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| Einheit/Dienststelle: |       | Hinweis: Dieses Formular gibt es als Download unter: |
| Berichtfertiger: |       | **extranet.ils-allgaeu.de** |
| Rückfragemöglichkeit: | Telefon:       | Email.:       |

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| **lfd****Nr.** | **Einsatz** | **Einsatzort** (Gemeinde, Straße, HSNR) | **Meldebild/** **Schlagwort** | **Fahrzeuge/****Einsatzmittel** | **örtl.****zuständ. Dienst-stelle** | **Zeitmarken** (können auch in ENB selbst nachgetragen werden) |
|  | Datum/Uhrzeit Eingang AFüSt | Einsatz kam von ILS (j/n) bzw. ILS-Nr. |  |  |  |  | Beginn (Pflicht) | aus  | an | ab | ein / erledigt |
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| **Blatt Nummer:** |  |