LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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

RECEIVED
JUL 22 2015
Department of Industrial Relations
Office of the Director

Report for the reporting period: 07/01/14 06/30/15

1. Name of Labor Compliance Program (LCP):
   POINT ARENA HIGH SCHOOL DISTRICT

2. LCP I.D. Number (assigned by DIR):
   2011.00852

3. Date of Initial Approval:
   September 1, 2011

4. Contact Person
   Name: Brent Cushenbery or Catherine Chin
   Address: PO Box 87 | 45 Lake Street | Point Arena CA 95468
   Phone: 707.882.2803
   Fax: 707-882-2848
   Email: bcushenbery or cchin@mcn.org

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

   Yes _____ If yes, proceed to item 6 on the next page

   No _X__ 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	Name / Title	Date
	Superintendent	7/20/2015

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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.

Total: $ -

Project Name	Bid Advertisement Date (##/##/##)	Prime Contractor	Contract Amount
N/A			

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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

Total: $ - $ -

Project Name	Affected Contractor (who directly employed the worker)	Amount Assessed	Amount Recovered	Approval of Forfeiture Requested from Labor Commissioner	Description of Violation
N/A				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	

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
N/A			CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
			CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
			CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
			CONTRACTORS IMMEDIATELY AND VOLUNTARILY MADE RESTITUTION TO THE AFFECTED WORKERS
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:

	Amount Assessed					Amount Recovered				
Project Name	LC § 1776	LC § 1775	LC § 1813	Wages	Total	LC § 1776(g)	LC § 1775	LC § 1813	Wages	Total
N/A										
					$ -					$ -
					$ -					$ -
					$ -					$ -

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

Project Name	Contractors	Nature of Violation	DOL Case #	Current Status
N/A				

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: