

# AMATEUR RADIO EMERGENCY SERVICE RESOURCE STATION REQUIREMENT LOG SHEET



NAME  SITUATION   
 CALL SIGN  DATE

Page \_\_\_\_\_ of \_\_\_\_\_

STATION: _____	No. of Operators Required/Shift: Shift: #1 _____ #2 _____ #3 _____ #4 _____
Address of Station: _____	
Directions to Station: _____	
Equipment at Station: _____	
Equipment to Take: _____	
Special Instructions: _____	
Food/Water Provided: _____ Yes _____ No	

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