



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

2019 FEB -6 P 3: 24 DATE

1/28/19

AMOUNT

**VOID VOID**  
AUTHORIZED SIGNATURE



1/28/19

TRAN:

**REPORT REQUEST**



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PLEASE CHECK A CIRCLE BELOW



Report Attached:

Report Cost: \$	Number of Pages: (including this sheet)
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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 #** PP 20180056331

Type of Report Auto Accident

Date of Occurrence 12/19/18 Time 00:01

Precinct or District \_\_\_\_\_

**LOCATION OF LOSS** 2300 W GROVE AND VERMONT ST

City BLUE ISLAND County COOK State IL

Additional Information \_\_\_\_\_

<b>VEHICLE INFO</b>	<b>DRIVERS or VICTIMS INFO</b>
Car Tag # _____ State _____	Insured Part
Make <u>NISSAN</u> Year <u>2017</u>	D.O.B.  SS
VIN <u>5N1AT2MV7HC884165</u>	Drivers Lic #  State <u>IL</u>

**POLICE or FIRE AGENCY who wrote report?**

METRA PD

Driver #2 \_\_\_\_\_

Driver #3 \_\_\_\_\_

Client 9161 Claims Adjuster

Division 259 Claim #

Internal Codes



TRAN: