### Illinois Traffic Crash Report

**Sheet** of **Sheets**

**Government Agency:** Illinois Department of Transportation

**Purpose:** This form is used to record details of traffic crashes in Illinois.

**Sections:**
- **Unit 1:** General Information
- **Unit 2:** Additional Details
- **Unit 3:** Contributory Causes

**Fields:**
- **Name:** (Last, First, M.I.)
- **Street Address:**
- **City:**
- **State:**
- **Zip:**
- **Date of Birth:**
- **Make:**
- **Model:**
- **Year:**
- **Date of Crash:**
- **Time:**
- **Number Motor Vehicles Involved:**
- **Contributory Cause(s):**
- **Posted Speed Limit:**

**Instructions:**
- Use black ink and print legibly.
- Complete all required fields.

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**Legend:**
- FT: Feet
- M: Meters
- NW: North
- SE: South
- W: West
- E: East

**Additional Notes:**
- This form is part of the Illinois Traffic Crash Reporting System.
- All entries must be completed accurately to ensure proper documentation and investigation.

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**Remember:**
- Use black ink.
- Press hard.
- Print legibly.
- Complete all required fields.