1. Name of Labor Compliance Program (LCP): San Elijo Joint Powers Water Authority

2. LCP I.D. Number (assigned by DIR): LCP ID: 2011.00753

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

4. Contact person (include name, title, address, telephone, fax, and e-mail, if available):

Paul F. Kinkel, CPA (Inactive) Director of Finance & Administration
San Elijo Joint Powers Authority
2695 Manchester Avenue | Cardiff by the Sea, California 92007-7077
Office (760)753-6203 x73 | Fax (760)753-5935 | kinkel@SEJPA.org | www.SEJPA.org

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

   □ 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]
Paul F. Kinkel, Director of Finance & Administration
7-13-2015
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.

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Bid Advertisement Date</th>
<th>Prime Contractor</th>
<th>Contract Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seascape Sur</td>
<td>8/7/14</td>
<td>C.E. Wilson</td>
<td>$141,736</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Affected Contractor (who directly employed the worker)</th>
<th>Amount Assessed</th>
<th>Amount Recovered</th>
<th>Approval of Forfeiture Requested from Labor Commissioner?</th>
<th>Description of Violation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seascape Sur</td>
<td>None</td>
<td>None</td>
<td></td>
<td>□ Yes ☑ No</td>
<td></td>
</tr>
</tbody>
</table>

C. For any amount identified in item B for which approval of forfeiture not requested from the Labor Commissioner, please explain below.

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Amount Assessed</th>
<th>Amount Recovered</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seascape Sur</td>
<td>-0-</td>
<td>-0-</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Amount Assessed</th>
<th>Amount Recovered</th>
<th>Amount Assessed</th>
<th>Amount Recovered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>LC § 1776(g)</td>
<td>LC § 1775</td>
<td>LC § 1813</td>
<td>Wages Total</td>
</tr>
<tr>
<td></td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td></td>
<td>LC § 1776(g)</td>
<td>LC § 1775</td>
<td>LC § 1813</td>
<td>Wages Total</td>
</tr>
<tr>
<td></td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Contractor</th>
<th>Nature of Violation</th>
<th>ODL Case #</th>
<th>Current Status</th>
</tr>
</thead>
</table>
F. Did you refer any contractor to the Labor Commissioner for debarment per LC § 1777.1? NO

Please check one: □ Yes XXX ☑ 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 XXX ☑ No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: ________________________________________
To: Department of Industrial Relations  
Office of the Director  
Attn: Special Assistant to Director

From: Paul Kinkel, Director of Finance and Administration

Organization: Department of Industrial Relations  
Date: July 15, 2015

Re: Labor Compliance Annual Report for the reporting period September 1, 2014 to July 31, 2015

Via: Mail: X

For your information: X
For your use: 
For signature: 

Approved
As requested
Returned to you for correction

Message:

Enclosed for filing, please find an original, fully executed Labor Compliance Program Annual Report for the reporting period September 1, 2014 to July 31, 2015, for the San Elijo Joint Powers Authority.

Thank you.