

## APPENDIX A - Recommended Field Grouping

Some commonly used forms have preferred field groupings for maximum efficiency. Send all the fields in the group and wait for the receiver to acknowledge before sending the next group.

### ICS 213 Message Form

### Example: ICS-213

- Recommended field groupings
  - Message Nbr, Date, Time Handling, Msg Requests
  - To, From
  - Subject
  - Reference (if present)
  - Message – 5 groups at a time

<b>MESSAGE FORM</b>			
▶ For paper: use ballpoint pen – blue or black ink only (See back for instructions)		Origin Msg #: <sup>2</sup> <input style="width: 100px;" type="text"/>	Destination Msg #: <sup>3</sup> <input style="width: 100px;" type="text"/>
Date: <sup>1</sup> <input style="width: 100px;" type="text"/>	Time (24hr): <input style="width: 100px;" type="text"/>	Handling: <sup>5</sup> <input type="radio"/> Immediate (ASAP) <input type="radio"/> Priority (< 1hr) <input type="radio"/> Routine (< 2hr)	
This Message Requests You To: <sup>6</sup>			
TAKE ACTION (✓one): <input type="radio"/> Yes <input type="radio"/> No			
REPLY (✓one): <input type="radio"/> Yes, by <input style="width: 50px;" type="text"/> <input type="radio"/> No			
T O	ICS Position: (required) <sup>7</sup> <input style="width: 100%; height: 20px;" type="text"/>	F R O M	ICS Position: (required) <sup>8</sup> <input style="width: 100%; height: 20px;" type="text"/>
	Location: (required) <sup>9</sup> <input style="width: 100%; height: 20px;" type="text"/>		Location: (required) <sup>9</sup> <input style="width: 100%; height: 20px;" type="text"/>
	Name: (optional) <input style="width: 100%; height: 20px;" type="text"/>		Name: (optional) <input style="width: 100%; height: 20px;" type="text"/>
	Telephone #: (optional) <input style="width: 100%; height: 20px;" type="text"/>		Telephone #: (optional) <input style="width: 100%; height: 20px;" type="text"/>
SUBJECT: <sup>10</sup> <input style="width: 100%;" type="text"/>			
REFERENCE (e.g., Number of earlier msg.): <sup>11</sup> <input style="width: 100%;" type="text"/>			
MESSAGE: <sup>12</sup> (what, when, where needed; how long; contact name and phone number - KEEP MSG BRIEF)			
<div style="border: 2px solid red; width: 100%; height: 100%;"></div>			
ACTION TAKEN: <sup>13</sup> (For use by Originator / Recipient) ▶ USE SEPARATE MESSAGE FORM IF SENDING REPLY!			
CC: <input type="checkbox"/> Management <input type="checkbox"/> Operations <input type="checkbox"/> Planning <input type="checkbox"/> Logistics <input type="checkbox"/> Finance			
<b>Operator Use Only: <sup>14</sup></b>			
Relay:	Rcvd: <input style="width: 100%;" type="text"/>	Sent: <input style="width: 100%;" type="text"/>	
How:	<input type="radio"/> Received   or <input type="radio"/> Sent   (✓one):		Operator Call Sign: <input style="width: 100%;" type="text"/>
<input type="radio"/> Telephone	<input type="radio"/> Dispatch Center		Operator Name: <input style="width: 100%;" type="text"/>
<input type="radio"/> EOC Radio	<input type="radio"/> FAX	<input type="radio"/> Courier	
<input type="radio"/> Amateur Radio	<input type="radio"/> Other	<input style="width: 50px;" type="text"/>	Date: <input style="width: 50px;" type="text"/> Time: <input style="width: 50px;" type="text"/>
Outgoing (Sent): <sup>15</sup> Message Originator: Send the original to radio. Retain a copy for your reference. Radio: After sending, complete Operator Use Only and file in radio. Incoming (Received): <sup>15</sup> Radio: Complete Operator Use Only then route to the Addressee. Retain a copy in radio if directed by Supervisor. Addressee: Take appropriate action.			
SCCo RACES ICS Form 213 (01/19/2022, fillable 3/31/2022)			