COVID-19 CHAIN OF CUSTODY ACTIVITY LOG (ICS 214)

1. Incident Name: 20-0003 nCoV-19 2020	**2. Operational Period: Date:** _____

3. EMTF Region / Unit Designation:	**4. Leader Name:**	**5. Home Agency:**

6. Personnel:

Name (First & Last)	*Position*	*Home Agency*

Activity Log Example:

Date/Time	***Received and Delivered Activities***
05MAY20 @ 1600	Received ___# of boxes from _____ (write whatever the label on the box states & person's name)
06MAY20 @ 0130	Delivered ___# of boxes to _____ (location and person's name)
	At the end of every day please save the file with the following naming convention based on the actual date and your individual unit and last name: Example: 214_05MAY20_TPWD_Lindsey

7. Activity Log:

Date / Time	***Received and Delivered Activities***

8. Prepared by: Name: _____ Position/Title: _____ Signature: _____

ICS 214, Page 1 Date/Time: _____

COVID-19 CHAIN OF CUSTODY ACTIVITY LOG (ICS 214)

1. Incident Name: 20-0003 nCoV-19 2020	**2. Operational Period:** Date: _____

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

Date/Time	***Received and Delivered Activities***

8. Prepared by: Name: _____ Position/Title: _____ Signature: _____

ICS 214, Page 2 Date/Time: _____