**Date / Time Received**: Click or tap here to enter text.

**Person completing Report:** Click or tap here to enter text.

**Brief Crisis Event Description**:

Click or tap here to enter text.

**DESCRIBE THE IMPACTS:**

Click or tap here to enter text.

**gaps or lessons learned**

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| **Availability of key internal and external personnel and/or support/vendor services**Click or tap here to enter text. |
| **Backup Services, Power, or IT Needs**Click or tap here to enter text. |
| **Communications Capabilities**Click or tap here to enter text. |
| **Evacuation and/or Safety Issues**Click or tap here to enter text. |
| **Government Cooperation**Click or tap here to enter text. |
| **Overall: what worked Well?**Click or tap here to enter text. |
| **What response/recovery areas need improvement?**Click or tap here to enter text. |

**Additional Input:**

Click or tap here to enter text.

**OPEN ISSUES:**

Click or tap here to enter text.

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| **RECOMMENDATIONS:**Click or tap here to enter text. |

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| **NAME** | **DATE** |
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