$DRAFT - \underline{ACTIVATION} - DRAFT$

Date	Contact: Phone:
	Pager:
	Cell:
At the request of for a child (or # of children) taken from	
	(brief description of circumstances).
The event occurred at	(location) on(date) at(time).
	(name, if known), age, from(city, state – if known). The suspect is described as
The suspect is believed to be operating	g a
	(vehicle description, if known).
	(any known information regarding direction of travel).
The victim(s) is:	
(name, age, further	er description).
Photograph(s) of victim(s), suspect(s),	and/or vehicle is available at www.oregonamberalert.com .
If you have any information on this inc	cident, please call 911 or contact(lead law enforcement) at 1-866-5AMBER5 (or
another established hotline number by	
	s AMBER ALERT program is available on the Oregon State Police

www.oregonamberalert.com