

VIR PREOC Radio Room Quick Message Form

Message Precedence (Select One)

EMERGENCY Priority
 Routine
 Operations Section to Complete

Message Type (Select One)

New Message
 Reply to Message Num _____

To: _____
 Name and/or Position

Location: _____
 Where is message to be sent

From: _____
 Message Originator (Name or Position)

Approval to Transmit

Operations Section to
Complete (Initials)

Date: _____

Time: _____

Radio Room Use Only

Destination Callsign: _____ Date: _____ Time: _____ Message Num: _____