



Suzlon Injury Report

252
6-26-08
CMB
6-26-08

S.R.C. - Pipestone, MN U.S.A.

Team Member: Leslie Presas
Date of Occurrence: 6-25-08
Time of Occurrence: 7:45 P.M.
Department: Finishing
Team Leader: Daniel Alleckson
Date Reported: 6-25-08

If taken to Doctor, fill out this section
Date of Treatment: _____
Time of Treatment: _____
Doctor: _____
Drug Test Performed: Yes No
Drug test date & time: _____

Location of where accident occurred (be specific)

Finishing white line

Description of accident / injury

got something in her eye.
Had pen flash eye. Had to take contacts
out!

Witnesses names

Corrective action (include: task, equipment, environmental, and management factors) – If needs further investigation use form F:ST:02

Talked to her about eye safety glasses.
pl contact

Employee Feedback

Leslie Presas
Team Member Signature

6-25-08
Date

[Signature]
Manager Signature

6-26-08
Date

Thomas Fick
Human Resources Signature

6-26-2008
Date

RECEIVED
JUN 26 2008

BY:.....