

From: [Natalia Jimenez](#)
To: [FOIA Metra](#)
Subject: REPORT REQUEST
Date: Thursday, March 7, 2019 8:51:59 AM

	<p>P.O. Box 518 Rockwall, TX 75087 Ph: 972-771-2482 Fx: 1-800-661-8027</p>
<p>dorothyivey@ensearchexpress.com</p>	

Hello, I'm submitting this request for a copy of a report, all the information I have is listed below:

Type of Report: Home Incident Request
Insurance Name: [REDACTED]
Claim Number: [REDACTED]
Vehicle Info: NA
Vehicle VIN: NA
License Plate: NA
Responding Agency: METRA PD (Chicago PD)
Person(s) Involved: [REDACTED]
Person(s) Involved D.O.B.: UNK
Specific Location Of Incident: ASHBURN METRA LOT: 83ST STREET & CENTRAL PARK AVE, Chicago IL
Date of Loss: 2/13/2019
Time of Incident: 6PM
Police Report Number: [REDACTED]
Description if Incident: CLMT FELL ON ICE IN PARKING LOT



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