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

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

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

Year 2023

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no 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 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

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Number of Cases			
Total number of deaths	Total number of cases with days away from work 50	Total number of cases with job transfer or restriction 37	Total number of other recordable cases
(G)	(H)	(1)	(J)
Number of Days			
Total number of days away from work		Total number of days of job transfer or restriction	
2,936 (K)	-	1,267 (L)	
Injury and Illness 1	Types		
Total number of (M)			
(1) Injury	221	(4) Poisoning	0
(2) Skin Disorder	0	(5) Hearing Loss	3
(3) Respiratory Condition	. 0	(6) All Other Illnesses	4

## 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 58 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 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 aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

stablishment information	
Your establishment name University of Illinois - Urbana Ca	ampus
Street 506 S. Wright Street	
City Urbana State	Illinois Zip 61801
Industry description (e.g., Manufacture of motor truck trailers) <u>University</u>	
Standard Industrial Classification (SIC), if known (e.g., SIC 37	15)
DR North American Industrial Classification (NAICS), if known (e.g	g., 336212)
mployment information	
Annual average number of employees 24,045	
Total hours worked by all employees last year	<u>5</u>
ign here	
Knowingly falsifying this document may result in a fine.	
I certify that I have examined this document and that to the bescomplete.	st of my knowledge the entries are true, accurate, and
Mayou B. White Company executive	Interim Associate Vice Chancellor and Executive Director of Facilities  & Services Designate  Title
217-333-2668	1/31/2024
Phone	Date