

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

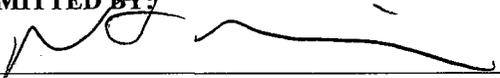
Format for Awarding Body that enforces its own Labor Compliance Program for some but not all projects

Report for the reporting period 07/01/2012 to 06/30/2013
(mm/dd/yyyy) (mm/dd/yyyy)

1. Name of Labor Compliance Program (LCP) : Elk Grove Unified School District	
2. LCP I.D. Number (assigned by DIR): 2003.00236	3. Date of Initial Approval: 06/09/2003
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Mr. Robert Pierce 9510 Elk Grove-Florin Road Elk Grove, CA 95624 Ph# 916-686-7711	
5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period? Please check one: <input type="checkbox"/> Yes If Yes, proceed to item 6 on the next page <input checked="" type="checkbox"/> 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) N/A	

LCP-AR1

SUBMITTED BY:



Signature

Robert Pierce, Associate Superintendent August 19, 2013

Name and Title

Date