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

Year **2024**

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

Form approved OMB no. 1218-0176

Year to Date Summary: 31 December 2024

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.

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	1	3	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
1	6
(K)	(L)

Injury and Illness Types

Total number of…	(M)		
(1) Injury	3	(4) Poisoning	0
(2) Skin Disorder	0	(5) Hearing Loss	0
(3) Respiratory Condition	0	(6) All Other Illnesses	0

Establishment information

Your establishment name MARINE CORPS LOGISTICS BASE ALBANY (Garrison Command)

Street 814 Radford Blvd Ste 20308

City Albany State Georgia Zip 31704

Industry description (e.g., Manufacture of motor truck trailers)
Department of Defense Installation Management and Services

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

OR North American Industrial Classification (NAICS), if known (e.g., 336212)
5 6 1 2 1 0

Employment information

Annual average number of employees 409

X Total hours worked by all employees 850,720

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.

Commanding Officer

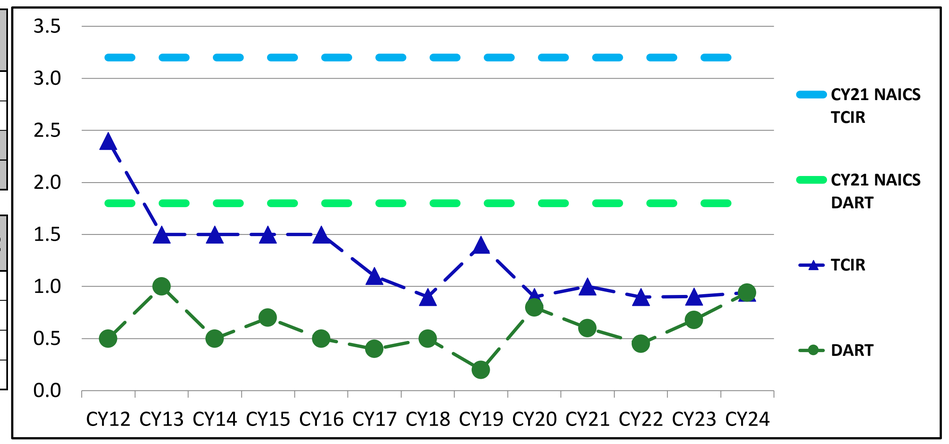
(229) 639-7453
Phone

Date

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 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.

Month	No. Employees	Hours Worked
January	405	70,200
February	402	69,680
March	403	69,853
April	403	69,853
May	407	70,547
June	421	72,973
July	430	74,533
August	431	74,707
September	411	71,240
October	410	71,067
November	398	68,987
December	393	68,120

	CY23	Type Rate	CY19	CY20	CY21	CY22	CY23	CY24	3-Yr Avg.
	3	DART	0.2	0.8	0.6	0.4	0.7	0.9	0.7
	4	TCIR	1.4	0.9	1.0	0.9	0.9	0.9	0.9
Total Hours	884,347	NAICS DART	1.8	3.2	3.2	3.2	1.8	1.8	
		NAICS TCIR	3.0	4.5	3.8	3.8	3.2	3.5	

	CY22	Type Rate	CY18	CY17	CY16	CY15	CY14	CY13	CY12
	2	DART	0.5	0.4	0.5	0.7	0.5	1.0	0.5
	4	TCIR	0.9	1.1	1.5	1.5	1.5	1.5	2.4
Total Hours	889,786	NAICS DART	1.5	2.1	1.8	1.2	1.5	1.9	1.8
		NAICS TCIR	3.5	3.5	3.2	2.3	3.1	3.8	3.6