# ACTIVITY LOG (ICS 214)

| **1. Incident Name:** Liberty County Fairgrounds | **2. Operational Period:** Date From: 8/16/20XX   Date To: 8/17/20XX   Time From: 1800   Time To: 1800 |
|---|---|

| **3. Name:** Communications Strike Team 1 | **4. ICS Position:** COML | **5. Home Agency** (and Unit)**:** Central Fire Dept |
|---|---|---|

**6. Resources Assigned:**

| Name | ICS Position | Home Agency (and Unit) |
|---|---|---|
| Hajra Chan (Radio Tech) | Comms Unit | Central Fire Dept |
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**7. Activity Log:**

| Date/Time | Notable Activities |
|---|---|
| 0600 | Received in briefing from Logistics Section Chief |
| 0700 | Tested current radio set up and comms plan |
| 0900 | Identified old radio batteries that would no longer hold a charge. |
| 1100 | Attended Planning meeting |
| 1300 | COML reported pickup truck was side swiped by a passenger car. No injuries, but some damage was done to left side of truck. Reported via chain of command. |
| 1430 | Placed order for replacement batteries. |
| 1600 | Completed 209 for the Incident and submitted to EOC. |
| 1700 | Completed IAP for Incident Commander review. |
| 1800 | Tested updated radio channels. |
| 1830 | Attended Operational Briefing for Night Operations. |
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**8. Prepared by:** Name: Destiney Sexton     Position/Title: COML     Signature: *Destiney Sexton*

**ICS 214, Page 1**     Date/Time: 8/17/20XX  1900

# ACTIVITY LOG (ICS 214)

| 1. Incident Name: | 2. Operational Period: Date From: 8/16/20XX    Date To: 8/17/20XX |
|---|---|
| | Time From: 1800    Time To: 1800 |

**7. Activity Log** (continuation)**:**

| Date/Time | Notable Activities |
|---|---|
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| 8. Prepared by: Name: Destiney Sexton | Position/Title: COML | Signature: *Destiney Sexton* |
|---|---|---|
| **ICS 214, Page 2** | Date/Time: 8/17/20XX 1900 | |

# ICS 214
## Activity Log

**Purpose.** The Activity Log (ICS 214) records details of notable activities at any ICS level, including single resources, equipment, Task Forces, etc. These logs provide basic incident activity documentation, and a reference for any after-action report.

**Preparation.** An ICS 214 can be initiated and maintained by personnel in various ICS positions as it is needed or appropriate. Personnel should document how relevant incident activities are occurring and progressing, or any notable events or communications.

**Distribution.** Completed ICS 214s are submitted to supervisors, who forward them to the Documentation Unit. All completed original forms must be given to the Documentation Unit, which maintains a file of all ICS 214s. It is recommended that individuals retain a copy for their own records.

**Notes:**
- The ICS 214 can be printed as a two-sided form.
- Use additional copies as continuation sheets as needed, and indicate pagination as used.

| Block Number | Block Title | Instructions |
|---|---|---|
| 1 | **Incident Name** | Enter the name assigned to the incident. |
| 2 | **Operational Period**<br>• Date and Time From<br>• Date and Time To | Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies. |
| 3 | **Name** | Enter the title of the organizational unit or resource designator (e.g., Facilities Unit, Safety Officer, Strike Team). |
| 4 | **ICS Position** | Enter the name and ICS position of the individual in charge of the Unit. |
| 5 | **Home Agency** (and Unit) | Enter the home agency of the individual completing the ICS 214. Enter a unit designator if utilized by the jurisdiction or discipline. |
| 6 | **Resources Assigned** | Enter the following information for resources assigned: |
| | • Name | Use this section to enter the resource's name. For all individuals, use at least the first initial and last name. Cell phone number for the individual can be added as an option. |
| | • ICS Position | Use this section to enter the resource's ICS position (e.g., Finance Section Chief). |
| | • Home Agency (and Unit) | Use this section to enter the resource's home agency and/or unit (e.g., Des Moines Public Works Department, Water Management Unit). |
| 7 | **Activity Log**<br>• Date/Time<br>• Notable Activities | • Enter the time (24-hour clock) and briefly describe individual notable activities. Note the date as well if the operational period covers more than one day.<br>• Activities described may include notable occurrences or events such as task assignments, task completions, injuries, difficulties encountered, etc.<br>• This block can also be used to track personal work habits by adding columns such as "Action Required," "Delegated To," "Status," etc. |
| 8 | **Prepared by**<br>• Name<br>• Position/Title<br>• Signature<br>• Date/Time | Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock). |