

Santa Clara County RACES -- Radio Routing Slip

Rev: 190527

Radio Operator Only:	¹ Origin Msg #:	Destination Msg #:
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This Section to be Completed by Message Author/Creator:				<u>(Underlined=Required)</u>	
² <u>Date:</u>		³ <u>Time</u> (24hr):		⁴ <u>Handling:</u> <input type="radio"/> Immediate (ASAP) <input type="radio"/> Priority (<1 hr) <input type="radio"/> Routine (<2 hr)	
T O	⁵ <u>ICS Position:</u>			F R O M	⁹ <u>ICS Position:</u>
	⁶ <u>Location:</u>				¹⁰ <u>Location:</u>
	⁷ <u>Name:</u>				¹¹ <u>Name:</u>
	⁸ <u>Contact Info:</u>				¹² <u>Contact Info:</u>
Form:		¹³ <u>Type:</u>		¹⁴ <u>Topic:</u>	

Instructions for Message Author/Creator:

1. Complete section above, surrounded by BOLD line (see instructions on back)
2. Fill in all Required fields
3. Attach to the front of a form to be sent via radio
4. Deliver to radio operator for transmission

Radio Operator Only:			
Relay:	Rcvd:	Sent:	
Name:	Call Sign:	Date:	Time (24hr):

