

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

Suggested format for approved program that contracts with Awarding Bodies to provide labor compliance enforcement.

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 Received	Explanation
NONE			
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:

Project Name	Amount Assessed				Amount Recovered					
	LC § 1776	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
NONE	\$ -		\$ -		\$ -	\$ -		\$ -		
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -

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

Project Name	Contractors	Nature of Violation	ODL Case #	Current Status
NONE				

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 Standard (DAS)?

Please check one: Yes No

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

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	LC § 1776	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
NONE					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -

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Project Name	Contractors	Nature of Violation	ODL Case #	Current Status
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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:

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Project Name	Amount Assessed	Amount Received	Explanation
HOPE ELEMENTARY SCHOOL ADDITIONS	\$151.81	\$151.81	CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
Total:	\$151.81	\$151.81	

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	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
NONE					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -

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

Project Name	Contractors	Nature of Violation	ODL Case #	Current Status
NONE				

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 Standard (DAS)?

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NONE			
Total:	\$0.00	\$0.00	

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Project Name	Amount Assessed					Amount Recovered				
	LC § 1776	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
NONE					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -

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

Project Name	Contractors	Nature of Violation	ODL Case #	Current Status
NONE				

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:

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Project Name	Amount Assessed	Amount Received	Explanation
ULTRA-LOW FLUSH TOILET MULTI-FAMILY DIRECT INSTALLATION PROGRAM	\$227.68	\$227.68	CONTRACTOR IMMEDIATELY AND VOLUNTARILY MADE PAYMENTS
Total:	\$227.68	\$227.68	

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	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
NONE					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -

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

Project Name	Contractors	Nature of Violation	ODL Case #	Current Status
NONE				

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:

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

Total: \$ 335.69 \$ 335.69

Project Name	Affected Contractor (Who directly employed the worker)	Amount Assessed	Amount Received	Approval of Forfeiture from Labor Commissioner?		Description of Violation
				<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(ARRA) WELLS 21 AND 22 DESALTER PROJECT WELLHEAD FACILITIES	BEST DRILLING AND PUMP INC	\$71.40	\$71.40	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	MISSED INCREASE
(ARRA) WELLS 21 AND 22 DESALTER PROJECT WELLHEAD FACILITIES	MC DE'S ROCK PUMPS INC	\$12.75	\$12.75	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	MISSED INCREASE
(ARRA) WELLS 21 & 22 REVERSE OSMOSIS TREATMENT PLANT	PASCAL & LUDWIG CONSTRUCTORS, INC	\$251.54	\$251.54	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	UNDERPAYMENT OF BASE
(ARRA) WELLS 21 & 22 DESALTER PIPELINE	NONE	0.00	0.00	<input type="checkbox"/> Yes	<input type="checkbox"/> No	N/A
WELL 115 REPLACEMENT WELL	NONE	\$ -	\$ -	<input type="checkbox"/> Yes	<input type="checkbox"/> No	N/A
				<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	
				<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	
				<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	

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Project Name	Amount Assessed	Amount Received	Explanation
(ARRA) WELLS 21 AND 22 DESALTER PROJECT WELLHEAD FACILITIES	\$84.15	\$84.15	CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS.
(ARRA) WELLS 21 & 22 REVERSE OSMOSIS TREATMENT PLANT	\$ 251.54	\$ 251.54	CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS.
Total:	\$335.69	\$335.69	

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Project Name	Amount Assessed					Amount Recovered				
	LC § 1776	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
NONE	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -

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

Project Name	Contractors	Nature of Violation	ODL Case #	Current Status
NONE				

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:

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Total:	\$0.00	\$0.00	

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Project Name	Amount Assessed	Amount Received	Explanation
ATWATER VALLEY COMMUNITY SCHOOL NEW CAMPUS	\$ 3,042.11	\$ 2,292.11	PRIME CONTRACTOR MADE PAYMENTS TO WORKERS ON BEHALF OF BANKRUPT SUBCONTRACTOR- NO PENALTIES
Total:	\$3,042.11	\$2,292.11	

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

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	LC § 1776	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
NONE					\$ -					\$ -
					\$ -					\$ -
					\$ -					\$ -
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					\$ -					\$ -

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