

1. INCIDENT NAME 2022 Field Day		2. Operational Period FROM: FRI JUN 24 TO: SUN JUN 26		3. Check In Location NW GRASSY FLD		CHECK-IN LIST (EQUIPMENT) ICS 211e – Alachua County ARES		
EQUIPMENT INFORMATION							10. Date/Time Out/In	
4. Equipment Description	5. Identifier	6. Supplier or Owner	7. Operational Check (Notes) (Provide details of check or indicate why out of service) PLEASE INDICATE BATTERY, ANTENNA, ACC CONNECTOR IF ISSUED	8. Assignment	9. Issued To / Contact information (Signature) <i>(Signature of person accepting this equipment from you)</i>	DATE/TIME IN to this location	DATE/ TIME OUT of this location	
EXAMPLE - RG8X Coax100 feet	Coax	John Doe K4AAA	PL259's; good condx			SAT 6/25		
11. Prepared By				12. Date/Time Sent to Resource Unit				
Add Extra Sheets As Needed CHECK-IN LIST (EQUIPMENT)								