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 07/01/2017 to 06/30/2018

1. Name of Labor Compliance Program (LCP):

San Lorenzo Unified School District

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

2011.00975

3. Date of Initial Approval:

Unknown

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

Madeline Gabel
Asst. Supt. Business Services
15510 Usher St.
San Lorenzo, CA 94580-1641

mgabel@sluUSD.org
Ph: 510-317-4641
Fax: 510-317-6664

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, 1515 Clay Street, 17th Floor, Oakland CA 94612

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)

Closing Report

SUBMITTED BY:

Madeline Gabel
Asst. Supt. Business Services

Signature

Name and Title

Date