

Chapter Shelter Status Report

(Report due every 6 hours - or as requested)

Chapter Name: <u>Capital Area American Red Cross</u> From (name & title) _____, Watch Manager Telephone <u>850-878-6080</u> FAX <u>850-878-3441</u>	Time of Report, (Check one) EAST Coast Time <input type="checkbox"/> 6 a.m. <input checked="" type="checkbox"/> noon <input type="checkbox"/> 10 a.m. <input type="checkbox"/> midnight	DR # <u>470</u> Report # <u>1</u> State: <u>Florida</u>
---	--	---

Facility Name	Communications	Shelter Status			Shelter	Population			Meals & Snacks Served		Staff			
		Ready (Y/N)	Open (Y/N)	Closed (Y/N)		Capacity	Current Population (period)	New People Sheltered	Total To Date	Period	Total To Date	# MC Staff Assigned		# DHS/DMHS Assigned
Address City, Zip County	Phone # Cell Phone # Radio Freq.										Period	Total To Date	Period	Total To Date
Leon County														
Belle Vue Middle 2214 Belle Vue Way Tallahassee	488-4467	Y			300	0								
Faith Presbyterian 2200 N Meridian Rd. Tallahassee	385-6151	Y			120	0								
Forest Heights Baptist 1200 W Tharpe St. Tallahassee	385-8193	Y			125	0								
Lakeview Baptist 222 W 7th Ave. Tallahassee	222-5946	Y			150	0								
Oak Ridge Elem 4530 Shelter Rd. Tallahassee	488-3124	Y			300	0								
Senior Citizens' Center 1400 N. Monroe St. Tallahassee	891-4000		Y		200	0								
Kate Sullivan Elem 927 Miccosukee Rd. Tallahassee	487-1216	Y			350	0								

