RAILROAD INJURY AND ILLNESS SUMMARY

DEPARMENT OF TRANSPORTATION (Continuation Sheet) SHEET 1 OF 1

FEDERAL RAILROAD ADMINISTRATION (FRA) OMB Approval No:

1. Name of Reporting Railroad	2. Alphabetic Code	3. Report Month	4. Report Year
UNION PACIFIC RR CO.	UP	10	20

5a. Accident/Injury Number	5b. Day	5c. Time of Day	5d. County	5e. State	5f. Type Person/ Job Code	5g. Age
1020GC026	16	10:50 PM	SAN JACINTO	48	D	34

5h. Drug/ Alcohol Test A	5h. Drug/ Alcohol Test D	5i. Injury Illness Code	5j. Physical Act	5k. Location	5l. Event	5m. Tools	5n. Cause	5o. Number of Days Away From Work	5p. Number of Days Restricted	5q. Exposure to Hazmat	5r. Special Case Codes
		998	21	A 03B4	32	18	09	0	0	N	

5s. Latitude	30.445282	5t. Longitude	-95.028870

5u. Narrative (Up to 250 Characters)

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).

This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety. Public reporting burden is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. In trespasser cases and in cases of suicide/attempted suicides, the estimated average time to complete this form is 50 minutes and 65 minutes, respectively. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.