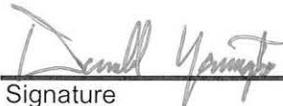


LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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

Report for the reporting period: 07/01/13 06/30/14

1. Name of Labor Compliance Program (LCP): MONTEBELLO UNIFIED SCHOOL DISTRICT		
2. LCP I.D. Number (assigned by DIR): 2011.00940		
3. Date of Initial Approval: 9/1/2011		
4. Contact Person Name: Donald Yamagata Address: 123 S. Montebello Blvd., Montebello, CA 90640 Phone: (323) 887-7900 Extension 3044 Fax: (323) 887-5887 Email: yamagata_don@Montebello.k12.ca.us		
5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period? Yes <input type="checkbox"/> If yes, proceed to item 6 on the next page No <input checked="" type="checkbox"/> 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	<i>Donald Yamagata / Director Facilities Dev.</i> Name / Title	<i>8-29-14</i> Date

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SEP 03 2014
DEPT. OF INDUSTRIAL RELATIONS
OFFICE OF THE DIRECTOR

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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

<i>Project Name</i>	<i>Amount Assessed</i>	<i>Amount Recovered</i>	<i>Explanation</i>
			CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
			CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
			CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
			CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
Total:	\$0.00	\$0.00	

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

<i>Project Name</i>	<i>Amount Assessed</i>				<i>Amount Recovered</i>					
	<i>LC § 1776</i>	<i>LC § 1775</i>	<i>LC § 1813</i>	<i>Wages</i>	<i>Total</i>	<i>LC § 1776(g)</i>	<i>LC § 1775</i>	<i>LC § 1813</i>	<i>Wages</i>	<i>Total</i>
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -

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

<i>Project Name</i>	<i>Contractors</i>	<i>Nature of Violation</i>	<i>ODL Case #</i>	<i>Current Status</i>

F. Did you refer any contractor to the Labor Commissioner for debarment per LC § 1777.1? Yes No

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 Standard (DAS)? Yes No

Please check one: Yes No

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