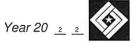
## OSHA's Form 300A (Rev. 01/2004)



## Summary of Work-Related Injuries and Illnesses

U.S. Department of Labor Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
(G)	(H)	<u>(I)</u>	(J)
Number of Day	ys		
Total number of da away from work		tal number of days of transfer or restriction	
Injury and Iline	ess Types		
	ess Types	(L)	
Injury and Illne	ess Types	(4) Poisonings	0
Injury and Illne otal number of (M)			

## d by the form.

Public reporting burden for this collection of information is estimated to average 50 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW. Washington, DC, 20210. Do not send the completed forms to this office.

Esta	ablishment Information
Your	establishment 607 WILLOW SPRINGS CENTER
Street	690 EDISON WAY
City	RENO State NV Zip 89502
Industr	ry description (e.g., Manufacture of motor truck trailers)
	Psychiatric and Substance Abuse Hospitals
Standa	rd Industrial Classification (SIC), if known (e.g., SIC 3715)
OR	8 0 6 3
North .	American Industrial Classification (NAICS), if known (e.g., 336212)
	6 2 2 2 1 0
Emp Works	<b>ployment Information</b> (If you don't have these figures, see the heet on back of this page to continue)
Annua	l average number of employees142
Total h	sours worked by all employees last year 296,033
Sign	here
Knov	wingly falsifying this document may result in a fine.
	fy that I have examined this document and that to the best of my ledge the cattries are true, accurate, and complete.