**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 **07/01/2015** to **06/30/2016**

| 1. Name of Labor Compliance Program (LCP): | Stanislaus County Office of Education |
| 2. LCP I.D. Number (assigned by DIR): | 2011.01059 |
| 3. Date of Initial Approval: | 09/01/2011 |
| 4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): | Steve Hagemann
1100 H Street
Modesto, CA 95354
Phone: 209-238-1916 |
| Administered by: Contractor Compliance and Monitoring, Inc.
635 Mariners Island Blvd., #200
San Mateo, CA 94404
Phone: (650) 522-4403 Fax: (650) 522-4402 |
| 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*  
*Name and Title*  
*Date*