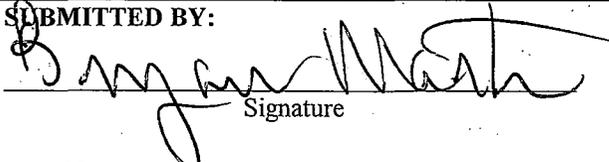


LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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

Report for the reporting period 7/1/2014 to 6/30/2015
(mm/dd/yyyy) (mm/dd/yyyy)

1. Name of Labor Compliance Program (LCP) : Atkinson, Andelson, Loya, Ruud & Romo		
2. LCP I.D. Number (assigned by DIR): 2003.00064	3. Date of Initial Approval: March 20, 2003	
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Bryan G. Martin, Esq. (559) 225-6700 5260 North Palm Avenue, Suite 300 (559) 225-3416 Facsimile Fresno, California 93704 bmartin@aalrr.com		
5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period? Please check one: <input checked="" type="checkbox"/> Yes If Yes, proceed to item 6 on the next page <input 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)		
SUBMITTED BY:  Signature	BRYAN G. MARTIN Name and Title	8-31-15 Date

LCP-ARI

6. LC § 1771.5 enforcement activities (provide all information requested, attaching as many sheets as necessary).

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

Project Name	Bid Advertisement Date	Prime Contractor	Contract Amount
Prop 84 – Water Well Project (Island Union School District)	February 1, 2014	Zim Industries - Drilling	\$292,610.00
		Dovali Construction, Inc. - Equipment	\$239,909.60
Total			\$532,519.60

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	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Total					

LCP-ARI

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: _____

ATKINSON, ANDELSON, LOYA, RUUD & ROMO

A PROFESSIONAL CORPORATION

ATTORNEYS AT LAW

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(925) 227-9200

RIVERSIDE
(951) 683-1122

SACRAMENTO
(916) 923-1200

SAN DIEGO
(858) 485-9526

OUR FILE NUMBER:

August 31, 2015

VIA E-MAIL & U.S. MAIL

Department of Industrial Relations
Office of the Director
Attn: Special Assistant to the Director
1515 Clay Street, 17th Floor
Oakland, CA 94612

**Re: Atkinson, Andelson, Loya, Ruud & Romo
Labor Compliance Program
LCP ID: 2003.00064; Initial Approval: 03/20/03**

Dear Gentleperson:

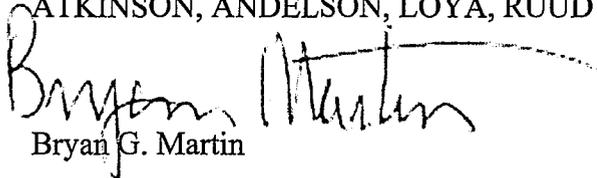
In reference to the LCP Annual Report submitted for the 07/01/14 - 06/30/15 period, this is to certify that Bryan G. Martin, the agent for the Labor Compliance Programs listed above has processed disclosure statements to the following school district under Title 2 CCR, Section 18701:

Island Union School District

Thank you for your assistance. Please let me know if you need any additional information pertaining to this report.

Sincerely,

ATKINSON, ANDELSON, LOYA, RUUD & ROMO


Bryan G. Martin

BGM/sah

Enclosure