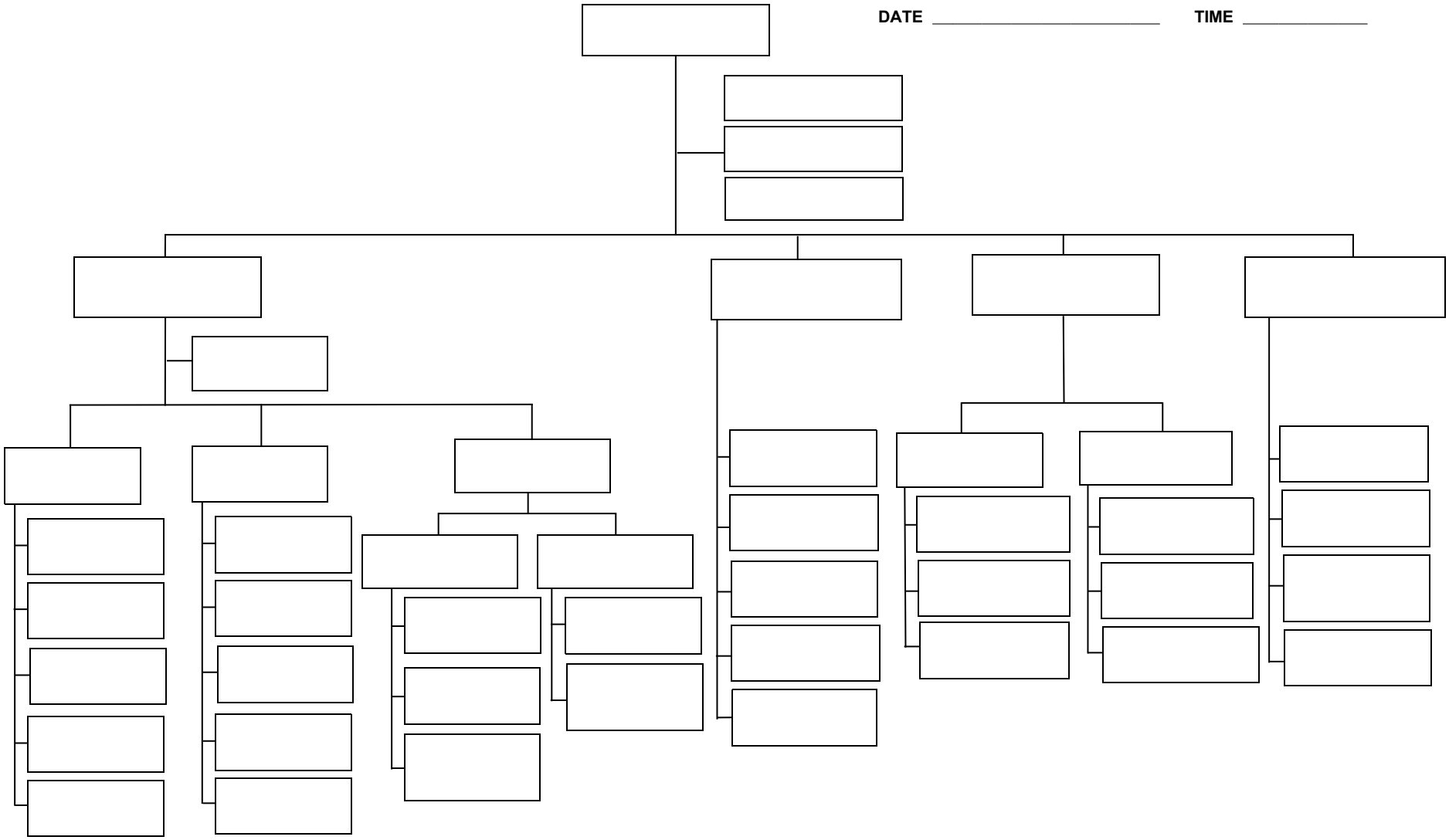
INCIDENT ORGANIZATION CHART

INCIDENT NAME _____

OPERATIONAL PERIOD _____

DATE _____ **TIME** _____



* NOTE: IN SOME DISCIPLINES THE STAGING AREA AND STAGING AREA MANAGER MAY REPORT TO THE LOGISTICS SECTION CHIEF

ICS 207
(SEMS 2001)