

Completing the IMS213-R Form

Amethyst District ARES
Version 1.0, 22 April 2020

Header (Sending Radio-Operator)

IMS Form 213-R

Number	Precedence	Handling	Station of Origin	Check	Place of Origin	Time Filed	Date Filed
	E P R W						
1. Incident Name				2. Operational Period			

Field	Description
Number	Number each form, starting at "1" for each incident. Each station should have its own numbering, with "Station of Origin" distinguishing them.
Precedence	Generally "Routine".
Handling	Optional, see below.
Station of Origin	Callsign of station sending the message.
Check	Number of words in body of message. Automatically filled-in.
Place of Origin	City and Province of originating station.
Time Filed	Time when message was received by originating station. (Use Zulu)
Date Filed	Date when message was received by originating station.

HX - Message Handling Instructions

HX Code	Append	Description
HXA	Number	Collect landlines delivery authorize by addressee within ____ kilometres. (If no number, authorization is unlimited).
HXB	Number	Cancel message if not delivered within ____ hours of filing time; service originating station.
HXC		Report date and time of delivery (TOD) to originating station.
HXD		-- Report to originating station the identity of station from which received, plus date, time and method of delivery.
HXE		Delivering station get reply from addressee, originate message back.
HXF		Hold delivery until ____ (date).
HXG	Number	Delivery by mail or landlines toll call not required. If toll or other expense involved, cancel message and service originating station.

Footer (Receiving Radio-Operator)

Received From	Date	Time	Sent To	Date	Time

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Field	Description
Received From	Callsign of station you received message from.
Date	Date you received message.
Time	Time you received message (Zulu)
Sent To	Callsign you sent the message to.
Date	Date you sent message.
Time	Time you sent message (Zulu)