

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
CHICAGO, IL 60661

DATE

8/3/16

TO THE
ORDER
OF

VOID VOID
AUTHORIZED SIGNATURE

8/3/16

TRAN:

REPORT REQUEST

LexisNexis®

PLEASE CHECK A
CIRCLE BELOW

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

☐ Report Attached:

Report Cost: \$

Number of Pages:
(including this sheet)

1/800-934-9698 press 3

TOLL FREE FAX: 1/800-934-6449

- ☐ 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 #

2016115010755

Type of Report Auto AccidentDate of Occurrence 6/1/16 Time 05:00PM

Precinct or District _____

LOCATION OF LOSSBETWEEN 24TH & 25TH STCity QUEENS County QUEENS State NY

Additional Information _____

VEHICLE INFO**DRIVERS or VICTIMS INFO**

Car Tag # _____ State _____ Insured Party _____

Make ACUR Year 2007 D.O.B. _____VIN 5J8TB18537A020276 Drivers Lic # _____ State _____

POLICE or FIRE AGENCY who wrote report?

METRA PDClient
Division

Claim #

Internal Co

Claims Adjuster

FTP ORDERS