## MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS RESEARCH AND ANALYSIS P.O. Box 59

Jefferson City, MO 65104-0059

## FIRST REPORT OF OCCUPATIONAL FATALITY MISSOURI CENSUS OF FATAL OCCUPATIONAL INJURIES

Phone: 573-751-2663 Fax: 573-751-2319 www.labor.mo.gov

HOTLINE 1-866-267-1516 (toll-free)

Date	Time	☐ a.m. ☐ p.m.	Agency							
Contact Name								Phone Nu	ımber	
DECEDENT I	NFORMA	TION								
Name							Sex  Male Female	Age	Date of Birth	
Occupation					R	ace		Socia	ll Security Number	
EMDI OVED I	NEODM	ATION								
EMPLOYER INFORMATION Employer/Company Name								Phone Number		
Employer/Compa	any Name							Phone Nu	imber	
INCIDENT IN	FORMAT	CION								
Date of Incident	Time	☐ a.m. ☐ p.m.	Date of Death	Time	a.m. p.m.	Coun	ty		Check One  Natural Accidental Homicide Suicide	
Summary of Inci	dent			1				W.		

Please fax to Patricia Knapp at 573-751-2319 or email Knapp\_Patricia@states.bls.gov as soon as possible after fatality occurs. Thank you.

Missouri Department of Labor and Industrial Relations is an equal opportunity employer/program. TDD/TTY: 800-735-2966 Relay Missouri: 711.