

MESSAGE FORM

▶ Use Ballpoint Pen - Press Hard - Print Clearly
(See back for instructions and definitions)

When Receiving Msg.²
Sender's Msg. #:

Msg. #

-

When Sending Msg.³
Receiver's Msg. #:

Date: (MM/DD/YY) ¹ ____/____/____	Situation Severity: (✓one) ⁴ <input type="checkbox"/> EMERGENCY (e.g., Life Threat) <input type="checkbox"/> URGENT (e.g., Property Threat) <input type="checkbox"/> OTHER (All others)	Msg. Handling Order: (✓one) ⁵ <input type="checkbox"/> IMMEDIATE (As Soon As Possible) <input type="checkbox"/> PRIORITY (Less than One Hour) <input type="checkbox"/> ROUTINE (All others)	Message Requests: ⁶ ACTION (✓one) <input type="checkbox"/> Yes <input type="checkbox"/> No REPLY (✓one) <input type="checkbox"/> Yes, by _____ <input type="checkbox"/> No <input type="checkbox"/> FOR INFO (No action required)
Time: (24-hr. Clock) ____:____:____ 0000 to 2400 (PM = +12)			

To:	ICS Position: (Required) ⁷	From:	ICS Position: (Required) ⁸
	Location: (Required) ⁹ Mountain View EOC		Location: (Required) ⁹
	Name: (Optional)		Name: (Optional)
	Telephone #: (Optional)		Telephone #: (Optional)

SUBJECT: ¹⁰ (e.g., [Originator Msg #]_[Severity]/[Handling Order]_[Subject])

REFERENCE (e.g., Number of earlier msg.): ¹¹ _____

MESSAGE: ¹² (what, when, where needed; how long; contact name and phone number) **KEEP MSG BRIEF**

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

ACTION TAKEN: ¹³ ▶ USE SEPARATE MESSAGE FORM IF SENDING REPLY!

CC: Management Operations Planning Logistics Finance

DISPOSITION: ¹⁴ (For operator use)

How Received or **How Sent** (✓one):

Operator Call Sign:

Telephone Dispatch Center

Operator Name:

EOC Radio FAX Courier

Disposition of Msg.:

Amateur Radio Other _____

Date: _____ **Time:** _____

Outgoing: ¹⁵

Operator: After Sending, complete *Action Taken* info.; log in the ICS-309 and return the message to the Originator.

Incoming: ¹⁵

Operator: After Receiving, complete *Action Taken* info.; log receipt in the ICS-309 and route the original to the Addressee.

Addressee: TAKE APPROPRIATE ACTION.

INSTRUCTIONS FOR USING THE MESSAGE FORM

1. **Date and Time:** When receiving or sending any message, complete the date and time (in the format shown) in the top upper left of the form.
2. **When Receiving Message:** Note the sending organization's message number in the box labeled "When Receiving Msg.", located to the left of the Msg. # at the top right of the message form. (*Normally entered by radio operator*)
3. **When Sending Message:** Obtain the receiving organization's message number, and record this in the "When Sending Msg." box located to the right of the Msg. # at the top right of the message form. (*Normally entered by radio operator*)
4. **Situation Severity:** Indicate the Severity of the message - For example, is it a life threat, a property threat, or just information?
5. **Message Handling Order:** Indicate the handling order of the message, (Immediate: As Soon As Possible; Priority: Less than an Hour; Routine: More Than an Hour).
6. **Message Requests You To:** State what the message type is - for example: is the sender expecting the county OES to "Take Action", to "Reply", or is it "For Information". Space is provided for originator to ask for a reply by a specific time.
7. **TO: ICS Position:** State the ICS position to which the message is to be delivered. This will generally be *Command*, or one of the Section Chiefs (e.g., *Operations, Planning, Logistics, Finance/Admin.*). If unsure, address the message to *Planning*.
8. **From: ICS Position:** Indicate what ICS position is sending the message - you also can note a name, but an ICS position is needed since the person staffing the position may change.
9. **Locations:** Enter the location of the Addressee in the "To" box and the location of the sender in the "From" box (for example, To: Mountain View EOC, From: Santa Clara County EOC).
10. **Subject:** The subject of the message (e.g., Request for Type 5 Engine Strike Team).
11. **Reference:** If the message is a response to an earlier message, indicate the original message number if available.
12. **Message:** If the message is a request for support, supply detailed instructions about what, when, how long needed and where the support is to be delivered, contact person and phone number. Be as brief as possible.
13. **Action Taken:** This section is for use of the message originator or recipient to record pertinent information regarding action taken in response to the message. (e.g., "Request for Type 5 Engine Strike Team passed to Region on OASIS Net."). Space is also provided to indicate copy to other ICS positions that may need the information.
14. **Disposition:** The person who handled the message is to record the net used in the area at the bottom of the message form and records the name and call sign in the appropriate box. If the message is being sent, the date and time that the message actually was sent is to be noted in the relevant box.
15. **Forms Disposition:** Once the message is complete, copies of the message are distributed according to the script shown. If the message is an **EMERGENCY** message, it should be placed in the hands of the shift supervisor. For other messages, it is permissible to place the message in the appropriate message box slot.