

(Agency or other appropriate letterhead)

**MEDIA NOTIFICATION
OF
SOBRIETY CHECKPOINT**

The (____name of police agency____) will conduct a Sobriety Checkpoint on Saturday the 18th of October 2003 between the hours of 8:00 pm and 4:00 am at the following location(s):

1. (Road or street, City, County of location 1)
2. (Road or street, City, County of location 2)

For more information contact (____insert name of contact, agency and telephone number____).

Signature

Type or print name

Date distributed