



# ORGANIZATION ASSIGNMENT LIST

## ICS 203

<b>1. INCIDENT/EVENT NAME</b>		<b>2. OPERATIONAL PERIOD</b> From (Date and Time): To (Date and Time):	
<b>3. INCIDENT COMMANDER AND COMMAND STAFF</b>		<b>7. OPERATIONS SECTION</b>	
Incident Commander		Chief	
Deputy		Deputy	
Safety Officer		<b>A. BRANCH I</b>	
Information Officer		Branch Director	
Liaison Officer		Deputy	
<b>4. AGENCY REPRESENTATIVES</b>		Division/Group	
Agency	Names	Division/Group	
		Division/Group	
		Division/Group	
		<b>B. BRANCH II</b>	
		Branch Director	
		Deputy	
		Division/Group	
<b>5. PLANNING SECTION</b>		Division/Group	
Chief		Division/Group	
Deputy		Division/Group	
Resource Unit		<b>C. BRANCH III</b>	
Situation Unit		Branch Director	
Documentation Unit		Deputy	
Demobilization Unit		Division/Group	
Technical Specialists		Division/Group	
		Division/Group	
		Division/Group	
		<b>D. AIR OPERATIONS BRANCH</b>	
<b>6. LOGISTICS SECTION</b>			
Chief			
Deputy		<b>E. WATER OPERATIONS BRANCH</b>	
<b>SUPPORT BRANCH</b>			
Director			
Supply Unit			
Facilities Unit		<b>8. FINANCE/ADMINISTRATIVE SECTION</b>	
Ground Support Unit		Chief	
<b>SERVICE BRANCH</b>		Deputy	
Director		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Compensation/Claims Unit	
Food Unit		Cost Unit	
<b>9. Prepared by RESL</b>	Name and Signature:	Date Prepared:	Time Prepared: