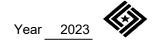
OSHA's Form 300A (Rev. 01/2004) Summary of Work-Related Injuries and Illnesses



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 injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete

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.

Number of Cases Total number of Total number of Total number of cases Total number of deaths with job transfer or other recordable cases with days away from work restriction cases 0 6 2 1 (G) (H) (I) (J) Number of Days Total number of Total number of days of days away from job transfer or restriction work 103 298 (K) (L) **Injury and Illness Types** Total number of... (M) (4) Poisoning (1) Injury q (2) Skin Disorder 0 (5) Hearing Loss 0

0

(3) Respiratory Condition

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

(6) All Other Illnesses

0

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 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.

Establishment information				
	Your establishment name Purdue University Fort Wayne			
	Street 2101 Coliseum Blvd. E.			
	City	Fort Wayne	State IN	Zip46805
	Industr	y description (e.g., Manufacture of motor Higher Education	truck trailers)	
	Standard Industrial Classification (SIC), if known (e.g., SIC 3715)			
OR	North American Industrial Classification (NAICS), if known (e.g., 336212)			
		<u>6 1 1 3 1</u>	0	
Employment information				
	Annua	average number of employees	2,810	
	Total h year	ours worked by all employees last –	1,799,721	
Sign here				
	Knowingly falsifying this document may result in a fine.			
	I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.			
		Eric Butt		Sr. Director of EHS
		Company executive		Title
		765-494-9227 Phone		1/31/2024 Date