

Crisis Communications Intake Response Form

Criticality Level (select one):

HEALTH AND HAZARD

ROUTINE **MODERATE** **SEVERE**

Use this form to help your office respond to critical incidents.

Incident: _____ **Date/Time of Incident:** _____

Details: Include any relevant details that may be helpful as you and your team continue to respond to the incident.

Who to Notify: Include complete contact information for those who may need to be notified about the incident.

Internal Contact Name	Phone Number	Email	Notified?

External Contact Name	Phone Number	Email	Notified?

Holding Statements: Use this section to adapt these holding statement templates for the incident at hand, or use numbers 4 and 5 to craft new statements. Holding statements are short and concise and are a way for you to notify the press and public of an emerging incident.

1. _____ was informed of _____ on _____. Our
Election Office Incident Date
office remains in contact with _____ and local health officials and will continue to monitor the
Partner Agencies
situation and take appropriate action to keep voters and our team of dedicated public servants safe and informed. At
this time, we have not been advised by partner agencies or _____ to suspend
State Election Office
services. Additional information can be found by visiting _____.
Website

2. _____ has advised _____ that _____
Partner Agency Election Office Incident
has _____. As an extra precaution, services at some voting locations
Impact
will be temporarily suspended to undergo additional sanitization procedures. Our office will announce reopening
schedules at _____ as available. Affected sites are listed below:
Website

_____ Sites

