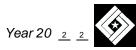
Number of Cases

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 it 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 0 (G)	Total number of cases with days away from work $\frac{0}{(H)}$	Total number of cases with job transfer or restriction 0 (I)	Total number of other recordable cases 2 (J)
Total number of day away from work 0 (K)	ys To	tal number of days of o transfer or restriction 0 (L)	
Injury and Illne. Total number of (M)	ss Types		
1) Injuries	2	(4) Poisonings	0
2) Skin disorders 3) Respiratory condition	 ons	(5) Hearing Loss(6) All other illness	

Post this Summary page from February 1 to April 30 of the year following the year covered 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.

Your establis	hment NV05	7 LAS VEGA	\S-8680 \	W CHEYENNE AV
Street	8680 W C	HEYENNE A	AVE	
City	LAS VEGAS	State	NV	Zip <u>89129</u>
Industry descrip	otion (e.g., Manufactur	e of motor tru	ck trailers	;)
Servic	ces for the Elderly an	d Persons w	ith Disab	ilities
Standard Indust	rial Classification (SIC	C), if known (e	e.g., SIC 3	715)
OR				
OK				
	ı Industrial Classificati	on (NAICS), i	if known (e.g., 336212)
North American	n Industrial Classificati		,	e.g., 336212)
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