

## Status Report

Incident/ Event Name:	<input style="width: 95%;" type="text"/>	Section Reporting:	<input style="width: 95%;" type="text"/>	Tracking #	<input style="width: 95%;" type="text"/>
Date/Time:	<input style="width: 95%;" type="text"/>	Prepared by:	Name: <input style="width: 95%;" type="text"/>	Contact Number	<input style="width: 95%;" type="text"/>

**Current Situation:** What is currently occurring within the area of responsibility for the Section?

**Outstanding Issues/ Challenges:** What issues within the current operational period still need to be resolved?

**Anticipated Priorities/Activities:** What will the Section priorities be during the next operational period?

**Other Comments/Issues:** Are there any public information (media), safety or other issues that need to be reviewed?

Distribution:    Section Personnel     Planning     EOC     Other: \_\_\_\_\_