





**Cargill  
Enterprises**

The social business.













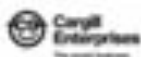












# Activity Report

For all Health and Safety reporting

\_\_\_\_\_  
Date completed

Name (of Person(s) Reporting) \_\_\_\_\_

Date \_\_\_\_\_

## Type of Activity



Accident (vehicle)



Injury



Observation



Damage to equipment or building



Environmental



Near miss



Hazard



Property or material loss



Complaint



Ideas (for improvement)



Other \_\_\_\_\_



Where did it happen? (Location) \_\_\_\_\_



Who was involved? \_\_\_\_\_



Describe the activity/hazard



\_\_\_\_\_



Tell us what happened and what was done

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Do we need to do anything? Yes/No \_\_\_\_\_



What do we need to do next?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



