



# Suzlon Injury Report

246  
CME copy  
6-19-08

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

Team Member: Marcia Rivas

If taken to Doctor, fill out this section

Date of Occurrence: 6-18-08

Date of Treatment: \_\_\_\_\_

Time of Occurrence: 3:13

Time of Treatment: \_\_\_\_\_

Department: finishing dry

Doctor: \_\_\_\_\_

Team Leader: Jon Swanson

Drug Test Performed:    Yes    No

Date Reported: 6-18-08

Drug test date & time: \_\_\_\_\_

Location of where accident occurred (be specific)

Dry finishing white line scale

Description of accident / injury

tripped over white line scale and fall  
on butt. left knee injured

Witnesses names

Phil Hudson

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

Cover these bars

Employee Feedback

Marcia Rivas  
Team Member Signature

6-18-08  
Date

[Signature]  
Manager Signature

6-19-08  
Date

[Signature]  
Human Resources Signature

6-19-2008  
Date

RECEIVED  
JUN 19 2008