OSHA's Form 300A

Summary of Work-Related Injuries and Illnesses

Year 2020

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

All establishments covered by Part 1904 must complete this Summary page, even in 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 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	2	0	1
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
117	0
(K)	(L)

Injury and Illness Types

Total number of ...
(M)

(1) Injuries	3	(4) Poisonings	0
(2) Skin disorders	0	(5) Hearing loss cases	0
(3) Respiratory conditions	0	(6) All other illnesses	0

Establishment Information

Establishment: King County Safety and Claims

Location: 9700-KING COUNTY ELECTIONS

Address:

City: State

Industry description (e.g. Manufacture of motor truck trailers): Local Government

Standard Industrial Classification (SIC), if known (e.g. SIC 3715) 9199

Employment information

Annual average number of employees: 16,603

Total hours worked by all employees last year: 28,127,020

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.

Mary Beth Short

Company Executive: Mary Beth Title: Division Manager

Phone: 206-263-2506 Date: 1/26/2021

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 aspect 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.

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Year 2020

Summary of Work-Related Injuries and Illnesses

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

Grand Totals

Number of Cases

(G) 0 (H) 562 (I) 65 (J) 241

Number of Days

(K) 28873 (L) 9415

Injury and Illness Types

(M)

(1) Injuries	772	(4) Poisonings	0
(2) Skin disorders	1	(5) Hearing loss cases	7
(3) Respiratory conditions	15	(6) All other illnesses	73

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