**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 07/1/2015 to 06/30/2016

<table>
<thead>
<tr>
<th>1. Name of Labor Compliance Program (LCP)</th>
<th>Arvin-Edison Water Storage District</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. LCP I.D. Number (assigned by DIR)</td>
<td>2015.00283</td>
</tr>
<tr>
<td>3. Date of Initial Approval:</td>
<td>July 30, 2015</td>
</tr>
</tbody>
</table>
| 4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): | Jeevan Muhar, P. E.  
P. O. Box 175  
Arvin, CA. 93203  
(661)854-5573  
(661) 854-5213  
Email: jmuhar@aewsd.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)
JEEVAN MUHAR, ASSISTANT MANAGER

07/21/16