**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 _07/01/2014_ to _06/30/2015_

**1. Name of Labor Compliance Program (LCP):**
Plumas COE/USD

**2. LCP I.D. Number (assigned by DIR):**
2011.01050

**3. Date of Initial Approval:**
9/1/2011

**4. Contact person (include name, title, address, telephone, fax, and e-mail, if available):**
Cherie Whipple, Fiscal Services Specialist
1446 East Main Street
Quincy, CA 95971
Phone: 530-283-6500 ext. 5214
Email: cwhipple@pcoe.k12.ca.us

**5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period?**

Please check one:  
- [ ] Yes If Yes, proceed to item 6 on the next page
- [x] 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
<table>
<thead>
<tr>
<th>LCP-AR1</th>
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<tr>
<td>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)</td>
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<tr>
<th>SUBMITTED BY:</th>
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<tbody>
<tr>
<td>Demy B. Oestreicher</td>
<td>Assistant Superintendent, Human Resources</td>
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<tr>
<td>Signature</td>
<td>Name and Title</td>
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