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| JOHNSON & ROCHEATTORNEYS AT LAWTYSONS CORNER8355-A GREENSBORO DRIVEMcLEAN, VIRGINIA 22102  |
| Date  |

 County Fire & Rescue Dept.

Attn: Records Department

RE: Patient:

DOB:

SSN:

Date of Accident:

Time of Accident:

Location of Accident:

Dear :

Please be advised that this firm represents the above named individual in all matters pertaining to an accident that occurred at the date, time and place indicated above.

This letter is to request that you provide this firm with copies of all reports connected with this incident.

My check to cover the cost of this report is enclosed.

An Authorization is enclosed.

I would also appreciate your advising us whether any pictures were taken by anyone at the scene of the accident.

Thank you for your courtesy.

Sincerely yours,

Brien A. Roche

BAR/kkb

Enclosures