

State of Illinois
AMBER ALERT
Notification Plan

(Public Act 92-0259)
FACSIMILE TRANSMISSION PACKET

Date: _____ Time: _____

To: Illinois Springfield Communications Center
Telephone #: 217-786-6677
Facsimile #: 217-786-7191

From: (Department) _____
(Contact) _____

Telephone #: _____ Facsimile #: _____

OCA (LEADS/NCIC) Number: _____

Subject: **CANCELLATION**
CHILD ENDANGERMENT/ABDUCTION
EMERGENCY NOTIFICATION MESSAGE

Name: _____ DOB: _____

Reason for Cancellation: _____

If you have any questions regarding this transmission, please call the sender at the telephone number listed above.

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