

**U.S. Department of Labor**

Bureau of Labor Statistics  
2 Massachusetts Ave., N.E.  
Washington, D.C. 20212



Dear Employer:

The U.S. Bureau of Labor Statistics is working with State agencies to survey employers about work-related injuries and illnesses. You have been selected to participate in the mandatory *Survey of Occupational Injuries and Illnesses* for calendar year 2011 (OMB No. 1220-0045). In order to obtain complete and accurate information about the safety record of America's workplaces, our survey must include a sample of all establishments, regardless of size and industry. Thus, some establishments who are normally exempt from keeping the enclosed Occupational Safety and Health Administration (OSHA) records are included in the survey and must keep records for the survey year. This year, we are notifying all survey participants in advance, including those who normally keep OSHA records.

Beginning January 2011, record any work-related injuries and illnesses that occur in your workplace during 2011 according to the OSHA recordkeeping regulations. We have enclosed copies of the *Log of Work-Related Injuries and Illnesses* (OSHA Form 300), the *Summary of Work-Related Injuries and Illnesses* (OSHA Form 300A), and the *Injury and Illness Incident Report* (OSHA Form 301). You will be mailed the *Survey of Occupational Injuries and Illnesses* early in 2012. You will then be asked to provide the 2011 year-end summary information from the OSHA 300A form and the details about individual cases of injury or illness.

The Bureau of Labor Statistics, its employees, agents, and partner statistical agencies, will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act of 2002 (Title 5 of Public Law 107-347) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent.

Your participation in the recordkeeping activity and the Survey is mandatory under Public Law 91-596. If you have questions regarding your responsibilities for this survey, call the phone number listed on the front of the form.

Thank you for helping us collect accurate information and for helping in the effort to make America's work places safer and healthier.

Sincerely,

A handwritten signature in cursive script that reads "John W. Ruser".

John W. Ruser, Ph.D.  
Assistant Commissioner  
Office of Safety, Health and Working Conditions  
Bureau of Labor Statistics