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

## **Summary of Work-Related Injuries and Illnesses**

Year 2021

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

Form approved QMB no. 1218-017

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

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 entirely. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904-35, in OSHA's Recarditeeping rule, for further details on the access provisions for these forms.

Number of Cases				
rediffuer of Cases				
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	0	0	
(G)	(H)	(1)	(J)	
Number of Days	WE THE WA			
Total number of days away from work		Total number of days of job transfer or restriction		
0		0	1	
(K)	_	(r)	4	
injury and lilness T	ypes	E STEWE		
Total number of(M)				
(1) Injury	0	(4) Poisoning	0	
(2) Skin Disorder	0	(5) Hearing Loss	0	
(3) Respiratory		The same of the sa		
Condition	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 instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respend to the collection of information unless if deplays a currently valid CMB control number. If you have any comments about these estimates or any aspects of this data collection, contact. US Department of Labor OSHA Office of Statistics. Room H-3644, 200 Constitution Ave. RW. Washington, DC 2021 Ob not search to complete forms to these discussions.

Establishme	ent Information					
Yo	our establishment name	Headquarters Air F	orce (11th Wing OL-A)			
Street	1690 Air Force Pentagon					
City	Washington	State	DC		Zip 2	10330
Industr	ry description (e.g., Manuf	acture of motor touch	trailers	5-18685	_ 0000 02	
N IO Gate	National Security	actore of motor truck	transcraf			
Standa	ard Industrial Classification	(SIC), if known (e.g.,	SIC 3715)			
OR North	9 7 1 1 American Industrial Classif	learlan (NAICS) IF box	wo le e 3367171			
OR HOILIN	9 2 8 1		wii (e.g., 250222)			
Employmen	t Information					
	Annual average	number of employee	3,217			
	Total hours worked by a	il employees last year	5,648,289			
lign here						
Knowi	ngly falsifying this docume	ent may result in a fir	ie.			
I certif	y that I have examined this	document and that t	to the best of my knowle	dge the entries ar	e true, accu	irate, and
comple	6-1	12 J				
701	CATHERINE M. LOGAN, C	AL USAF	_		Comm	ander
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	(202) 284-3020 Phone			0	-0 r	000
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