

CUPERTINO MEDICAL RESERVE CORPS LOGISTICS REPORT

Name of Event: _____ Activation Number: _____

Date of Event: _____

Event or Ark Location: CMC DAC GGE LAW HMS MVF CUF SSF VAL

#	Equipment Name	Equipment Storage Location	Qty. Used	Needs Replacement ?
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Completed by: _____ Date: _____