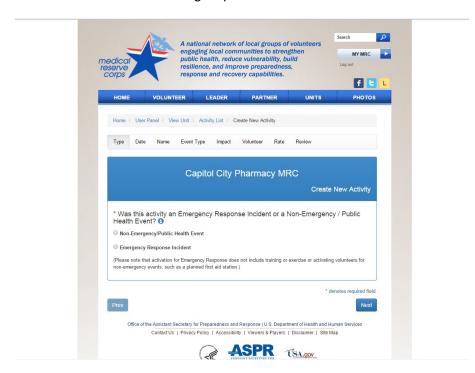
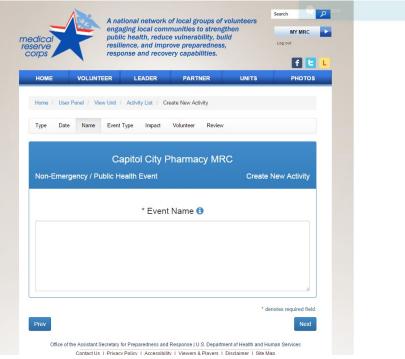
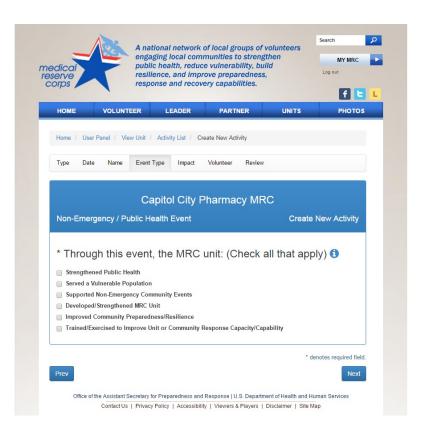
## Non-Emergency/Public Health Event

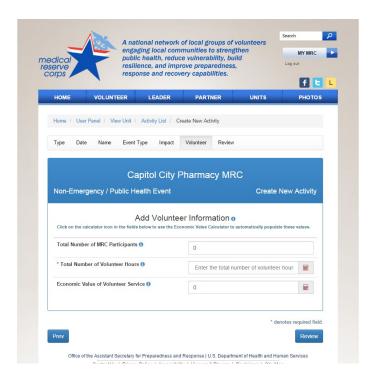




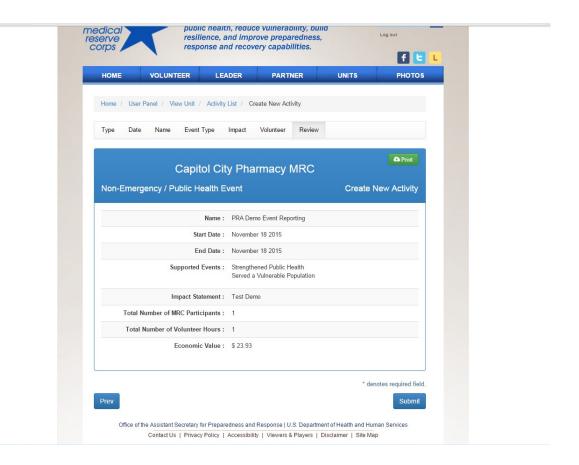






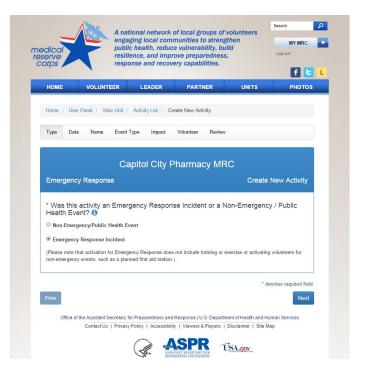


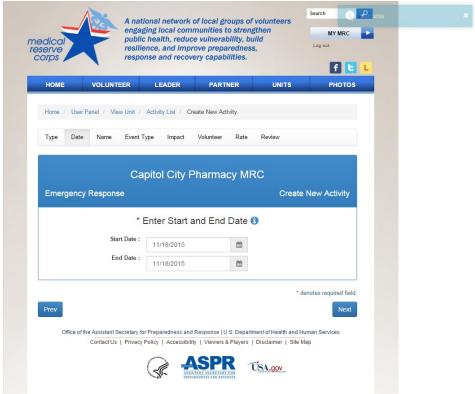
Job Title	MRC Volunteers	Total Hours Served	Subtotal	Hourly Rate	Hourly Bene
Acupuncturist	0	0	\$0.00	\$34.96 🗷 🧷	\$4.20 🗷 😅
Chaplain/Clergy	0	0	\$0.00	\$23.02 🗷 😅	\$2.54 🗷 🖸
Clinical Social Worker	0	0	\$0.00	\$24.74 🗷 🦸	\$2.88 🗷 🗧
Dentists	0	0	\$0.00	\$80.25 🕝 😅	\$8.38 🕜 🗧
EMS Professional	0	0	\$0.00	\$16.53 🕝 😅	\$1.79 🗷 🕻
Licensed Practical Nurse/Licensed Vocational Nurse	0	0	\$0.00	\$20.39 📝 🧷	\$2.40 🕜 🔏
Mental Health Counselor/Therapist	0	0	\$0.00	\$20.81 🕝 😅	\$2.31 🕝 🕻
Non-Public Health/Non-Medical	0	0	\$0.00	\$22.14 🕝 😅	\$1.79 🗷 🕻
Nurse Practitioner	0	0	\$0.00	\$43.97 🗷 🗷	\$5.19 🕜 🔏
Other Public Health/Medical	0	0	\$0.00	\$27.86 🗷 😂	\$2.66 🗷 🕻
Pharmacist	0	0	\$0.00	\$55.27 🗷 😅	\$6.73 🗷 🕻
Physician	0	0	\$0.00	\$86.95 🗷 😅	\$9.92 🕜 💰
Physician Assistant	0	0	\$0.00	\$44.45 🕝 😅	\$5.25 🕜 💰
Psychiatrist	0	0	\$0.00	\$85.35 ₪ €	\$10.00 🕝
Psychologist	0	0	\$0.00	\$35.45 🕝 😊	\$5.19 🕝 😩
Registered Nurse	0	0	\$0.00	\$32.66 🗷 😅	\$3.78 🕝 🕻
Respiratory Therapist	0	0	\$0.00	\$27.50 🗷 😅	\$3.22 🗷 🕻
Veterinarian	0	0	\$0.00	\$44.83 🗷 😅	\$4.87 🗷 🕻
Veterinarian Technician	0	0	\$0.00	\$15.13 🕝 😅	\$1.75 🕜 💰
Total:	0	0	\$0		

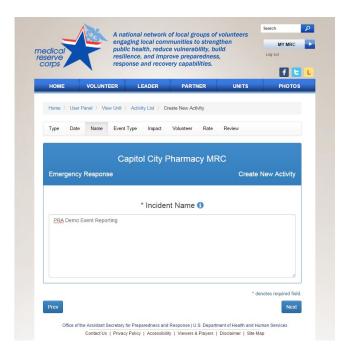


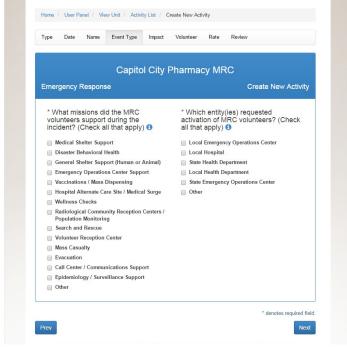
Unit Activity Reporting Module

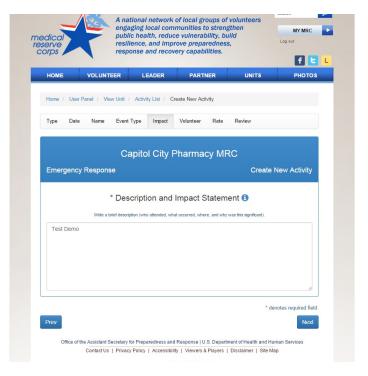
**Emergency Response Incident** 

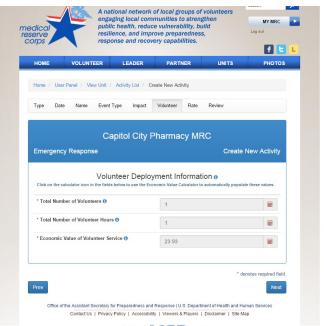


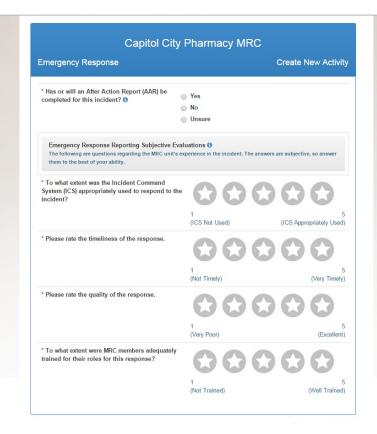














According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-0302. The time required to complete this

information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer