

Only those authorized by the unit leader may show up at the activated sites

When activated or deactivated:
Work in pairs when possible
Advise someone when traveling to your destination. Advise when you have arrived.

6. Prepared by: Name: Jeffery A Walter Position/Title: ARRL STX D14 EC Signature: _____

 Date/Time: _____

INCIDENT BRIEFING (ICS 201)

1. Incident Name:	2. Incident Number:	3. Date/Time Initiated:
TS Cindy	17-0018	Date: 6/21/2017 Time: 08:37 local

7. Current and Planned Objectives:

Harris County OEM is asking for 2 volunteers for the comms room 311 during the day shifts and 1 overnight operator for each period.

As of this writing, Harris Count OEM is on Level 3 activation meaning that they do not need support of outside agencies. That will change tomorrow with timing depending on the forward speed of the storm.

More information will be sent after the Wednesday 7 am TranStar briefing.

8. Current and Planned Actions, Strategies, and Tactics:

Time:	Actions:
08:28	Begin IAP

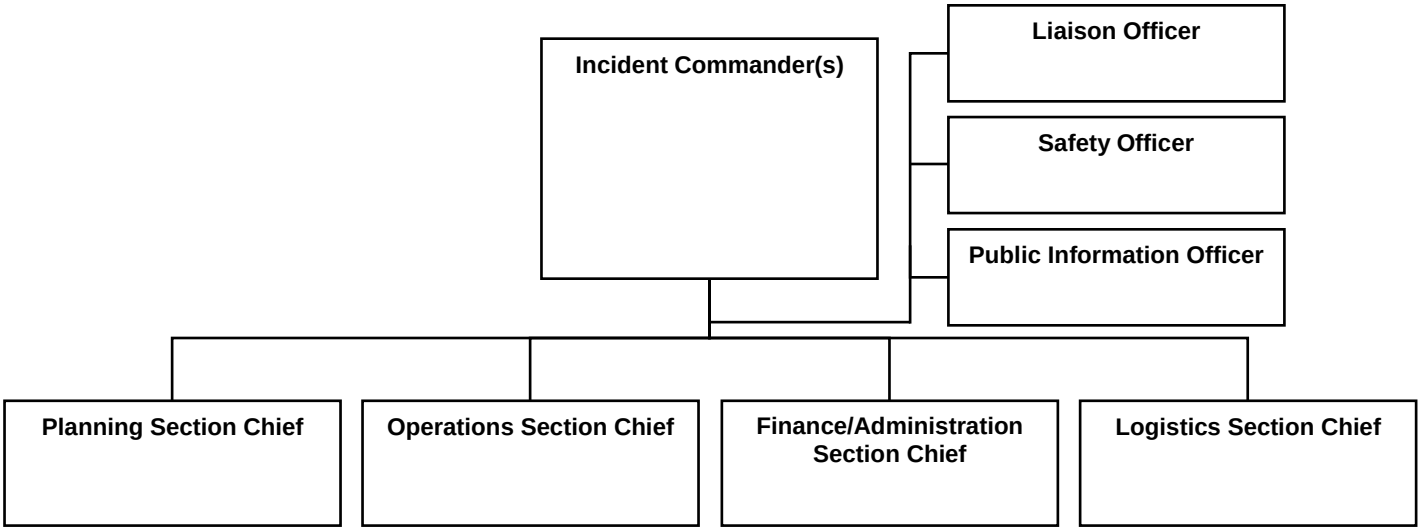
6. Prepared by: Name: Jeffery A Walter Position/Title: ARRL STX D14 EC Signature: _____

ICS 201, Page 2 Date/Time: _____

INCIDENT BRIEFING (ICS 201)

1. Incident Name:	2. Incident Number:	3. Date/Time Initiated:
TS Cindy	17-0018	Date: 6/21/2017 Time: 08:37 local

9. Current Organization (fill in additional organization as appropriate)**:**



6. Prepared by: Name: _____ Position/Title: _____ Signature: _____

Date/Time: _____

INCIDENT BRIEFING (ICS 201)

1. Incident Name:	2. Incident Number:	3. Date/Time Initiated:
TS Cindy	17-0018	Date: 6/21/2017 Time: 08:37 local

10. Resource Summary:

Resource	Resource Identifier	Date/Time Ordered	ETA	Arrived	Notes (location/assignment/status)
Jeff Walter	KE5FGA	Tue-2028	Wed-1930	☐	Transtar Comms room 311
				☐	Transtar Comms room 311
John Igoe	KF5VIK	Tue-2028	Thu-0600	☐	Transtar Comms room 311
NE		Tue-2028	Thu-0600	☐	Transtar Comms room 311
Walt Sepaniac	N5TQ	Tue-2028	Thu-1300	☐	Transtar Comms room 311
Michael Dome	KG5NOV	Tue-2028	Thu-1300	☐	Transtar Comms room 311
George Fletcher	AD5CQ	Tue-2028	Thu-1900	☐	Transtar Comms room 311
SE		Tue-2028	Thu-1900	☐	Transtar Comms room 311
Jeff Walter	KE5FGA	Tue-2028	Fri-0100	☐	Transtar Comms room 311
			Fri-0100	☐	Transtar Comms room 311
NW		Tue-2028	Fri-0600	☐	Transtar Comms room 311
NW		Tue-2028	Fri-0600	☐	Transtar Comms room 311
				☐	
Russell Richter	WP2AHG	Tue-2028	Thu-1300	☐	Transtar Comms room 311
				☐	
				☐	
				☐	

6. Prepared by: Name: Jeffery A Walter Position/Title: ARRL STX D14 EC Signature: _____

Date/Time: June 21, 2017 11:36

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

1. Incident Name:	2. Date/Time Prepared:	3. Operational Period:
TS Cindy	Date: 06/21/2017 Time: 0913 local	Date From: 06/21/17 Date To: 06/22/17 Time From: 1900 Time To: 0700

4. Basic Radio Channel Use:

Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks
14	1	Command	WD5X	General Information	147.000 N		147.600 N	103.5	A	
14	2	Support	N5TRS	Harris - NW	145.370 N		144.770 N	123.0	A	
14	3	Support	W5SI	Harris - NE	147.280 N		147.880 N	103.5	A	
14	4	Support	W5RRR	Harris - SE	146.640 N		146.040 N	None	A	
14	5	Support	W5BSA	Harris - SW	145.190 N		144.590 N	123.0	A	
H	6	Tactical	KA5QDG	Hospital Net	145.170 N		144.570 N	103.5	A	
ETX	7	Mutual	N5FJX	East Texas	146.980 N		146.380 N	103.5	A	
9	8	Support	W5GNX	Beaumont	146.760 N		146.160 N	107.2	M	

5. Special Instructions:

Once activated, Transtar will make a call on channel 1 at the top of each hour +/- 5 minutes for situation updates.

6. Prepared by (Communications Unit Leader)**:** Name: Jeffery A Walter Signature: _____

ICS 205 | **IAP Page** _____ | Date/Time: June 21, 2017 0936 local

GENERAL MESSAGE (ICS 213)

1. Incident Name (Optional)**:** TS Cindy		
2. To (Name and Position)**:**		
3. From (Name and Position)**:**		
4. Subject:	**5. Date:**	**6. Time**
7. Message:		
8. Approved by: Name: _____ Signature: _____ Position/Title: _____		
9. Reply:		
10. Replied by: Name: _____ Position/Title: _____ Signature: _____		
ICS 213	Date/Time: _____	

ACTIVITY LOG (ICS 214)

1. Incident Name:	2. Operational Period: Date From: 06/21/17 Date To: 06/22/17 Time From: 1900 Time To: 0700
TS Cindy	

3. Name:	4. ICS Position:	5. Home Agency (and Unit):
	Communications Support	ARRL STX D14

6. Resources Assigned:

Name	ICS Position	Home Agency (and Unit)

7. Activity Log:

Date/Time	Notable Activities

8. Prepared by: Name: _____ Position/Title: _____ Signature: _____

Date/Time: _____

ACTIVITY LOG (ICS 214)

1. Incident Name: TS Cindy	2. Operational Period: Date From: 06/21/17 Date To: 06/22/17 Time From: 1900 Time To: 0700

7. Activity Log (continuation):

Date/Time	Notable Activities

8. Prepared by: Name: ____________________ Position/Title: __________________ Signature: ____________________

 Date/Time: ____