



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

16.1131

THIS IS A REQUEST FOR A REPORT

METRA POLICE DEPT
FOIA
547 WEST JACKSON BLVD
CHICAGO, IL 60661

DATE 11/21/16

VOID VOID
AUTHORIZED SIGNATURE

11/21/16

TRAN:

REPORT REQUEST



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

PLEASE CHECK A
CIRCLE BELOW

☐ 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 # MP1625649

Type of Report Auto Accident

Date of Occurrence 7/16/16 Time 02:23 PM

Precinct or District _____

LOCATION OF LOSS

OLD HICKORY RD

City NEW LENNOX County COOK State IL

Additional Information _____

VEHICLE INFO

DRIVERS or VICTIMS INFO

Car Tag # _____ State _____ Insured Party _____

Make DODGE Year 1999 D.O.B. _____ SS# _____

VIN _____ Drivers Lic # _____ State _____

POLICE or FIRE AGENCY who wrote report?

METRA PD

Driver #2 _____

Driver #3 _____

Client
Division

Claims Adjuster

KATIE SMITH

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TRAN:

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

(Rev. 1/16)