"Green Form"

(TO BE ATTACHED TO OFFICE COPY OF UNIT MINUTES)

MONTHLY SAFETY AND HEALTH REPORT

Unit#: _____ Location: _____ Date: _____

Topics are but not limited to; new or unsafe work practices, new tools or equipment, Unsafe tools and equipment, Toxic Substances, Potential Hazards, Recent on the job Items discussed were: _____

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NOTE: Use the reverse side if necessary

Submit once each month to the Local Union 1245, Safety Committee,
30 Orange Tree Circle
Vacaville, Ca. 95687