1. Incident Name		2. Operational Period (Date / Time)		ICS-221 DEMOBILIZATION	
		From: To:		CHECK-OUT	
3. Unit / Personnel Released 4.			4. Release Date / Time		
5. Unit / Personnel					
You and your resources have been released, subject to signoff from the following: (Demob. Unit Leader "X" appropriate box(es))					
Logistics Section					
	Supply Unit				
	Communications Unit				
	Facilities Unit				
Plar	Planning Section				
	Documentation Unit				
Finance / Admin. Section					
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6. Remarks					
o. Remarke					
7. Prepared by: Date / Time					

