**(Exhibit B)**

**Monthly Non-Emergency Incident Report Log**

Month/Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency/Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Contract #:\_\_\_\_\_\_\_\_\_\_\_\_

Site Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Incident** | **Time of Incident** | **Party filling out Log** | **Name of Party(s) involved** | **Description of incident** | **Injury - Y/N** | **Type of Injury** | **Witnesses** | **Other Notes** |
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**Please check if you have no incidents to report this month**