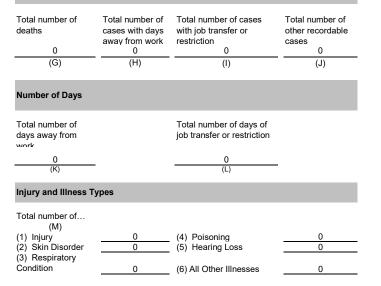
OSHA's Form 300A (Rev. 01/2004) Summary of Work-Related Injuries and Illnesses

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



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 I abor. OSHA Office of Statistics. Room N-3644. 200 Constitution Ave. NW. Washington. DC 20210. Do not send the completed forms to this office.



Occupational Safety and Health Administration Form approved OMB no. 1218-0176

Establish	ment information			
Your e	stablishment name <u>Winter J</u>	ohnson Group		
Street	5616 Peachtree Rd, Suite 100)		
City	Atlanta	State	GA	Zip 30341
Industi	ry description (e.g., Manufactur General Contractor	e of motor truck trailers)		
Standa	ard Industrial Classification (SIC	;), if known (e.g., SIC 3715)		
OR North	American Industrial Classificatio 236220	on (NAICS), if known (e.g., 336	212)	
Employm	ent information			
	l average number of employees			
Sign here				
Knowi	ngly falsifying this document	may result in a fine.		
l certif	y that I have examined this doc ete.	ument and that to the best of m	ny knowledge the entries	s are true, accurate, and
	Company executive			VP Risk Management Title
	404.456.9717 Phone			January 10, 2023 Date