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



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, teamsters, etc.

California Apprenticeship Council

NAME AND ADDRESS OF CONTRACTOR/SUB CONTRACTOR MAKING CONTI	CONTRACTOR'S LICENSE NUMBER
	CONTRACT OF PROFEST WHITE
	CONTRACT OR PROJECT NUMBER
	JOBSITE LOCATION (INCLUDE COUNTY) IF APPLICABLE – GIVE NAME OF SCHOOL, HOSPITAL, BUILDING, etc.
NAME AND ADDRESS OF PUBLIC AGENCY AWARDING CONTRACT	
	PERIOD COVERED BY CONTRIBUTION (FROM – TO)
CLASSIFICATIONS OF WORKERS (CARPENTER, PLUMBER, ELECTRICIAN, ETC.)	VORK PERFORMED IN HOURS CONTRIBUTION AMOUNT RATE PER HOUR
_	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	TOTAL 0.00
SIGNATURE PLEASE TYPE OR PRINT YOUR NAME	DATE
TITLE	AREA CODE AND TELEPHONE NUMBER
CAC 2 (rev. 6/03)	NING FUND CONTRIBUTIONS