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IN REPLY REFER TO FILE NO.

February 13, 2014
Via Electronic Mail

The Kosner Firm, CHTD.
Attention: Karen Schuetzner
221 N. LaSalle Street
Suite 2200
Chicago, Illinois 60601
kspjs@msn.com

EP-1

Re: Freedom of Information Act Request

Dear Ms. Schuetzner:

The Village of Elmwood Park is in receipt of your February 6, 2014 Illinois Freedom of Information Act (5 ILCS 140/1 *et seq.*) ("FOIA") request for the following records:

Accident Report – 8/4/13 7400 North Ave. 7:58 A.M.
1) Jakinto Campoverde
2) Clarise Jones
Agency Crash Report # 13-7217.

Enclosed are records responsive to your request. However, please be advised that certain information in the records being provided has been determined to be exempt from disclosure under FOIA, and that information has been redacted from the records being provided.

Section 7(1)(b) of FOIA provides that "private information" is exempt from disclosure. "Private information" is defined in FOIA as, "unique identifiers, including a person's social security number, driver's license number, employee identification number, biometric identifiers, personal financial information, passwords or other access codes, medical records, home or personal telephone numbers, and personal email addresses. Private information also includes home address and personal license plates, except as otherwise provided by law or when compiled without possibility of attribution to any person." 5 ILCS 140/2(c-5). Consequently, certain unique identifiers, including driver's license numbers, employee identification numbers, home or

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Ms. Karen Schuetzner
February 13, 2014
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personal telephone numbers, home addresses, and personal license plates, have been redacted from the records being provided.

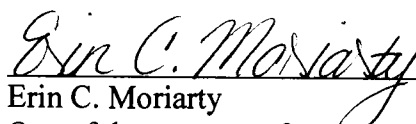
Section 7(1)(c) of FOIA provides that, “[p]ersonal information contained within public records, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy ...” is exempt from disclosure. Consequently, birthdates have been redacted from the records being provided.

The person responsible for the decision to deny a portion of your request is the Village of Elmwood Park Freedom of Information Officer, Gina Pesko. In accordance with Section 9(a) of FOIA, you are hereby notified that you have the right to file a request for review regarding the decision made by the Village of Elmwood Park Freedom of Information Officer with the Public Access Counselor at the Illinois Attorney General’s Office. You can file your request for review with the Public Access Counselor by writing to:

Sarah Pratt, Acting Public Access Counselor
Office of the Attorney General
500 South 2nd Street
Springfield, Illinois 62706
Phone: 312-814-5526
Fax: 217-782-1396
E-mail: publicaccess@atg.state.il.us

Also, you are notified that you have the right to judicial review regarding the decision made by the Village of Elmwood Park Freedom of Information Officer pursuant to Section 11 of FOIA.

Sincerely,


Erin C. Moriarty
One of the attorneys for
the Village of Elmwood Park

Enclosures

ILLINOIS TRAFFIC CRASH REPORT

Sheet 1 of 1 Sheets



DRAC	PEDV	TRFD	TRFC	WEAT	DRVA	VIS	VEHD	LGHT	COLL	MANV	PPA	PPL
U1	U2				8	U1	U2	U1	12	13		

INVESTIGATING AGENCY: **Elmwood Park**

DAMAGE TO ANY VEHICLE / PROPERTY: \$500 OR LESS, \$501 - \$1,500, OVER \$1,500

TYPE OF REPORT: ON SCENE, NOT ON SCENE (DESK REPORT), AMENDED

AGENCY CRASH REPORT NO.: **13 7217**

TRFW: **2**

ADDRESS NO.: **7400 Blk** HIGHWAY or STREET NAME: **NORTH AVE**

CITY: **Elmwood Park** COUNTY: **COOK**

DATE OF CRASH: **08/04/13** TIME: **07:58**

LARS CODE: **81600NOR**

NUMBER MOTOR VEHICLES INVLD: **2**

LARS CODE: **77499**

NAME: **CAMPIONE, JACINTO** MAKE: **Honda** MODEL: **CIVIC** YEAR: **01**

PLATE NO.: **12** STATE: **IL** YEAR: **04-14**

VIN: **1HGEM22571L030869**

VEHICLE OWNER (LAST, FIRST M.I.): **CAMPIONE CONRA JACINTO**

INSURANCE CO.: **STATE FARM**

PHONE: **192-215**

TAKEN TO: **1** EMS AGENCY: **1**

OWNER ADDRESS (STREET, CITY, STATE, ZIP): **192-215**

TELEPHONE: **192-215** POLICY NO.:

NAME: **JONES, CHARISE R** MAKE: **CHEV** MODEL: **COBALT** YEAR: **10**

PLATE NO.: **F2** STATE: **IL** YEAR: **02-14**

VIN: **1G1ADS58A7211391**

VEHICLE OWNER (LAST, FIRST M.I.): **SAMUELS**

INSURANCE CO.: **STATE FARM**

PHONE: **643-6805-809-133**

TAKEN TO: **1** EMS AGENCY: **1**

OWNER ADDRESS (STREET, CITY, STATE, ZIP): **643-6805-809-133**

TELEPHONE: **643-6805-809-133** POLICY NO.:

UNIT	(SEAT)	(DOB)	(SEX)	(SAFT)	(AIR)	(INJ)	(EJECT)	PASSENGERS & WITNESSES ONLY (NAME) / (ADDR) / (TEL)	(HOSP)	(EMS)
W			M					KARWOWSKI, RICHARD		

DAMAGED PROPERTY OWNER NAME: **CAMPIONE, JACINTO**

PROPERTY OWNER ADDRESS: **7400 Blk NORTH AVE**

CITY: **Elmwood Park** STATE: **IL** ZIP: **60120**

ARREST NAME: **CAMPIONE, JACINTO** SECTION: **9-101** CITATION NO.: **12-221**

ARREST NAME: **CAMPIONE, JACINTO** SECTION: **9-101** CITATION NO.: **12-221**

OFFICER ID: **35220** SIGNATURE: **Donna Marino** SUPERVISOR ID: **LT. JAMES WILKINS**

CONTRIBUTORY CAUSE(S): **04**

POSTED SPEED LIMIT: **30**

DATE POLICE NOTIFIED: **08/04/13** TIME NOTIFIED: **07:58**

COURT DATE: **07/13/13** COURT TIME: **09:00**

DID CRASH OCCUR IN A WORK ZONE? YES NO

IF YES CHECK ONE BELOW:

- CONSTRUCTION
- MAINTENANCE
- UTILITY
- UNKNOWN WORK ZONE TYPE

WORKERS PRESENT? YES NO

REMEMBER TO USE BLACK INK, PRESS HARD, PRINT LEGIBLY AND COMPLETE ALL REQUIRED FIELDS!

*IF YES TO COM VEH, COMPLETE COMMERCIAL MOTOR VEHICLE AREA ON BACK.

COPY

Printed by authority of the State of Illinois

SR 1050 JANUARY 2013

U130291431

Diagram and Narrative are required on all Type B crashes, even if units have been moved prior to the officer's arrival.



INDICATE NORTH BY ARROW

NO DIAGRAM
VEHICLES WERE MOVED

NARRATIVE (Refer to vehicle by Unit No.)

UNIT #2 WAS W/B NORTH AVE IN CURB LANE; UNIT #1 W/B NORTH AVE WAS IN LEFT LANE SUBVERT INTO CURB LANE AND STRUCK UNIT #2 IN REAR SIDE REAR AND CONTINUED W/B NORTH AVE.
WITNESSES: OFF DUTY CHICAGO POLICE WERE DRIVING BEHIND UNIT #1. THEY STATED THAT UNIT #1 STRUCK UNIT #2 AND CONTINUED W/B. WITNESSES STATED THAT THEY WERE BLOWING TRUMPETS AND TRYING TO STOP UNIT #1. UNIT #1 TURNED ON TO TRAVE WITNESS PULLED BEHIND VEHICLE AND ANOTHER UNKNOWN PERSON IN A VAN PULLED IN FRONT OF UNIT #1. OFF DUTY PO IDENTIFIED HIMSELF TO UNIT #1 AND CALLED OUR DEPT. BOTH UNIT #1 AND UNIT #2 WERE TOWED BY VILLAGE TOW.

LOCAL USE ONLY

COPY

U1 Color SILVER U2 Color BLUE
U1 Towed by / to VILLAGE TOW U2 Towed by / to VILLAGE TOW

COMMERCIAL MOTOR VEHICLE (CMV)

IF MORE THAN ONE CMV IS INVOLVED, USE SR 1050A ADDITIONAL UNITS FORMS.

A CMV is defined as any motor vehicle used to transport passengers or property and:

1. Has a weight rating of more than 10,000 pounds (example: truck or truck/trailer combination); or
2. Is used or designed to transport more than 15 passengers, including the driver (example: shuttle or charter bus); or
3. Is designed to carry 15 or fewer passengers and operated by a contract carrier transporting employees in the course of their employment (example: employee transporter - usually a van-type vehicle or passenger car); or
4. Is used or designated to transport between 9 and 15 passengers, including the driver, for direct compensation (example: large van used for specific purpose); or
5. Is any vehicle used to transport any hazardous material (HAZMAT) that requires placarding (example: placards will be displayed on the vehicle).

CARRIER NAME

ADDRESS

CITY/STATE/ZIP

USDOT NO. ICCC NO.

Source of above info. Side of Truck Papers Driver Log Book

Gross Vehicle Weight Rating (GVWR)

Were HAZMAT placards displayed on the vehicle? Y N

If yes, name on placard

4-digit UN no. 1-digit Hazard Class no.

Did HAZMAT spill from the vehicle (do not consider fuel from the vehicle's own tank)? Y N UNK

Did HAZMAT Regulations violation contribute to the crash? Y N UNK

Did Motor Carrier Safety Regulations (MCS) violation contribute to the crash? Y N UNK

Was a Driver/Vehicle Examination Report form completed?
HAZMAT Y N UNK Out of Service? Y N
MCS Y N UNK Out of Service? Y N
Form No.

IDOT PERMIT NO. WIDE LOAD? Y N

TRAILER WIDTH(S): 0-96" 97-102" >102"
TRAILER 1
TRAILER 2

TRAILER LENGTH(S): 1 ft TRAILER 2 ft
TOTAL VEHICLE LENGTH ft NO. OF AXLES

SELECT CODES FROM BACK COVER OF CRASH BOOKLET:

VEHICLE CONFIGURATION
CARGO BODY TYPE LOAD TYPE