1. Name of Reporting Railroad						2. Alphabe	2. Alphabetic Code 3. Report Mo		onth 4. 1		. Report Year	
a. ccident/Injury Number		5b. Day	5c. Time of Day	5d. County					5e. State	5f. Type Person Job Co	5g. Age	
h. rrug/ llcohol Test A D	5i. Injury Illness Code	5j. Physical Act	5k. Locatio	51. Event	5m. Result	5n. Cause	50. Number of Days Away From Work	5p. Number of Days Restricted	5q. Exposu Hazma	ire to	5r. Special Cas Codes	
Latitude (c	optional) Up to 250 Cha	aracters)			5t.	Longitude (optio	nal)					
a. .ccident/Injury Number		5b. Day	5c. Time						5e. State	5f. Type	5g. Age	
			of Day							Persor Job Co	1/	
h. rug/ lcohol Test A D	5i. Injury Illness Code	5j. Physical Act	of Day 5k. Locati	on S1. Event	5m. Result	5n. Cause	50. Number of Days Away From Work	5p. Number of Days Restricted	5q. Exposu Hazma	Person Job Co	ode 5r.	
n. rug/ lcohol Test A D	Injury Illness Code	5j. Physical Act	5k.		Result		Number of Days Away From Work	Number of Days	Exposi	Person Job Co	ode 5r. Special Ca	
n. rug/ lcohol Test A D	Injury Illness Code Optional) (Up to 250 Ch	5j. Physical Act	5k.		Result	Cause	Number of Days Away From Work	Number of Days	Exposi	Person Job Co	5r. Special Ca Codes 5g. Age	

NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report " 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).

5t. Longitude (optional)

5u. Narrative (Up to 250 Characters)

5s. Latitude (optional)