*LCP-AR1*

# LABOR COMPLIANCE PROGRAM ANNUAL REPORT

*Format for Awarding Body that enforces its own Labor Compliance Program for some but not all projects*

Report for the reporting period 07/01/2011 to 06/30/2012

1. Name of Labor Compliance Program (LCP) :
Keyes Community Services District

| 2. LCP I.D. Number (assigned by DIR): | 3. Date of Initial Approval: |
|---|---|
| 2011.00989 | 9/1/2011 |

4. Contact person (include name, title, address, telephone, fax, and e-mail, if available):

Gregory Wellman - District Mgr
PO Box 699
Keyes, CA 95328
Phone: 209-668-8341

5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period?

Please check one: ☐ Yes If Yes, proceed to item 6 on the next page

☑ No If No, complete the information below, sign the form and submit to DIR, Office of the Director, Attn: LCP Special Assistant, 455 Golden Gate Avenue, 10th Floor, San Francisco CA 94102

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)

**SUBMITTED BY:**

Signature: Kate Kurey

Name and Title: Kate Kurey - Compliance Consultant

Date: 8/15/12