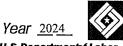
OSHA's Form 300A

Summary of Work-Related Injuries and Illnesses



U.S.Departmentof Labor
OccupationasafetyandHealthAdministration

FormapprovedOMBno. 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.

Number of C	ases		
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
0	0	3	2
(G)	(H)	(1)	(J)
Number of D	ays		
Total number of da away from work	•	otal number of days of b transfer or restriction	
0		217	
(K)		(L)	
Injury and II	iness Types		
Total number of (M)			
) Injuries	5	(3) Respiratory cond	itions 0
	•	(4) Poisonings	0
) Skin disorders	0	(5) Hearing loss	0
		(6) All other illnesses	0

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 11 you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 ConstitutionAvenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Your est	Silver Ridge Health	care Center	
Street	1151 S. Torrey Pines Drive		
City	Las Vegas	State NV	ZIP 89146
Industry	description (e.g., Manufacture of motor Health Care	truck trailers)	
North A	merican Industrial Classification (NA	ICS), if know	n (e.g., 336212)
	007		
	007		
	byment information (If you do t on the back of this page to estimate.)	i't have these fi	igures, see the
Workshee		t't have these fi	igures, see the
Workshee Annual	t on the back of this page to estimate.)	10	
Workshee Annual	t on the back of this page to estimate.) average number of employees urs worked by all employees last year	10	
Morkshee Annual Total ho Sign 1	t on the back of this page to estimate.) average number of employees urs worked by all employees last year	10 3112	37
Morkshee Annual: Total ho Sign I Knowi	ton the back of this page to estimate.) average number of employees urs worked by all employees last year here	10 3112 may result	in a fine.
Morkshee Annual: Total ho Sign I Knowi	ton the back of this page to estimate.) average number of employees urs worked by all employees last year nere ngly falsifying this document that I have examined this document	10 3112 may result	in a fine.