

MISSOURI STATE HIGHWAY PATROL
MISSOURI BLUE ALERT
This form is for use by law enforcement officials only

Follow this procedure to initiate a BLUE ALERT

Make sure you complete and submit BOTH pages of this Alert Form.

1. BLUE ALERT CRITERIA

- A law enforcement officer is killed or seriously injured in the line of duty; **or**
- An officer is missing in connection with official duties; **or**
- There is an imminent and credible threat to kill or seriously injure a law enforcement officer;
and
- There is actionable information known about a suspect for a public notification to be helpful to law enforcement; **and**
- The law enforcement agency involved requests or approves the alert being issued.

**IF ALL OF THE ABOVE BLUE ALERT CRITERIA ARE MET,
COMPLETE THIS FORM AND FOLLOW THE INSTRUCTIONS BELOW.**

2. SUBMIT THE INFORMATION ON THE NEXT PAGE.

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|--|--|---------------------------------|--|--|--|------|------------------------------|---------------|-----------------------------|--|-----|--|
| WHAT TYPE OF ALERT IS THIS? | | | | | HAS ANY TYPE OF LOCAL ALERT BEEN ISSUED? | | | | | | | |
| <input type="checkbox"/> INITIAL ALERT | | <input type="checkbox"/> UPDATE | | <input type="checkbox"/> CANCELLATION | | | <input type="checkbox"/> YES | | <input type="checkbox"/> NO | | | |
| INCIDENT DATE | | | | TIME | | | | | | | | |
| | | | | <input type="checkbox"/> AM <input type="checkbox"/> PM | | | | | | | | |
| LOCATION | | | | | | | | | | | | |
| SUSPECT'S NAME (1) | | | | | | | RACE | | SEX | | AGE | |
| HEIGHT | | WEIGHT | | HAIR | | EYES | | DATE OF BIRTH | | | | |
| UNIQUE PHYSICAL CHARACTERISTICS | | | | | | | | | | | | |
| CLOTHING | | | | | | | | | | | | |
| ARMED WITH | | | | | | | | | | | | |
| SUSPECT'S NAME (2) | | | | | | | RACE | | SEX | | AGE | |
| HEIGHT | | WEIGHT | | HAIR | | EYES | | DATE OF BIRTH | | | | |
| UNIQUE PHYSICAL CHARACTERISTICS | | | | | | | | | | | | |
| CLOTHING | | | | | | | | | | | | |
| ARMED WITH | | | | | | | | | | | | |
| VEHICLE COLOR | | | | YEAR | | MAKE | | | MODEL | | | |
| STATE | | LICENSE | | SUSPECT / VEHICLE LAST SEEN (LOCATION, DATE / TIME, AND DIRECTION OF TRAVEL) | | | | | | | | |
| VEHICLE FURTHER DESCRIBED AS | | | | | | | | | | | | |

| | | |
|---|--|------|
| BRIEF CIRCUMSTANCES REGARDING THE INCIDENT | | |
| LAW ENFORCEMENT AGENCY REQUESTING ALERT | OFFICER OR DISPATCHER VERIFYING CRITERIA AND REQUESTING ALERT | |
| AGENCY CASE / INCIDENT NUMBER | 24 HOUR PHONE NUMBER FOR LAW ENFORCEMENT, MEDIA AND THE PUBLIC TO CONTACT YOUR AGENC | |
| CELL NUMBER FOR STATE COORDINATOR TO CONTACT INVESTIGATING OFFICER | | |
| PHOTOGRAPHS / MAPS. You may attach relevant photographs, maps, or other useful attachments. Call Troop F at the number listed below for e-mail information if necessary. | | |
| Agency representative authorizing this alert must sign and date below. | | |
| NAME OF PERSON FROM REQUESTING LAW ENFORCEMENT AGENCY AUTHORIZING THIS REQUEST (By typing your name below it is the same as a handwritten signature.) | DATE | TIME |

MISSOURI BLUE ALERT
c/o Missouri State Highway Patrol, Troop F
FAX Number: (573) 751-6814 • Telephone Number: (573) 751-1000
Please verify by telephone that your FAX has been received.
E-mail: moalerts@mshp.dps.mo.gov