

16.1131

(Rev. 9/09)

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



THIS IS A REQUEST FOR A REPORT

METRA POLICE DEPT FOIA 547 WEST JACKSON BLVD DATE

5/31/16



ORDER CHICAGO,IL 60661	VOID AUTHORIZED SIG	VOID	
5/31/16 BEPO	ORT REQUEST (M)* LexisNexis*		
PLEASE CHECK A CIRCLE BELOW Report Attached:	PO BOX 7000 SOUTHEASTERN, (678)924-4900 FAX		
Report Cost: \$ Number of Pages: (including this sheet)	1/800-934-9698 pre TOLL FREE FAX: 1		
No Report Found with the information provided	Report/Case # MP1600017947		
No Report Written - Log entry only / Driver Exchange of Info. Loss location not in our Jurisdiction	Type of Report Auto Accident		
Suggest You Try:	Date of Occurrence5/20/16 Time	_	
Not Releasable / Not Ready	Precinct or District		
Comments & Suggestions: LOCATION OF LOSS CENTER AVE			
<u> </u>		CHER RD	
CitySUMMIT	CountyCOOK	StateIL	
Additional Information			
VEHICLE INFO	DRIVERS or VICTIMS INF	-0	
Car Tag # StateI	Insured Party		
Make TOYOTA Year 2011	D.O.B SS#		
VINJTDBU4EE0B9169751	Drivers Lic #_	_ StateIL	
POLICE or FIRE AGENCY who wrote report?	Driver #2		
METRA PD	Driver #3		
Client	Claims Adjuster		
Division Claim #	CINDY	WHITED	
Page 1 of 1 Internal Codes 16.113	31 TRAN:		

Police Dept.: Please Return This Form With Your Response... Thanks

DR