

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

Report for the reporting period 04/01/2009 to 03/31/2010
(mm/dd/yyyy) (mm/dd/yyyy)

1. Name of Labor Compliance Program (LCP) : 3QC, Inc. formerly WCS/Ca, Inc.		
2. LCP I.D. Number (assigned by DIR): 2003.00006	3. Date of Initial Approval: March 7, 2003	
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Dane Ruddell, President & Labor Compliance Officer 7777 Greenback Lane, Suite 208 Citrus Heights, Ca 95610 916.676.8625, 916.676.8624 fax druddell@3qcinc.com		
5. List all Awarding Bodies covered by this report as well as any other Awarding Bodies with whom the LCP currently has a contract to provide compliance enforcement. If <i>none</i> , please proceed directly to item 7 and provide all requested information. Then complete the information below, and sign and submit this form to DIR, Office of the Director, Attn: LCP Special Assistant, 455 Golden Gate Avenue, 10 th Floor, San Francisco, CA 94102.		
Community College Districts City College of San Francisco College of the Sequoias Los Rios CCD Rancho Santiago CCD Riverside CCD San Joaquin Delta College Santa Rosa Jr. College	Department of General Services Evergreen ESD Fall River JUSD Grant JUHSD Huntington Beach HSD La Honda Pescadero USD Marin County Office of Education Mendocino USD Modesto City Schools Mount Diablo USD Sacramento City USD San Leandro USD San Mateo UHSD Santa Clara County Office of Education	Santa Cruz County Office of Education Sylvan USD Western Placer USD Utilities City of Hughson City of Roseville Contra Costa County Department of Conservation and Development Contra Costa Water District Delta Diablo Sanitation District Department of Parks and Recreation Department of Water Resources Diablo Water District
K-12 Anaheim City SD Anaheim UHSD Capistrano USD Castro Valley USD		

LCP-AR3

Eastern Municipal Water District-Riverside
Levee District 1
Monterey County
Reclamation District 1
Reclamation District 1601
Reclamation District 17
Reclamation District 2
Reclamation District 2024
Reclamation District 2025
Reclamation District 2026
Reclamation District 2028
Reclamation District 2033
Reclamation District 2037

Reclamation District 2038
Reclamation District 2039
Reclamation District 2040
Reclamation District 2041
Reclamation District 2042
Reclamation District 2044
Reclamation District 2059
Reclamation District 2060
Reclamation District 2072
Reclamation District 2119
Reclamation District 2137
Reclamation District 3

Reclamation District 307
Reclamation District 341
Reclamation District 524
Reclamation District 544
Reclamation District 548
Reclamation District 563
Reclamation District 756
Reclamation District 773
Reclamation District 800
Reclamation District 830
Sacramento Suburban Water District
San Diego Water Authority
Tuolumne Utilities District

What suggestions do you have for the Department of Industrial Relations to better assist you with your program in the coming year? (attach additional sheets if necessary):

Online reporting for annual report.

SUBMITTED BY:



Signature

Dane Ruddell, President & Labor Compliance Officer

Name and Title

April 8, 2010

Date

6. LC § 1771.5 enforcement activities (provide all information requested, attaching as many sheets as necessary, and *please complete separate forms for each Awarding Body covered in this report*).

Awarding Body: _____

A. List projects handled by LCP within the past 12 months.

Project Name	Bid Advertisement Date	Prime Contractor	Contract Amount
Total			

B. Summary of all wages and penalties assessed and/or recovered.

Project Name	Affected Contractor (who directly employed the worker)	Amount Assessed	Amount Recovered	Approval of Forfeiture Requested from Labor Commissioner? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Violation
Total					

C. For any amount identified in item B for which approval of forfeiture not requested from the Labor Commissioner, please explain below.

Project Name	Amount Assessed	Amount Recovered	Explanation
Total			

Attached - Individual Submittal for Each Agency

D. For any amount identified in item B for which approval of forfeiture was requested from the Labor Commissioner, please provide the following:

Project Name	Amount Assessed					Amount Recovered				
	LC §1776(g)	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
Total										

E. Identify cases that are or were the subject of LC § 1742 proceedings.

Project Name	Contractor	Nature of Violation	ODL Case #	Current Status

F. Did you refer any contractor to the Labor Commissioner for debarment per LC § 1777.1?

Please check one Yes No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____

G. Did you refer any apprenticeship violation to the Division of Apprenticeship Standards (DAS)?

Please check one Yes No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____

Attached - Individual Submittal for Each Agency

LCP-AR3

7. On a separate sheet, provide a certificate of compliance with conflict of interest disclosure requirements by employees and consultants who participate in making governmental decisions (as defined under 2 CCR § 18701) along with the names of LCP personnel who are filing disclosure statements and the agencies with which those statements are being filed.

The Form 700's are being filed with the following agencies:

Community College Districts

City College of San Francisco
College of the Sequoias
Los Rios CCD
Rancho Santiago CCD
Riverside CCD
San Joaquin Delta College
Santa Rosa Jr. College

K-12

Anaheim City SD
Anaheim UHSD
Capistrano USD
Castro Valley USD
Department of General Services
Evergreen ESD
Fall River JUSD
Grant JUHSD
Huntington Beach HSD
La Honda Pescadero USD
Marin County Office of Education
Mendocino USD
Modesto City Schools
Mount Diablo USD
Sacramento City USD
San Leandro USD

San Mateo UHSD

Santa Clara County Office of Education
Santa Cruz County Office of Education
Sylvan USD
Western Placer USD

Utilities

City of Hughson
City of Roseville
Contra Costa County Department of
Conservation and Development
Contra Costa Water District
Delta Diablo Sanitation District
Department of Parks and Recreation
Department of Water Resources
Diablo Water District
Eastern Municipal Water District-Riverside
Levee District 1
Monterey County
Reclamation District 1
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Reclamation District 773
Reclamation District 800
Reclamation District 830
Sacramento Suburban Water District
San Diego Water Authority
Tuolumne Utilities District

COVER PAGE

A Public Document

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER		
Cleary	Cindy	Patricia	(916) 676-8625		
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
7777 Greenback Lane, Suite 208		Citrus Heights	CA	95829	ccleary@3QCinc.com

1. Office, Agency, or Court

Name of Office, Agency, or Court:
3QC, Inc. formerly WCS/Ca

Division, Board, District, if applicable:

Your Position:
Labor Compliance Officer

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

State

County of _____

City of _____

Multi-County _____

Other _____

3. Type of Statement (Check at least one box)

Assuming Office/Initial Date: ____/____/____

Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

The period covered is ____/____/____, through December 31, 2009.

Leaving Office Date Left: ____/____/____ (Check one)

The period covered is January 1, 2009, through the date of leaving office.

-or-

The period covered is ____/____/____, through the date of leaving office.

Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 1

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 Yes – schedule attached
Investments (10% or Greater Ownership)

Schedule B Yes – schedule attached
Real Property

Schedule C Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D Yes – schedule attached
Income – Gifts

Schedule E Yes – schedule attached
Income – Gifts – Travel Payments

-or-

No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed April 1, 2010
(month, day, year)

Signature Cindy Cleary
(File the originally signed statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER		
Desoto	Leslie	Jane	(916) 676-8625		
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
7777 Greenback Lane, Suite 208		Citrus Heights	CA	95829	ldesoto@3QCinc.com

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Date Signed April 1, 2010
(month, day, year)

Signature Leslie Desoto
(File the originally signed statement with your filing official.)

COVER PAGE

A Public Document

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER		
Ruddell	Dane	E	(916) 676-8625		
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
7777 Greenback Lane, Suite 208		Citrus Heights	CA	95829	druddell@3QCinc.com

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Your Position:
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► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

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County of _____

City of _____

Multi-County _____

Other _____

3. Type of Statement (Check at least one box)

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Income -- Gifts

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-or-

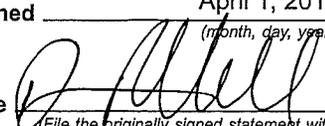
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Date Signed April 1, 2010
(month, day, year)

Signature 
(File the originally signed statement with your filing official.)

LCP-AR3

8. Please update the following information per 8 CCR § 16426(a)(2), (3) and (5) disclosure requirement.

A. Identify the geographical areas in which the program intends to operate and the identity of any public agencies not previously identified in this report with which the program intends to contract to provide labor compliance enforcement.

Northern, Central, and Southern California

B. State whether the entity shares personnel, management, ownership or other close affiliation with any of the following: (1) any contractor or subcontractor that within the preceding five years has been awarded a public works contract within the geographical area in which the program operates or intends to operate or with any public agency with which the program has contracted or intends to contract to provide labor compliance enforcement; (2) any person or entity who has been the surety on such a contract; (3) any joint labor-management committee established pursuant to the Federal Labor Management Cooperation Act of 1978 (section 175a of Title 29 of the United States Code); or (4) any person or entity who has represented workers employed in the same or similar classifications as those employed for such a contract and who has been engaged in (i) an organizational campaign under the National Labor Relations Act with contractors competing for such contracts or (ii) a jurisdictional dispute with another collective bargaining representative of workers utilized for such contracts.

For each affiliation, please provide the name, address, telephone number, and principal contact person for the person or entity; please identify shared personnel, management, and ownership; and if applicable, please provide a short description of the nature and extent of any other close affiliation:

N/A

C. Identify the attorney or law firm available to provide legal support for the LCP, and whether the persons or firms providing that support also represent any contractor, subcontractor, surety, or worker representative referred to in the preceding item.

Attorney/Law Firm Name (include address, contact person, and telephone number)

**Heritage Law Group
Mr. Matthew Durket
1101 Investment Blvd., Suite 160
El Dorado Hills, CA 95762
916.939.8600**