

AMBER ALERT SUBMISSION FORM
URGENT- FOR IMMEDIATE ACTION- URGENT

*****Call NYSP Communications at (518) 457-6811 Before Completing This Form*****

TO: NYSP Communications and Special Victims Unit *** Email form (and child/abductor images): commop@troopers.ny.gov
AND nyspsvu@troopers.ny.gov Alternate method - FAX Form: (518) 457-3207*** **NOTE:** If you are using web-based email (ex: hotmail, gmail, yahoo etc.) you cannot use the "Submit by Email" button. Instead fill out the form and save it, then attach it to an email.

FROM:
Investigating Agency Name Officer Name Phone # (including area code)

Incident Date Incident Time

Incident Location
Municipality Name County Specific Location

Telephone Number (for Broadcast)

CHILD INFORMATION

Name
Last First Middle

Sex Race Height Weight Eye Color Hair Color

Date of Birth Age Scars/Marks/Tattoos

Clothing Description

SUSPECT INFORMATION

Name
Last First Middle

Sex Race Height Weight Eye Color Hair Color

Date of Birth Age Scars/Marks/Tattoos

Clothing Description

VEHICLE INFORMATION

Plate Number State Year Make Model Color

Other Descriptors

ABDUCTION DESCRIPTION (include circumstances, direction of travel, possible destination, additional suspects, etc)

NCIC # ENTRY