



Account No. [REDACTED]

AAAM-MI

EM

Questions? Contact Metro's IL DEPARTMENT.

Please Reply To:
Metropolitan Reporting Bureau
Box 926, William Penn Annex
Philadelphia, PA 19105-0926
Phone: (800) 245-6686
Fax No: (800) 343-9047
www.metroreporting.com
Email: report@metroreporting.com

Request for a(n) AUTO ACCIDENT Report. Please return this form with report.

INSURED : [REDACTED]

Report Number: MP-17-8508

DATE OF LOSS : 02/27/17 Time:

LOCATION : I 94 & 95ST
CHICAGO , IL

REPORT NUMBER : MP-17-8508

DRIVER : [REDACTED]

OTHER DRIVER :

CLAIM NUMBER : [REDACTED]

VIN# : 5TDBK3EH3CS168400

POLICE DEPT. : METRA RAIL ROAD PD
BARRACKS/PCT.# :
DESCRIPTION :

- Unable to Locate Report With Information Given
- Loss Location Not In Our Jurisdiction. Try: _____
- Log Entry Only, No Report Written. Notes: _____

[] If there is a charge for this service, please enclose your bill with the report and our check will be issued promptly. 87

IMP

