LIGHTNING IN A BOTTLE

CA-KRN-2524050

EVENT ACTION PLAN

Thursday



OPERATIONAL PERIOD

Web Experience

5/22/2025 0800

to

5/23/2025 0800

IAP

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:	2. Operational Period:	Date From:	5/22/2025	Date To:	5/23/2025
LIGHTNING IN A BOTTLE		Time From:	0800	Time To:	0800

3. Objective(s):

Management Objectives

-Ensure Life Safety for all attendees, staff, and volunteers.

-Ensure compliance and effective execution of The Do Lab Med Plan.

-Support KCFD, KC EMS, and other County/State departments as needed.

-Interface with The Do Lab and onsite agencies.

Control Objectives

See attached documents

General Situational Awareness:

All personnel will wear proper PPE. All personnel will remain properly hydrated to reduce the possibility of heat related injuries. All personnel are encouraged to wear sunscreen. Watch out for pedestrians while driving in and around the festival. All carts will use lights when responding and in and around the inner field. All personnel will carry flashlights for night operations.

5. Site Safety Plan Required? Yes ☐ No ☑

Approved Site Safety Plan(s) Located at:

6. Incident Action Plan

☑	ICS 203	☐	ICS 215A	☐	Phone List	☑	KCFD Code of Conduct
☑	ICS 204	☐	ICS 220	☐	Training Message	☐	
☑	ICS 205	☐	Incident Map	☐	Travel Map	☐	
☑	ICS 206	☑	Weather Forecast	☐	Demob Plan	☐	
☑	ICS 208	☐	Fire Behavior	☐	Finance Message	☑	ICS 214

7. Prepared By: BJ Corey Position/Title: DPSC Signature: _____

8. Approved by Incident Commander: C. Wright / S. Riley / J. Nelson Signature: _____

ICS 202

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:	2. Operational Period: Date From:	5/22/2025	Date To:	5/23/2025
LIGHTNING IN A BOTTLE	Time From:	0800	Time To:	0800

3. Incident Commander(s) and Command Staff:	
Incident Commander	C. Wright/S. Riley/J. Nelson/A. Moreno
Safety Officer	
Information Officer	
Liaison Officer	

4. Agency/Organization Representatives:	
Agency/Organization	Name
CHP	Basil Zuniga
Behavioral Healh	Tonya Mann
KCSO	Jason Nelson
Prevent Medical	Cody Snow / Gabe Torres

5. Planning Section:	
Chief	Jason Schillinger
Deputy	BJ Corey
Resource Unit	
Situation Unit	
Documentation Unit	
Demobilization Unit	
GISS	
FBAN	
IMET	Kris Mattarochia / Felix Castro
Training Tech Spec	

6. Logistics Section	
Chief	Matt Wiggins / Mark Ratekin
Supply Unit	
Facilities Unit	
Ground Support Unit	
Hired Equipment Tech	
Communications Unit	Chris Oliver
Medical Unit	

7. Operation Section:		
Chief	Cary Wright / Sean Riley	
Deputy		
Night Ops		
Staging Area		
Branch	**Fire**	**Nate Perkins**
Division/Group	Fire	Nate Perkins
Division/Group		
Branch	**EMS**	**George Baker**
Division/Group	KC EMS	Jeff Farris (D) / George Baker (N)
Division/Group	Hall Amb	Armando Lazaro
Division/Group		
Branch	**Law**	**Augie Moreno**
Division/Group	KCSO	Jason Nelson
Division/Group	ABC	Luis Pineda
Division/Group		
Branch		
Division/Group		
Division/Group		
Division/Group		
Division/Group		
Branch		
Division/Group		
Division/Group		
Division/Group		
Division/Group		
Division/Group		
Branch		
Division/Group		
Division/Group		
Air Operations Branch		**Director:**
Air Support Grp Sup		
Helibase Manager		

8. Finance/Administration Section:	
Chief	
Time Unit	
Procurement Unit	
Comp/Claims Unit	
Cost Unit	

Prepared By: Name:	BJ Corey	Position/Title:	DPSC	Signature: _____
ICS 203		Date/Time:	5/21/2025	2300 hours

ASSIGNMENT LIST (ICS 204)

1. Incident Name:	2. Operational Period:				3.
LIGHTNING IN A BOTTLE	Date From:	05/22/25	Date To:	05/23/25	
	Time From:	0800	Time To:	0800	Branch: **Fire**
					Div/Group: **Fire**
					Page 1 of 1

4. Operations Personnel:

Operations Section Chief: **C. Wright / S. Riley**

Branch Director: **Nate Perkins**

Division/Group Supervisor: **Nate Perkins**

5. Resources Assigned:

Resource Identifier	Name	Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Time	Location
Engine 225	B. Hicks			0800-0800	ICP
Engine 225	E. Parker			0800-0800	ICP
Engine 225	D. Hudgens			0800-0800	ICP
FSO	N. Perkins			2000-0800	ICP
FSO	M. Redstone			2000-0800	ICP

6. Work Assignments:

Maintain rapid response time.

Mitigate calls for service per KCFD policy.

7. Special Instructions:

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
V XKE S/W		Incident Command	151.04	210.7	159.045	210.7	
VTAC 36		Fire Incident TAC	151.1375	T-6, 156.7	159.4725	T-4, 136.5	
KRN 1		KCFD Dispatch	153.7850	T-7, 167.9	158.8950	T-7, 167.9	
CALCORD		MEDICAL	156.0750		156.0750	T-6, 156.7	

9. Prepared by: Name: BJ Corey Pos/Title: DPSC Signature:_____

ICS 204 Date/Time: 5/21/2025 2300 hours

ASSIGNMENT LIST (ICS 204)

1. Incident Name:	2. Operational Period:				3.
LIGHTNING IN A BOTTLE	Date From:	05/22/25	Date To:	05/23/25	
	Time From:	0800	Time To:	0800	Branch: EMS
					Div/Group: KC EMS
					Page 1 of 1

4. Operations Personnel:

Operations Section Chief: **C. Wright / S. Riley**

Branch Director: **George Baker**

Division/Group Supervisor: **Jeff Farris (D) / George Baker (N)**

5. Resources Assigned:

Resource Identifier	Name	Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Time	Location

6. Work Assignments:

Ensure Life Safety for all attendees, staff and volunteers.

Ensure adherence to and effective execution of The Do Lab Med plan.

Support EH, Park Rangers, KCFD and other County/State departments as needed.

Interface with The Do Lab, Prevent Medical Solutions and onsite agencies.

Provide first response and ALS care in support of onsite medical.

Order additional Med/Health resources as needed.

Support sanctuary services as needed including BHRS service requests.

7. Special Instructions:

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
V XKE S/W		Incident Command	151.04	210.7	159.045	210.7	
MED 12		EMS TAC	463.0125		468.0125	186.2	
KRN 1		KCFD Dispatch	153.7850	T-7, 167.9	158.8950	T-7, 167.9	
CALCORD		MEDICAL	156.0750		156.0750	T-6, 156.7	

9. Prepared by: Name: BJ Corey Pos/Title: DPSC Signature:_____

ICS 204 Date/Time: 5/21/2025 2300 hours

ASSIGNMENT LIST (ICS 204)

1. Incident Name:	2. Operational Period:				3.
LIGHTNING IN A BOTTLE	Date From:	05/22/25	Date To:	05/23/25	
	Time From:	0800	Time To:	0800	Branch: EMS
					Div/Group: Hall Amb
					Page 1 of 1

4. Operations Personnel:

Operations Section Chief: **C. Wright / S. Riley**

Branch Director: **George Baker**

Division/Group Supervisor: **Armondo Lazaro**

5. Resources Assigned:

Resource Identifier	Name	Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Time	Location
Paramedic	Amy Aldinger			0600-1800	ICP
EMT	Jose Tinoco			0600-1800	ICP
Paramedic	Andrew Franke			1300-1900	ICP
EMT	Kristopher Downey			1300-1900	ICP
Paramedic	Jeff Albitre			1800-0600	ICP
EMT	John Murillo			1800-0600	ICP
Paramedic	Cody Lewis			1900-0700	ICP
EMT	Angel Loaiza			1900-0700	ICP

6. Work Assignments:

Ensure Life Safety for all attendees, staff and volunteers.

Support County/State departments as needed.

Interface with The Do Lab and onsite agencies.

Provide first response in the event of a surge event or ALS Ambulances are off site.

7. Special Instructions:

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
V XKE S/W		Incident Command	151.04	210.7	159.045	210.7	
HALL OCD		Hall Dispatch	153.785		158.895	186.2	
KRN 1		KCFD Dispatch	153.7850	T-7, 167.9	158.8950	T-7, 167.9	
CALCORD		MEDICAL	156.0750		156.0750	T-6, 156.7	

9. Prepared by: Name: BJ Corey Pos/Title: DPSC

Signature:_____

ICS 204 Date/Time: 5/21/2025 2300 hours

ASSIGNMENT LIST (ICS 204)

1. Incident Name:	2. Operational Period:				3.
LIGHTNING IN A BOTTLE	Date From:	05/22/25	Date To:	05/23/25	
	Time From:	0800	Time To:	0800	Branch: **Law**
					Div/Group: **KCSO**
					Page 1 of 1

4. Operations Personnel:

Operations Section Chief: **C. Wright / S. Riley**

Branch Director: **Jason Nelson**

Division/Group Supervisor: **Jason Nelson**

5. Resources Assigned:

Resource Identifier	Name	Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Time Location

6. Work Assignments:

7. Special Instructions:

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
V XKE S/W		Incident Command	151.04	210.7	159.045	210.7	
See Comm Plan (ICS 205) For TAC							
KRN 1		KCFD Dispatch	153.7850	T-7, 167.9	158.8950	T-7, 167.9	
CALCORD		MEDICAL	156.0750		156.0750	T-6, 156.7	

9. Prepared by: Name: BJ Corey Pos/Title: DPSC Signature:_____

Date/Time: 5/21/2025 2300 hours

ICS 204

ASSIGNMENT LIST (ICS 204)

1. Incident Name:	2. Operational Period:				3.
LIGHTNING IN A BOTTLE	Date From:	05/22/25	Date To:	05/23/25	Branch: **Law**
	Time From:	0800	Time To:	0800	Div/Group: **ABC**
					Page 1 of 1

4. Operations Personnel:

Operations Section Chief: **C. Wright / S. Riley**

Branch Director: **Jason Nelson**

Division/Group Supervisor: **Luis Pineda**

5. Resources Assigned:

Resource Identifier	Name	Personnel	Request #	Reporting Location, Special Equipment, Remarks, Notes, and Information Time	Location
Supervising Agent 1237	B. Huber			1200-2230	ICP
Agent 1261	L. Pineda			1200-2230	ICP
Agent 1234	Z. Holland			1200-2230	ICP
Agent 1302	G. Araujo			1200-2230	ICP
Agent 1332	S. Rocha			1200-2230	ICP
Agent 1341	J. Salazar			1200-2230	ICP
Agent 1347	W. Cuevas			1200-2230	ICP

6. Work Assignments:

7. Special Instructions:

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	Ch	Function	Rx Freq	Rx Tone	Tx Freq	Tx Tone	Notes
V XKE S/W		Incident Command	151.04	210.7	159.045	210.7	
See Comm Plan (ICS 205) For TAC							
KRN 1		KCFD Dispatch	153.7850	T-7, 167.9	158.8950	T-7, 167.9	
CALCORD		MEDICAL	156.0750		156.0750	T-6, 156.7	

9. Prepared by: Name: BJ Corey Pos/Title: DPSC Signature:_____

ICS 204 Date/Time: 5/21/2025 2300 hours

LiB RADIO COMMUNICATIONS PLAN	CONTROLLED UNCLASSIFIED INFORMATION//BASIC Incident Name: LIGHTNING IN A BOTTLE	Date/Time Prepared 05/19/25 20:00	Operational Period Date/Time 5/21/2025 - 5/26/2025 08:00 - 08:00

	Ch #	Function	Channel Name/	Assignment	RX Freq	RX Tone	TX Freq	Tx Tone	Mode A, D or M	Remarks
		COMMAND	V XKE S/W	INCIDENT COORDINATION	151.0400	210.7	159.0450	210.7	A	**INTEROPERABILITY W/ U XKE S/W, CAN BE PATCHED TO KRN CHAN.**
		COMMAND	U XKE S/W	INCIDENT COORDINATION	460.3875	210.7	465.2875	210.7	A	**INCIDENT COMMAND, INTEROPERABILITY W/ V XKE S/W**
		COMMAND	KRN TAC V6	REPEATER LINK	156.1650	167.9	156.1650	167.9	A	**REPEATER LINK FOR XKE S/W ON SITE REPEATER**
		COMMAND	UTAC41D	INCIDENT REPEATER LINK	453.4625	156.7	453.4625	156.7	A	**REPEATER LINK FOR XKE S/W COMMAND**
		FIRE	VTAC 36	FIRE INCIDENT TACTICAL	151.1375	156.7	159.4725	136.5	A	**REPEATED TACTICAL CHANNEL**
		FIRE	EXTENDER	AS NEEDED	173.3375	000.0	173.3375	141.3	A	**USED TO INCREASE RADIO COVERAGE**
		FIRE	KRN 1	AS NEEDED	153.7850	167.9	158.8950	167.9	A	**KCFD PRIMARY DISPATCH**
		EMS	HALL OCD MAIN	AS NEEDED	153.7850		158.8950	186.2	A	**HALL DISPATCH, MED 6**
		EMS	MED 12	AS NEEDED	463.0125		468.0125	186.2	A	**MED ALERT TACTICAL/EMS SECONDARY, REPEATED**
		LAW	PARKS TAC	LAW INCIDENT TACTICAL	453.8375	131.8	453.8375	131.8	A	**TACTICAL**
		LAW	WEST DISP	AS NEEDED	453.0500	192.8	465.1000	192.8	A	**KCSO WEST KERN**
		LAW	WEST TAC	AS NEEDED	453.3750	192.8	458.3750	192.8	A	**KCSO WEST KERN**
		MEDEVAC	CALCORD	EMS AIR COORDINATION	156.0750	000.0	156.0750	156.7	A	**MEDEVAC COORDINATION**

SPECIAL CONSIDERATIONS:	LiB incident coordination of LAW, FIRE, and EMS shall be done on a COMMAND channel. All COMMAND channels are linked so use the best one for your location. TAC V6 and UTAC41D can be used to increase radio reception on COMMAND of XKE S/W when inside the event. XKE S/W can be patched to any KRN channel for coordination of large incidents needing additional resources.

Prepared By (Communications Unit)	CHRIS OLIVER COML	County: KERN

MEDICAL PLAN (ICS 206)

1. Incident Name:	2. Operational Period:	Date From:	5/22/25	Date To:	5/23/25
LIGHTNING IN A BOTTLE		Time From:	0800	Time To:	0800

3. Medical Aid Stations:

Name	Location	Contact Number/Freq	Paramedics

4. Transportation (indicate air or ground):

Ambulance Service	Location	Contact Number	Level of Service
Hall Ambulance	ICP	911	ALS

5. Hospitals:

Hospital Name	Address, Lat & Long Helipad	Contact Number(s)/ Frequency	Travel Time Air	Travel Time Ground	Trauma Center	Burn Center	Helipad
Kern Medical Center	1700 Mount Vernon Ave.	661-326-2000	10	40	Level 1	☐	☑
Mercy Southwest	400 Old River Rd	661-663-6000	10	25		☐	☐
						☐	☐
						☐	☐
						☐	☐

6. Special Medical Emergency Procedures

Event Emergency
Individuals will contact Division Supervisor with patient complaint/condition and location.
- Division Group Supervisor Contacts:
  1. Closest EMS resource
  2. Communications Unit
- Communications Unit Contacts:
  1. Ground or Air ambulance as requested.
  2. Operations
  3. Safety
- Division Supervisor or designee will serve as point of contact and run medical emergency on assigned channel.
  1. A pre-assigned tactical frequency (i.e. CALCORD) should be used for IWI and only for duration of the emergency.
- Communications Unit will clear the Command channel for emergency traffic as needed for duration of the need.

Event Camp Emergency
Contcat Medical Branch with patient complaint/condition and location. Medical staff will respond to stabilize the patient.
- Medical Unit contacts
  1. Communications
  2. Safety
  3. Logistics
  4. Operations
  5. Crew Supervisor
  6. Incident Commander

Injury Reporting Procedures

Nature of Injury:_____
Location of Patient:_____
Point of Contact:_____
Transportation Requested by: Air____ Ground_____
Point of Pick-Up:_____
Lat:_____ **Long:**_____
Patient Unit ID:_____
Is an EMT with Patient: Yes_____ No_____
Age:_____ Sex: Male_____ Female_____

All Emergencies - Secure the area and identified witnesses for later investigation. Keep accurate log of events.

☐ Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

7. Prepared by (Medical Unit Leader): **Signature:**_____

8. Approved by (Safety Officer): **TBA** **Signature:**_____

ICS 206	Date/Time:

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name:	2. Operational Period:	Date From:	5/22/25	Date To:	5/23/25
LIGHTNING IN A BOTTLE		Time From:	0800	Time To:	0800

• **Stay Hydrated**: Drink adequate water throughout the shift to stay hydrated. Water shall be freely available at the Incident Command Post.

• **Sun Protection**: Use sunscreen to be protected from sun exposure. Shade will be available in multiple locations at the event and at the Incident Command Post.

• **Personal Protective Equipment**:
  o Hearing Protection - Due to the nature of the event staff will be exposed to loud environments. Please use proper hearing protection when near these areas.
  o Eye Protection - Wear appropriate eye protection if respiratory procedures are performed or near a patient with respiratory infection symptoms.
  o Respirator or Surgical Mask - A mask shall be worn during any respiratory procedures or when indicated by patient symptoms to prevent exposure to respiratory illness.
  o Gloves - Gloves shall be worn at all times during patient care or assisting with medical procedures.
  o High Vis Clothing or Vest - If on public roads for an incident high vis clothing or vest shall be worn.

• **Vehicle/Driving Safety**: During the event staff will have access to a UTV. Drivers shall be properly trained prior to operating the UTV. Before operating the vehicle, the driver shall perform a 360 walk around of the vehicle. Drivers will follow all traffic laws while operating on and off public roads and travel at speeds slow enough to remain in control the vehicle. Proper emergency lighting shall be mounted on the vehicle and used whenever responding or driving near large crowds.

• **Buddy System**: Due to the nature of the event, attendees may be under the influence of drugs or alcohol. When away from command post personnel shall remain in groups of two or more. At times personnel may respond to a heavily populated area, staff should stay together and utilize security or law enforcement for crowd control or when assistance is needed with combative patients. Never enter a scene, indoors or outdoors, unless you know the scene is safe.

• **Know Your Surroundings**: Familiarize yourself with the event map. Take note of the Incident Command Post, all medical tents and all emergency exits.

• **Slip, Trip, Falls**: The location of the event will have varying terrain such as roads, grass, and dirt paths. Watch your step when walking on uneven ground. These areas may need to be traversed during night operations therefore use adequate lighting to illuminate walkway hazards.

• **Opioid or Other Drug Exposures**: Personnel shall be observant to surroundings when away from the command post. Opioid or other drugs may be present on scene of an emergency. Personnel shall be familiar with signs and symptoms of exposure to these substances and proper medical intervention medication shall be made available. Staff may be exposed to the substances even while PPE is donned. If personnel are exposed to these substances all work will cease. Incident commander, and event management shall be notified of the exposure immediately. Medical treatment of personnel is the priority and event work will not continue until staff is medically cleared.

4. Site Safety Plan Required? ☐ No

Approved Site Safety Plan(s) Located At:

5. Prepared By: George Baker Position/Title: EMS-2 Signature: _____

ICS 208 Date/Time: 5/21/2025 / 2030

2025 Lightning in a Bottle

Policy, Expectations, and Directives

None of the following Expectations and Directives will supersede or override the Kern Fire Department Policy and Procedure Manual. These Expectations and Directives apply to ALL Fire Department personnel working the 2025 Lightning in a Bottle event.

Code of Conduct Expectations:

- Employees of the Kern County Fire Department **shall not** be photographed with eventgoers or its staff members in an inappropriate or unprofessional context. This includes taking photographs with inappropriately dressed individuals. If asked to take a picture with attendees who are inappropriately dressed, then professionally and gracefully decline.
- Employees of the Kern County Fire Department **shall not** take pictures and/or videos (including personal cell phones) of attendees who are inappropriately dressed.
- Employees assigned a golf cart and/or Rino-like vehicle will conduct an inspection prior to taking possession of and at the end of the shift. Report any damage to the vehicle to IC through the chain of command. Immediately report to the IC through the chain of command any accidents and damage incurred while driving.
- Employees of the Kern County Fire Department are prohibited from providing any statements to the media. If a request is made, then refer the media personnel to the Command Post and notify your supervisor.
- Employees of the Kern County Fire Department will attempt to avoid operating any motor vehicles in any heavily populated areas of the event, unless responding to an emergency. Be sure to remove the keys from the ignition when parking golf carts and Rino's anywhere outside the Command Post.
- All staff are reminded to adhere to the existing social media policy and refrain from posting anything inappropriate to any social media platforms. Including comments and opinions that may reflect the Fire Department in an unprofessional manner. Although freedom of speech does apply, be mindful that you are on-duty and polices apply.
- All employees shall treat all members of the public with respect and dignity throughout the Lightning in a Bottle event.

RULES OF ENGAGEMENT

- Fire Department Actions – Incidents;
  - Law Enforcement, Fire, and EMS, will allow LIB to handle most incidents at their level with no intervention unless;
    - Fire Department/County Policy dictates intervention
    - Asked to intervene by LIB staff, or other allied agencies, such as, KCSO, CHP, County EMS, on-site Fed agencies

Once Law Enforcement, Fire, and/or EMS get involved with or engage in an incident, then Law Enforcement, Fire, and/or EMS reserve the right to exclude LIB from the incident. Law Enforcement, Fire, and EMS have all agreed to conduct the incident according to their respective policies and practices as a unified command.

GENERAL DUTIES OF ALL PERSONNEL

All personnel of the Kern County Fire Department will adhere to all the Rules and Regulations, especially:

- In matters of general conduct, employees shall be governed by the ordinary and reasonable rules of behavior and shall commit no act while on duty that would bring discredit upon the department or its employees. Advise their immediate supervisor of any significant or unusual conditions existing in the County of Kern or the Sheriff's Office;
- Employees shall reasonably govern their personal conduct in order to work harmoniously with their fellow workers.
- Employees shall accord obedience to superiors and respect the rights of subordinates.
- Employees shall keep their person clean and well-groomed and their belongings clean and neatly stored.
- Employees shall not use obscene or uncivil language or engage in any altercation at any place where the department is represented.
- No employee shall accept a reward, fee, or gratuity from any person for services incident to the performance of duty.
- No news releases, public statements, or statistical information concerning department activities will be given out, except by authorized personnel, and only in accordance with the policies set forth by the fire chief. All inquiries for such information shall be directed to the proper officer or authorized personnel.

Note: While working at the event you will be considered on-duty and available to respond county wide, if the need arises. So all PPE should be available even if assigned as FSO

UNIT LOG (ICS 214)

1. Incident Name:	2. Operational Period:				
LIGHTNING IN A BOTTLE	Date From:	5/22/25	Date To:	5/23/25	
	Time From:	0800	Time To:	0800	

3. Unit Name/Designators	4. Unit Leader (Name and ICS Position)

5. Personnel Assigned/Designators

NAME	ICS POSITION	HOME BASE

6. Activity Log (Continue on Reverse)

TIME	MAJOR EVENTS

7. Prepared By: Date/Time:

UNIT LOG CONT. (ICS 214)

1. Incident Name:	**2. Operational Period:** Date From: 5/22/25 Date To: 5/23/25
LIGHTNING IN A BOTTLE	Time From: 0800 Time To: 0800

6. Activity Log

TIME	MAJOR EVENTS

7. Prepared By: Date/Time: