

State of California
 Department of Industrial Relations
 California Apprenticeship Council
 P. O. Box 420603
 San Francisco, CA 94142

TRAINING FUND CONTRIBUTIONS

The on-line CAC2 form available at:
<http://www.dir.ca.gov/DAS/DASCAC2.pdf>
 can be filled in and printed for submittal

California Apprenticeship Council

Please note: **no contributions** for federal projects or non apprenticeshipable occupations
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Please use a separate **form** for each jobsite, listing the occupations for the jobsite. One **check** payable to the California Apprenticeship Council, may be submitted for all jobsites and/or occupations. Training fund contributions are **not accepted** by the California Apprenticeship Council for federal public works projects, or for non-apprenticeable occupations such as utility technicians, **lead abatement workers, etc.**

NAME AND ADDRESS OF CONTRACTOR/SUBCONTRACTOR MAKING CONTRIBUTION Your company's name and address Each contractor/sub-contractor submits their own CAC 2 form and payment		CONTRACTOR'S LICENSE NUMBER Your six digit contractor's license number or federal ID# (no license classification codes)		
		CONTRACT OR PROJECT NUMBER Identify the project by contract number		
NAME AND ADDRESS OF PUBLIC AGENCY AWARDED CONTRACT The name & address of the school district, city, county or state public agency that awarded this contract. Do not put the general contractor's name here.		JOBSITE LOCATION (INCLUDE COUNTY) IF APPLICABLE GIVE NAME OF SCHOOL, HOSPITAL, BUILDING, ETC. Name & address of the jobsite		
		PERIOD COVERED BY CONTRIBUTION (FROM-TO) Dates or time period that work was performed (i.e., 01/01/06 – 01/31/06)		
CLASSIFICATIONS OF WORKERS (CARPENTER, PLUMBER, ELECTRICIAN, ETC.)	COUNTY WORK PERFORMED IN	HOURS	CONTRIBUTION RATE PER HOUR	AMOUNT
Please use the classifications as shown in the <u>drop down menu</u> or in the prevailing wage determinations	Name of County where work was performed.	# of hours/craft	Rate found in prevailing wage determinations at DLSR website: http://www.dir.ca.gov/DLSR/statistics_research.html#PWD	0.00 0.00 0.00 0.00 0.00 0.00 0.00
Please do NOT list social security numbers or the names of your employees, do not submit a report for ZERO hours or a contribution in loose change (it happens!)				
Specific project information is necessary to properly credit you for your contribution. "Various" is not an acceptable project description.				
			Total	\$0.00
SIGNATURE PLEASE TYPE OR PRINT YOUR NAME			DATE	
TITLE			AREA CODE & TELEPHONE NUMBER	