



# Nassau County CERT After Action Report

**NASSAU COUNTY**

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**Committee or Event:**

**Member submitting report:**

**Report period or event date:**

**Routing:**  IC  OPS  TT  LOG  COMM  ADMIN  PA  PM

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**Activity/Report:**

**Major Strengths:**

**Areas for Improvement:**

**Suggested planning activities:**

**Suggested Operational activities:**