



PO BOX 7000
SOUTHEASTERN, PA 19398
(678)924-4900 FAX (678)924-4901

16.1131

DATE 8/29/19

THIS IS A REQUEST FOR A REPORT

PAY TO THE METRA POLICE DEPT
ORDER OF FOIA
547 WEST JACKSON BLVD
CHICAGO, IL 60661

VOID

AUTHORIZED SIGNATURE

TRAN: [REDACTED]

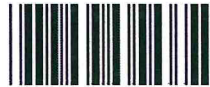
REPORT REQUEST



LexisNexis®
PO BOX 7000
SOUTHEASTERN, PA 19398
(678)924-4900 FAX (678)924-4901
TOLL FREE PHONE:
1/800-934-9698
TOLL FREE FAX:
1/800-934-6449
EMAIL REPORTS:
cru.incoming@lexisnexisrisk.com

PLEASE CHECK A
CIRCLE BELOW

8/29/19



Report Attached:

Report Cost: \$

Number of Pages:
(including this sheet)

- No Report Found with the information provided
- No Report Written - Log entry only / Driver Exchange of Info.
- Loss location not in our Jurisdiction
Suggest You Try: _____
- Not Releasable / Not Ready _____
- Comments & Suggestions: _____

Report/Case # 2019-37704

Type of Report Auto Accident

Date of Occurrence 8/2/19 Time _____

Precinct or District _____

LOCATION OF LOSS

RAILORAD TRACKS

City ELGIN

County COOK

State IL

Additional Information IV DISABLED ON THE RAILROAD TRACKED AND WAS STRUCK BY TRAIN

VEHICLE INFO

DRIVERS or VICTIMS INFO

Car Tag # _____ State _____

Insured Party [REDACTED]

Make FORD Year 2004

D.O.B. [REDACTED] SS# _____

VIN 1FTYR14UX4PA15257

Drivers Lic # [REDACTED] State IL

POLICE or FIRE AGENCY who wrote report?

METRA PD

16.1131

Driver #2 [REDACTED]

Driver #3 _____

Client Division 2718

Claim # [REDACTED]
Internal Codes

Claims Adjuster

CRP3VST1
HEATHER BYRON



TRAN: [REDACTED]