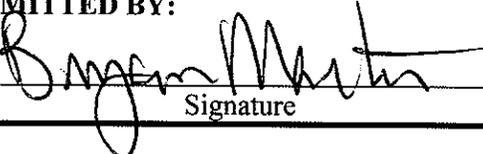


LABOR COMPLIANCE PROGRAM ANNUAL REPORT (INTERIM)

Format for Approved Program that contracts with Awarding Bodies to provide labor compliance enforcement

Report for the reporting period 7/1/2010 to 6/30/2011  
(mm/dd/yyyy) (mm/dd/yyyy)

1. Name of Labor Compliance Program (LCP) : CLOVIS UNIFIED SCHOOL DISTRICT		
2. LCP I.D. Number (assigned by DIR): 2003.00368	3. Date of Initial Approval: January 27, 2004	
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Bryan G. Martin, Labor Compliance Officer 5260 North Palm Avenue, Suite 300 Fresno, California 93704 (559) 225-6700 / (559) 225-3416 fax; bmartin@aalrr.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 <sup>th</sup> Floor, San Francisco, CA 94102. CLOVIS UNIFIED SCHOOL 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):		
SUBMITTED BY:		
 Signature	<u>BRYAN G. MARTIN, L.C.O.</u> Name and Title	<u>8-31-2011</u> 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: CLOVIS USD

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

Project Name	Bid Advertisement Date	Prime Contractor	Contract Amount
New Elementary School - Dakota & Armstrong	02/12/2010	Harris Construction	\$15,049,316.00
<b>Total</b>			<b>\$15,049,316.00</b>

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?	Description of Violation
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Total</b>					

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			

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: \_\_\_\_\_

