

UNITED STATES BANKRUPTCY COURT

PROOF OF CLAIM

Name of Debtor: OPUS WEST CORPORATIONCase Number: 09-34356-hdh-11

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property): American LABOR POOL, INC.**FILED**

Name and address where notices should be sent:

207 N. DITMAR
Oceanside, CA 92054Telephone number: 858-518-1937

JUL 03 2011

TAWANA C. MARSHALL, CLERK
U.S. BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS

Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____
(If known)

Filed on: _____

Name and address where payment should be sent (if different from above):

207 N. DITMAR
Oceanside, CA 92054Telephone number: 858-518-1937

Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Check this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 6,991.88

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

2. Basis for Claim: services performed
(See instruction #2 on reverse side.)3. Last four digits of any number by which creditor identifies debtor: 450A3a. Debtor may have scheduled account as: _____
(See instruction #3a on reverse side.)

4. Secured Claim (See instruction #4 on reverse side.)

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other
Describe:

Value of Property: \$ _____ Annual Interest Rate _____ %

Amount of arrearage and other charges as of time case filed included in secured claim: JUL 15 2011

if any: \$ _____ Basis for perfection: _____

Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____

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5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

Specify the priority of the claim.

Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier – 11 U.S.C. § 507 (a)(4).

Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)().

Amount entitled to priority:

\$ _____

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

Date:

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

Michael Lee

FOR COURT USE ONLY



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INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

Items to be completed in Proof of Claim form**Court, Name of Debtor, and Case Number:**

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

4. Secured Claim:

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS**Debtor**

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is a person, corporation, or other entity owed a debt by the debtor that arose on or before the date of the bankruptcy filing. See 11 U.S.C. §101 (10)

Claim

A claim is the creditor's right to receive payment on a debt owed by the debtor that arose on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

Proof of Claim

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

Secured Claim Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

Unsecured Claim

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

Claim Entitled to Priority Under 11 U.S.C. §507(a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

INFORMATION**Acknowledgment of Filing of Claim**

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system (www.pacer.psc.uscourts.gov) for a small fee to view your filed proof of claim.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.



Date: 6/14/2011

Attn. Clerk of the United States Bankruptcy Court;

We here at American Labor Pool, Inc. are still out \$6,991.88 for service rendered to Opus West Corporation. We provide temporary employees to help them complete a project that they we're paid for and in turn never paid us. Attached are the following documents:

- 1) Statement of Account – With attached invoices and corresponding tickets.
- 2) Copy of Signed Contract to perform work
- 3) W-9 on our company which Opus West had on file in order to pay us.
- 4) Proof of Insurance on Employees per there contract

If there is anything else needed please don't hesitate to contact me directly. We look forward to getting this matter resolved and appreciate your time and help.

Sincerely,

Mark Carbone

Vice President

American Labor Pool, Inc.

8898 Clairemont Mesa Blvd., Ste. A

San Diego, CA 92123

11

American Labor Pool
8898 Clairemont Mesa Blvd. #A
San Diego, CA 92123
(858) 569-7977 Fax: (858) 569-7082

STATEMENT

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

Printed: 3/7/2009

Terms: On Receipt

Invoice	Inv Date		Invoice Balance Due	Running Total
1956 ✓	1/30/2009	-----	\$678.00	\$678.00
19573 ✓	2/6/2009	-----	\$703.43	\$1,381.43
19586 ✓	2/13/2009	-----	\$678.00	\$2,059.43
19601 ✓	2/20/2009	-----	\$322.05	\$2,381.48
19616 ✓	2/27/2009	-----	\$1,084.80	\$3,466.28
19631 ✓	3/6/2009	-----	\$678.00	\$4,144.28
19639 ✓	3/13/2009	-----	\$678.00	\$4,822.28
19655 ✓	3/20/2009	-----	\$542.40	\$5,364.68
19668 ✓	3/27/2009	-----	\$813.60	\$6,178.28
19679 ✓	4/6/2009	-----	\$813.60	\$6,991.88

Totals for: OPU50A

\$ 0.00

\$ 0.00

\$ 0.00

\$ 6,991.88

\$6,991.88

0 - 29

30 - 59

60 - 89

90+

Total Now Due

INVOICE



8898 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

INVOICE NUMBER

19561

INVOICE DATE

1/30/2009

TO:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

PO #: JOB # 10262

Customer #:

OPU50A

Ref #: 3,182

Page #: 1

WORK ORDER NUMBER	WORK ORDER DATE	HOURS	RATE	WORK PERFORMED BY	\$ AMOUNT
018284	1/26/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018285	1/27/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018286	1/28/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018287	1/29/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018288	1/30/2009	8.000	Reg 16.95	Molina, Ramon	135.60

Please Return Payment Stub with Remittance

Customer Name Opus West Construction.

Customer No. OPU50A

Invoice # 19561

TOTAL DUE \$ 678.00

018285

[illegible]

Wang, X. J., Liu, Y. Q., & Wang, J. (2010). The effect of the 2008 Sichuan earthquake on the mental health of the general public in China. *Journal of Affective Disorders*, 121, 105-112.

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ATP

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833 A Street • Hayward CA 94541 • (510) 721-4717
6511 Claymont Blvd. • Sacramento CA 95819 • (916) 455-9919
500 Croft Way • Suite E • Rosemead CA 95068 • (916) 785-4767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
1/28/2009	7AM					
COMPANY Opus West Construction.						
JOB SITE Horizon Tech Center 10301 Meanley Dr						
REPORT TO Perry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HES WORKED (TO XHR)
Molina, Ramon						X
MINIMUM BILLING 4 HOURS (PER PERSON)				TOTAL HOURS TO BE BILLED TO CLIENT		
CUSTOMER AGREES THAT THE CONDITIONS SET FORTH IN THIS SERVICE AGREEMENT ARE AS REPRESENTED ON THE REVERSE SIDE HERE OF. ALL EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACTS UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
PRINT NAME & TITLE <i>Dora Johnson</i>				AUTHORIZED SIGNATURE <i>[Signature]</i>		
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				NO. OF WORKERS NEEDED TIME NEEDED		
REMARKS						

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704 W. Florida Ave., Hesperia, CA 92343 - (561) 924-3500
1725 De La Cruz Blvd., Suite 2 - Santa Cruz / San Jose, CA 95050 - (408) 948-6950
833 A Street - Hayward, CA 94541 - (510) 727-8717
6511 Pajaron Blvd., Sacramento, CA 95831 - (916) 454-6919
500 Chry/Wiley, Suite E - Rosemead, CA 96067 - (916) 726-1167

[illegible]

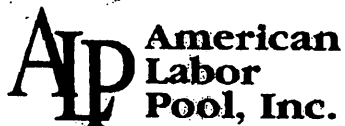
APL American Labor Pool, Inc.

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1725 De La Cruz Blvd., Suite 2 • Santa Clara / San Jose, CA 95050 • (408) 496-4950
933 A Street • Hayward, CA 94541 • (510) 727-4717
6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9618
500 City Way • Suite E • Roseville, CA 95678 • (916) 738-4767

White • Customer Copy • Yellow - Office 1st Copy • Pink - Accounting Copy • Gold - Office 2nd Copy

INVOICE



REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

98 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

INVOICE NUMBER

19573

INVOICE DATE

2/6/2009

O: Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #: OPU50A

Ref #: 3,182

Page #: 1

WORK ORDER NUMBER	WORK ORDER DATE	HOURS	RATE	WORK PERFORMED BY	\$ AMOUNT
118302	2/2/2009	8.000 Reg	16.95	Molina, Ramon	135.60
118304	2/3/2009	8.000 Reg	16.95	Molina, Ramon	135.60
118305	2/4/2009	8.000 Reg	16.95	Molina, Ramon	135.60
118305	2/4/2009	1.000 OT	25.43	Molina, Ramon	25.43
118306	2/5/2009	8.000 Reg	16.95	Molina, Ramon	135.60
118308	2/6/2009	8.000 Reg	16.95	Molina, Ramon	135.60

Please Return Payment Stub with Remittance

Customer Name Opus West Construction.

Customer No. OPU50A

Invoice # 19573

TOTAL DUE \$ 703.43



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704 W. Florida Ave. - Hemet, CA 92343 - (951) 925-3500
1725 De La Cruz Blvd. - Suite 2 - Santa Clara / San Jose, CA 95050 - (408) 486-6950
933 A Street - Hayward, CA 94541 - (510) 727-4717
6511 Folsom Blvd. - Sacramento, CA 95819 - (916) 455-6919
500 City Way - Suite E - Roseville, CA 95678 - (916) 789-1767

WORK
Order SF 018305

ALP



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704 W. Florida Ave. - Hemet, CA 92343 - (951) 925-3500
1725 De La Cruz Blvd. - Suite 2 - Santa Clara / San Jose, CA 95050 - (408) 486-6950
933 A Street - Hayward, CA 94541 - (510) 727-4717
6511 Folsom Blvd. - Sacramento, CA 95819 - (916) 455-6919
500 City Way - Suite E - Roseville, CA 95678 - (916) 789-1767

WORK
Order SF 018306

ALP

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
2/4/2009	7AM					
COMPANY Opus West Construction						
JOB SITE Horizon Tech Center 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO X HRS)
Molina, Ramon						9
MINIMUM BILLING 4 HOURS (PER PERSON)						
TOTAL HOURS TO BE BILLED TO CLIENT						9
CUSTOMER'S TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVIOUS OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
PRINT NAME & TITLE Terry/Rick AUTHORIZED SIGNATURE Terry/Rick						
DO YOU NEED WORKERS TOMORROW? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO NO. OF WORKERS NEEDED TIME NEEDED						
REMARKS						

White - Customer Copy • Yellow - Office 1st Copy • Pink - Accounting Copy • Gold - Office 2nd Copy

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
2/5/2009	7AM					
COMPANY Opus West Construction						
JOB SITE Horizon Tech Center 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO X HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						
TOTAL HOURS TO BE BILLED TO CLIENT						8
CUSTOMER'S TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVIOUS OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
PRINT NAME & TITLE Terry/Rick AUTHORIZED SIGNATURE Terry/Rick						
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO NO. OF WORKERS NEEDED TIME NEEDED						
REMARKS						

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Work Order SF 018308

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1725 De La Cruz Blvd. • Suite 2 • Santa Clara / San Jose, CA 95050 • (408) 498-0930
833 A Street • Hayward, CA 94541 • (510) 777-4717
8511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9018
5000 G Street • Suite E • Roseville, CA 95678 • (916) 789-1787

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DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
2/6/2009	7AM					
COMPANY: West Construction						
JOB SITE: Mission Tech Center 10301 Meantley Dr						
REPORT TO: (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TG-4-HRS)
Molina, Ramon						2
MINIMUM BILLING 4 HOURS PER PERSON						
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF.						
ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PRETEXTING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT						
DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
DO YOU NEED WORKERS TOMORROW? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO						
REMARKS						

INVOICE



REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

3898 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

INVOICE NUMBER

19586

INVOICE DATE

2/13/2009

TO:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #:

OPU50A

Ref #: 3,182

Page #: 1

ORK ORDER NUMBER	WORK ORDER DATE	HOURS		RATE	WORK PERFORMED BY	\$
						AMOUNT
018340	2/9/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018349	2/10/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018350	2/11/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018351	2/12/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018352	2/13/2009	8.000	Reg	16.95	Molina, Ramon	135.60

Please Return Payment Stub with Remittance

Customer Name

Opus West Construction.

Customer No.

OPU50A

Invoice #

19586

TOTAL DUE \$

678.00

Work
Order SF 018340



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704 W. Florida Ave. • Hernet, CA 92543 • (951) 929-3500
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500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE 2/9/2009	TIME 7AM	NO. OF WORKERS	JOB DESCRIPTION			
COMPANY Opus West Construction		10301 Meanley Dr				
JOBSITE Horizon Tech Center		10301 Meanley Dr				
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME Molina, Ramon	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
						8
MINIMUM BILLING 4 HOURS (PER PERSON)						TOTAL HOURS TO BE BILLED TO CLIENT 8
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT. UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
PRINT NAME & TITLE Ramon Molina						AUTHORIZED SIGNATURE <i>Ramon Molina</i>
DO YOU NEED WORKERS TOMORROW?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		NO. OF WORKERS NEEDED		TIME NEEDED
REMARKS						

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Work
Order SF 018349



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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9819
500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE 2/10/2009	TIME 7AM	NO. OF WORKERS	JOB DESCRIPTION			
COMPANY Opus West Construction		01741.00				
JOBSITE Horizon Tech Center		10301 Meanley Dr				
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME Molina, Ramon	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
						8
MINIMUM BILLING 4 HOURS (PER PERSON)						TOTAL HOURS TO BE BILLED TO CLIENT 8
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT. UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
PRINT NAME & TITLE Ramon Molina						AUTHORIZED SIGNATURE <i>Ramon Molina</i>
DO YOU NEED WORKERS TOMORROW?		YES <input type="checkbox"/> NO <input type="checkbox"/>		NO. OF WORKERS NEEDED		TIME NEEDED
REMARKS						

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9511 Folsom Blvd. • Sacramento, CA 95819 • (916) 433-9919
500 Kirby Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
2/13/2008	7AM					
COMPANY Orion Tech Center 10301 Meanley Dr OBSITE Orion Tech Center						
REPORT TO Jerry/Rick (949) 676-1034						
EMPLOYEE NAME	REL'D	HRS	BOOTS	GLOVES	GLASSES	HRS WORKED (TD 24HRS)
COLINE, REMON						8
MINIMUM BILLING 4 HOURS (PER PERSON) TOTAL HOURS TO BE BILLED TO CLIENT: 8						
TERMS AND CONDITIONS: 1ST PARTY IN THE A/P SERVICE AGREEMENT AND AS SUMMARIZED IN THE TERMS AND CONDITIONS ARE NOT TO BE USED FOR ANY OTHER PURPOSES. ALL A/P SERVICES ARE FOR THE A/P SERVICE AGREEMENT AND AS SUMMARIZED IN THE TERMS AND CONDITIONS ARE NOT TO BE USED FOR ANY OTHER PURPOSES.						
UNLESS PREVIOUSLY INDICATED AND APPROVED BY THE A/P SERVICE AGREEMENT AND AS SUMMARIZED IN THE TERMS AND CONDITIONS ARE NOT TO BE USED FOR ANY OTHER PURPOSES.						
CENTERS THAT THE LISTED EMPLOYER HAS NOT PREVIOUSLY VERIFIED AND SERVICES FOR THE A/P SERVICE AGREEMENT AND AS SUMMARIZED IN THE TERMS AND CONDITIONS ARE NOT TO BE USED FOR ANY OTHER PURPOSES.						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
PRINT NAME & TITLE AUTHORIZED SIGNATURE						NO. OF WORKERS NEEDED TIME NEEDED
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO						
REMARKS						

INVOICE



REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

8 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

INVOICE NUMBER

19601

INVOICE DATE

2/20/2009

TO:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #: OPU50A

Ref #: 3,182

Page #: 1

RK ORDER NUMBER	WORK ORDER DATE	HOURS	RATE	WORK PERFORMED BY	\$
					AMOUNT
118372	2/16/2009	8.000 Reg	16.95	Molina, Ramon	135.60
118373	2/17/2009	8.000 Reg	16.95	Molina, Ramon	135.60
118373	2/17/2009	2.000 OT	25.43	Molina, Ramon	50.85

Please Return Payment Stub with Remittance

Customer Name Opus West Construction.
Customer No. OPU50A

Invoice # 19601

TOTAL DUE \$ 322.05

INVOICE



REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

898 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

INVOICE NUMBER

19616

INVOICE DATE

2/27/2009

PO:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #:

OPU50A

Ref #: 3,182

Page #: 1

ORK ORDER NUMBER	WORK ORDER DATE	HOURS		RATE	WORK PERFORMED BY	\$
						AMOUNT
018374	2/18/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018375	2/19/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018376	2/20/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018398	2/23/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018399	2/24/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018400	2/25/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018401	2/26/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018402	2/27/2009	8.000	Reg	16.95	Molina, Ramon	135.60

Please Return Payment Stub with Remittance

Customer Name

Opus West Construction.

Customer No.

OPU50A

Invoice #

19616

TOTAL DUE \$

1,084.80

Work Order SF 018375

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500 Kirby Way • Suite E • Roseville, CA 95678 • (916) 788-1787

DATE	2/19/2009	TIME	7AM	NO. OF WORKERS	JOB DESCRIPTION	
Opus West Construction						
JOB SITE						
Horizon Tech Center 10301 Meanley Dr						
REPORT TO						
Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT						
DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO						
REMARKS						

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Work Order SF 018374

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500 Kirby Way • Suite E • Roseville, CA 95678 • (916) 788-1787

DATE	2/18/2009	TIME	7AM	NO. OF WORKERS	JOB DESCRIPTION	
Opus West Construction						
JOB SITE						
Horizon Tech Center 10301 Meanley Dr						
REPORT TO						
Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT						
DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO						
REMARKS						

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Work
Order SF 0183398

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500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

ALP

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
2/23/2009	7AM	1152.00				
COMPANY Opus West Construction.						
JOBSITE Horison Tech Center 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
TOTAL HOURS TO BE BILLED TO CLIENT: 8						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
Edward W. Wong, Foreman						
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO						
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Work
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ALP

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
2/23/2009	7AM	1152.00				
COMPANY Opus West Construction.						
JOBSITE Horison Tech Center 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
TOTAL HOURS TO BE BILLED TO CLIENT: 8						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
Doreen Johnson						
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO						
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DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
2/25/2009	7AM	11	1152.00			
COMPANY Opus West Construction						
JOBSITE Horizon Tech Center 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON) TOTAL HOURS TO BE BILLED TO CLIENT 8						
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT. UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO NO. OF WORKERS NEEDED TIME NEEDED						
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- 6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
- 500 Coby Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
2/24/2009	7AM	11	1152.00			
COMPANY Opus West Construction						
JOBSITE Horizon Tech Center 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON) TOTAL HOURS TO BE BILLED TO CLIENT 8						
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT. UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO NO. OF WORKERS NEEDED TIME NEEDED						
REMARKS						

Work Order SF 018402



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500 City Way • Suite E • Roseville, CA 95678 • (916) 788-4767

ALP

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION	REPORT TO	EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS.)
02/26/2009	7AM	1	West Construction.	Terry/Rick	Molina, Ramon						8
JOB SITE: Harrison Tech Center 10301 Meanley Dr											
REPORT TO: Terry/Rick (949) 678-1054											
MINIMUM BILLING 4 HOURS (PER PERSON)				TOTAL HOURS TO BE BILLED TO CLIENT				8			
<small>CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.</small>											
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES											
Newdon Webberg, Ramon <i>Newdon Webberg</i>											
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO											
REMARKS											

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Work Order SF 018401



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933 A Street • Hayward, CA 94541 • (510) 727-9717
6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

AL

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION	REPORT TO	EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS.)
2/26/2009	7AM	1	West Construction.	Terry/Rick	Molina, Ramon						8
JOB SITE: Harrison Tech Center 10301 Meanley Dr											
REPORT TO: Terry/Rick (949) 678-1054											
MINIMUM BILLING 4 HOURS (PER PERSON)				TOTAL HOURS TO BE BILLED TO CLIENT				8			
<small>CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.</small>											
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES											
Newdon Webberg, Ramon <i>Newdon Webberg</i>											
DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO											
REMARKS											

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INVOICE



REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

1898 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

INVOICE NUMBER

19631

INVOICE DATE

3/6/2009

TO:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #:

OPU50A

Ref #: 3,182

Page #: 1

WORK ORDER NUMBER	WORK ORDER DATE	HOURS		RATE	WORK PERFORMED BY	\$
						AMOUNT
018449	3/2/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018450	3/3/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018451	3/6/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018452	3/4/2009	8.000	Reg	16.95	Molina, Ramon	135.60
018453	3/5/2009	8.000	Reg	16.95	Molina, Ramon	135.60

Please Return Payment Stub with Remittance

Customer Name

Opus West Construction.

Customer No.

OPU50A

Invoice #

19631

TOTAL DUE \$

678.00

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1725 De La Cruz Blvd. • Suite 2 • Santa Clara / San Jose, CA 95050 • (408) 499-8950
933 A Street • Hayward, CA 94541 • (510) 727-0717
6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-0919
500 City Way • Suite E • Roseville, CA 95678 • (916) 789-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION							HRS. WORKED (TO 1/2 HRS)
8/3/2009	7AM			11/5200						8
COMPANY				Opus West Construction.						
JOBSITE				Morison Tech Center 10301 Meanley Dr						
REPORT TO				Terry/Rick (949) 678-1054						
EMPLOYEE NAME				BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/2 HRS)	
Molina, Ramon									8	
MINIMUM BILLING 4 HOURS (PER PERSON)				TOTAL HOURS TO BE BILLED TO CLIENT					8	
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.										
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES										
Nelson Wachs (Farmer)				Nelson Wachs (Farmer)						
DO YOU NEED WORKERS TOMORROW?				YES <input type="checkbox"/> NO <input type="checkbox"/>		NO. OF WORKERS NEEDED		TIME NEEDED		
REMARKS										

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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-0919
500 City Way • Suite E • Roseville, CA 95678 • (916) 789-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION							HRS. WORKED (TO 1/2 HRS)
				11/5200/6174/02						8
COMPANY				Opus West Construction.						
JOBSITE				Morison Tech Center 10301 Meanley Dr						
REPORT TO				Terry/Rick (949) 678-1054						
EMPLOYEE NAME				BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/2 HRS)	
Molina, Ramon									8	
MINIMUM BILLING 4 HOURS (PER PERSON)				TOTAL HOURS TO BE BILLED TO CLIENT					8	
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIED THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.										
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES										
Nelson Wachs (Farmer)				Nelson Wachs (Farmer)						
DO YOU NEED WORKERS TOMORROW?				YES <input type="checkbox"/> NO <input type="checkbox"/>		NO. OF WORKERS NEEDED		TIME NEEDED		
REMARKS										

ALL

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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
1725 De La Cruz Blvd. • Suite 2 • Santa Clara • Hayward, CA 94541 • (510) 727-8717
1725 De La Cruz Blvd. • Suite 2 • Santa Clara • Hayward, CA 94541 • (510) 727-8717

DATE	TIME	NO. WORKERS	JOB DESCRIPTION			
3/5/2009	7AM		1152.00			
COMPANY Opus West Construction.						
JOBSITE Notish Tech Center						
ADDRESS 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO X HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						TOTAL HOURS TO BE PAID TO CLIENT
CUSTOMER AGREES TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF						
ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT						
DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
PRINT NAME & TITLE <i>Newton Alberg Foreman</i>						AUTHORIZED SIGNATURE <i>[Signature]</i>
DO YOU NEED WORKERS TOMORROW?						YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
REMARKS						NO. OF WORKERS NEEDED TIME NEEDED

INVOICE



898 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

INVOICE NUMBER

19639

INVOICE DATE

3/13/2009

TO:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #: OPU50A

Ref #: 3182

Page #: 1

WORK ORDER NUMBER	WORK ORDER DATE	HOURS	RATE	WORK PERFORMED BY	\$
					AMOUNT
018477	3/9/2009	8.000 Reg	\$ 16.95	Molina, Ramon	\$135.60
018478	3/10/2009	8.000 Reg	\$ 16.95	Molina, Ramon	\$135.60
018479	3/11/2009	8.000 Reg	\$ 16.95	Molina, Ramon	\$135.60
018480	3/12/2009	8.000 Reg	\$ 16.95	Molina, Ramon	\$135.60
018481	3/13/2009	8.000 Reg	\$ 16.95	Molina, Ramon	\$135.60

Please Return Payment Stub with Remittance

Customer Name Opus West Construction.

Invoice # 19639

Customer No. OPU50A

TOTAL DUE \$ \$678.00

INVOICE



REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

198 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

INVOICE NUMBER

19655

INVOICE DATE

3/20/2009

O:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #:

OPU50A

Ref #: 3,182

Page #: 1

DRK ORDER NUMBER	WORK ORDER DATE	HOURS	RATE	WORK PERFORMED BY	\$
					AMOUNT
018497	3/16/2009	8.000 Reg	16.95	Molina, Ramon	135.60
018498	3/17/2009	8.000 Reg	16.95	Molina, Ramon	135.60
018499	3/18/2009	8.000 Reg	16.95	Molina, Ramon	135.60
018500	3/19/2009	8.000 Reg	16.95	Molina, Ramon	135.60

Please Return Payment Stub with Remittance

Customer Name

Opus West Construction.

Customer No.

OPU50A

Invoice #

19655

TOTAL DUE \$

542.40

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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 Kirby Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE		TIME	NO. OF WORKERS	JOB DESCRIPTION			
3/17/2009		TAM		Opus West Construction			
COMPANY							
Horizon Tech Center		10301 Mezanley Dr					
JOBSITE							
Terry/Rick (949) 678-1054		017411.00					
REPORT TO							
NAME	LAST NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon							8.5
MINIMUM BILLING 4 HOURS (PER PERSON)							8.5
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF.							
ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED.							
CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.							
IMPORTANT							
DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES							
<div style="display: flex; justify-content: space-between;"> <div> DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO </div> <div> NO. OF WORKERS NEEDED TIME NEEDED </div> </div>							
PRINT NAME & TITLE AUTHORIZED SIGNATURE							
Remarks: (W/obj of Form)							

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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way, Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION				
3/16/2009			1732.00				
COMPANY		Opus West Construction.					
JOBSITE		01746.00					
		Horison Tech Center					
REPORT TO		Terry/Rick (949) 878-1054					
EMPLOYEE NAME		BELTS	HATS	BOOTS	GLOVES	GLASSES	MRS. WORKED (TO OTHERS)
Molina, Ramon							8
MINIMUM BILLING 4 HOURS (PER PERSON)		TOTAL HOURS TO BE BILLED TO CLIENT					
CUSTOMER AGREES:	TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.						
IMPORTANT							
DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES							
PRINT NAME & TITLE		AUTHORIZED SIGNATURE			NO. OF WORKERS NEEDED TIME NEEDED		
Ramon Molina		[Signature]			8		
DO YOU NEED WORKERS TOMORROW?		YES <input type="checkbox"/>		NO <input checked="" type="checkbox"/>		REMARKS	

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Work
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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION	DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION
3/19/2009	7AM	4	Opus West Construction	3/18/2009	7AM	4	Opus West Construction
COMPANY				COMPANY			
Opus West Construction				Opus West Construction			
JOBSITE				JOBSITE			
Horizon Tech Center				Horizon Tech Center			
REPORT TO				REPORT TO			
Terry/Rick (949) 678-1054				Terry/Rick (949) 678-1054			
EMPLOYEE NAME				EMPLOYEE NAME			
Molina, Ramon				Molina, Ramon			
BELTS				BELTS			
HATS				HATS			
BOOTS				BOOTS			
GLASSES				GLASSES			
HRS WORKED (TO 1/2 HRS)				HRS WORKED (TO 1/2 HRS)			
8				8			
MINIMUM BILLING 4 HOURS (PER PERSON)				MINIMUM BILLING 4 HOURS (PER PERSON)			
TOTAL HOURS TO BE BILLED TO CLIENT				TOTAL HOURS TO BE BILLED TO CLIENT			
8				8			
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT. UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.				CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT. UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.			
IMPORTANT				IMPORTANT			
DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES				DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES			
PRINT NAME & TITLE				PRINT NAME & TITLE			
Nathan Wisberg (Towner)				Nathan Wisberg (Towner)			
AUTHORIZED SIGNATURE				AUTHORIZED SIGNATURE			
DO YOU NEED WORKERS TOMORROW?				DO YOU NEED WORKERS TOMORROW?			
YES <input type="checkbox"/> NO <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>			
NO. OF WORKERS NEEDED				NO. OF WORKERS NEEDED			
TIME NEEDED				TIME NEEDED			
REMARKS				REMARKS			

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Work
Order SF 018499



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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION	DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION
3/18/2009	7AM	4	Opus West Construction	3/18/2009	7AM	4	Opus West Construction
COMPANY				COMPANY			
Opus West Construction				Opus West Construction			
JOBSITE				JOBSITE			
Horizon Tech Center				Horizon Tech Center			
REPORT TO				REPORT TO			
Terry/Rick (949) 678-1054				Terry/Rick (949) 678-1054			
EMPLOYEE NAME				EMPLOYEE NAME			
Molina, Ramon				Molina, Ramon			
BELTS				BELTS			
HATS				HATS			
BOOTS				BOOTS			
GLASSES				GLASSES			
HRS WORKED (TO 1/2 HRS)				HRS WORKED (TO 1/2 HRS)			
8				8			
MINIMUM BILLING 4 HOURS (PER PERSON)				MINIMUM BILLING 4 HOURS (PER PERSON)			
TOTAL HOURS TO BE BILLED TO CLIENT				TOTAL HOURS TO BE BILLED TO CLIENT			
8				8			
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT. UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.				CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT. UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.			
IMPORTANT				IMPORTANT			
DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES				DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES			
PRINT NAME & TITLE				PRINT NAME & TITLE			
Nathan Wisberg (Towner)				Nathan Wisberg (Towner)			
AUTHORIZED SIGNATURE				AUTHORIZED SIGNATURE			
DO YOU NEED WORKERS TOMORROW?				DO YOU NEED WORKERS TOMORROW?			
YES <input type="checkbox"/> NO <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>			
NO. OF WORKERS NEEDED				NO. OF WORKERS NEEDED			
TIME NEEDED				TIME NEEDED			
REMARKS				REMARKS			

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INVOICE



REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

998 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

INVOICE NUMBER

19668

INVOICE DATE

3/27/2009

TO:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #:

OPU50A

Ref #: 3,182

Page #: 1

WORK ORDER NUMBER	WORK ORDER DATE	HOURS	RATE	WORK PERFORMED BY	\$ AMOUNT
018501	3/20/2009	8.000 Reg	16.95	Molina, Ramon	135.60
018519	3/23/2009	8.000 Reg	16.95	Molina, Ramon	135.60
018520	3/24/2009	8.000 Reg	16.95	Molina, Ramon	135.60
018521	3/25/2009	8.000 Reg	16.95	Molina, Ramon	135.60
018522	3/26/2009	8.000 Reg	16.95	Molina, Ramon	135.60
018523	3/27/2009	8.000 Reg	16.95	Molina, Ramon	135.60

Please Return Payment Stub with Remittance

Customer Name

Opus West Construction.

Customer No.

OPU50A

Invoice #

19668

TOTAL DUE \$

813.60

Work Order SF 018521

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933 A Street • Hayward, CA 94541 • (510) 727-4717
6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION
3/25/2009	7AM		
1152.00			
01742.00			
COMPANY	Opus West Construction.		
JOB SITE	Horizon Tech Center 10301 Mezanley Dr		
REPORT TO	Terry/Rick (949) 678-1054		
EMPLOYEE NAME	BELTS	HATS	BOOTS
Molina, Ramon			
8			
MINIMUM BILLING 4 HOURS (PER PERSON)			
TOTAL HOURS TO BE BILLED TO CLIENT: 8			
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.			
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES			
Nelson Whiting Foran AUTHORIZED SIGNATURE			
PRINT NAME & TITLE			
DO YOU NEED WORKERS TOMORROW? YES <input type="checkbox"/> NO <input type="checkbox"/>			
NO. OF WORKERS NEEDED TIME NEEDED			
REMARKS			

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Work Order SF 018520

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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION
3/24/2009	7AM		
1152.00			
01742.00			
COMPANY	Opus West Construction.		
JOB SITE	Horizon Tech Center 10301 Mezanley Dr		
REPORT TO	Terry/Rick (949) 678-1054		
EMPLOYEE NAME	BELTS	HATS	BOOTS
Molina, Ramon			
8			
MINIMUM BILLING 4 HOURS (PER PERSON)			
TOTAL HOURS TO BE BILLED TO CLIENT: 8			
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF. ALP EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVAILING OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.			
IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES			
Nelson Whiting Foran AUTHORIZED SIGNATURE			
PRINT NAME & TITLE			
DO YOU NEED WORKERS TOMORROW? YES <input type="checkbox"/> NO <input type="checkbox"/>			
NO. OF WORKERS NEEDED TIME NEEDED			
REMARKS			

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Work Order SF 018523

AP American Labor Pool, Inc.

BBB MEMBER
Better Business Bureau
www.americanlaborpool.com

ALP

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1725 De La Cruz Blvd. • Suite 2 • Santa Clara / San Jose, CA 95050 • (408) 496-0950
933 A Street • Hayward, CA 94541 • (510) 727-0717
6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-0919
500 City Way • Suite E • Roseville, CA 95678 • (916) 789-1767

DATE	3/27/2009	TIME	7AM	NO. OF WORKERS	JOB DESCRIPTION	
1152.00						
COMPANY	Opus West Construction.					
JOBSITE	Horison Tech Center 10301 Meanley Dr					
REPORT TO	Terry/Rick (949) 678-1054					
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						TOTAL HOURS TO BE BILLED TO CLIENT
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF.						8
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IMPORTANT DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES						
Newton V. Valenzuela PRINT NAME & TITLE						
DO YOU NEED WORKERS TOMORROW? YES <input type="checkbox"/> NO <input type="checkbox"/>						
REMARKS						

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Work Order SF 018522

AI

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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-0919
500 City Way • Suite E • Roseville, CA 95678 • (916) 789-1767

DATE	3/26/2009	TIME	7AM	NO. OF WORKERS	JOB DESCRIPTION	
1152.00						
COMPANY	Opus West Construction.					
JOBSITE	Horison Tech Center 10301 Meanley Dr					
REPORT TO	Terry/Rick (949) 678-1054					
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/4 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						TOTAL HOURS TO BE BILLED TO CLIENT
CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE ALP SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF.						8
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Newton V. Valenzuela PRINT NAME & TITLE						
DO YOU NEED WORKERS TOMORROW? YES <input type="checkbox"/> NO <input type="checkbox"/>						
REMARKS						

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INVOICE



REMIT
TO:

American Labor Pool
8898 Clairemont Mesa Blvd #A
San Diego, CA 92123

8898 Clairemont Mesa Blvd. Suite A San Diego, CA 92123
San Diego/Corporate (858) 569-7977

INVOICE NUMBER

19679

INVOICE DATE

4/6/2009

TO:

Opus West Construction.
2050 Main St. #800
Irvine, CA 92614

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE
31st, 18% INTEREST PER ANNUM (1.5 per month)
THEREAFTER. THIS INVOICE REPRESENTS WAGES AND
TAXES ALREADY PAID AND IS DUE AND PAYABLE WITHIN
SEVEN (7) DAYS OF ABOVE DATE.

PO #: JOB # 10262

Customer #:

OPU50A

Ref #: 3,182

Page #: 1

WORK ORDER NUMBER	WORK ORDER DATE	HOURS	RATE	WORK PERFORMED BY	\$
					AMOUNT
018546	3/30/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018547	3/31/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018553	4/1/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018554	4/2/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018555	4/6/2009	8.000	Reg 16.95	Molina, Ramon	135.60
018555	4/3/2009	8.000	Reg 16.95	Molina, Ramon	135.60

Please Return Payment Stub with Remittance

Customer Name

Opus West Construction.

Customer No.

OPU50A

Invoice #

19679

TOTAL DUE \$

813.60

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1725 De La Cruz Blvd. • Suite 2 • Santa Clara / San Jose, CA 95050 • (408) 496-9950
833 A Street • Hayward, CA 94541 • (510) 727-9717
6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 789-1767

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1725 De La Cruz Blvd. • Suite 2 • Santa Clara / San Jose, CA 95050 • (408) 496-9950
833 A Street • Hayward, CA 94541 • (510) 727-9717
6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 789-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
4/1/2009	7AM		1152.00			
COMPANY Opus West Construction						
JOB SITE Horizon Tech Center 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/2 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						
TOTAL HOURS TO BE BILLED TO CLIENT						8
<p><small>CUSTOMER AGREES TO THE TERMS AND CONDITIONS SET FORTH IN THE A.P. SERVICE AGREEMENT AND AS SUMMARIZED ON THE REVERSE SIDE HERE OF.</small></p> <p><small>A.P. EMPLOYEES ARE NOT PERFORMING WORK UNDER PREVIOUS OR OTHER SPECIAL RATE CONTRACT, UNLESS PREVIOUSLY INDICATED AND CERTIFIES THAT THE LISTED EMPLOYEES HAVE SATISFACTORILY PERFORMED SERVICES FOR THE HOURS SHOWN ABOVE.</small></p>						
<p>IMPORTANT</p> <p>DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES</p>						
<p>PRINT NAME & TITLE Ramon Molina</p> <p>AUTHORIZED SIGNATURE <i>Ramon Molina</i></p>						
<p>DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>NO. OF WORKERS NEEDED TIME NEEDED</p>						
REMARKS						

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION			
4/2/2009	7AM		1152.00			
COMPANY Opus West Construction						
JOB SITE Horizon Tech Center 10301 Meanley Dr						
REPORT TO Terry/Rick (949) 678-1054						
EMPLOYEE NAME	BELTS	HATS	BOOTS	GLOVES	GLASSES	HRS. WORKED (TO 1/2 HRS)
Molina, Ramon						8
MINIMUM BILLING 4 HOURS (PER PERSON)						
TOTAL HOURS TO BE BILLED TO CLIENT						8
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<p>IMPORTANT</p> <p>DON'T GIVE WORKERS ANY MONEY! ONLY GIVE WORKERS SIGNED YELLOW & PINK COPIES</p>						
<p>PRINT NAME & TITLE Ramon Molina</p> <p>AUTHORIZED SIGNATURE <i>Ramon Molina</i></p>						
<p>DO YOU NEED WORKERS TOMORROW? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>NO. OF WORKERS NEEDED TIME NEEDED</p>						
REMARKS						

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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION
3/30/2009	7AM	1	1152.00
COMPANY Opus West Construction.			
JOB SITE Horizon Tech Center 10301 Meanley Dr			
REPORT TO Terry/Rick (949) 678-1054			
EMPLOYEE NAME	BELTS	HATS	BOOTS
McLina, Ramon			
MINIMUM BILLING 4 HOURS (PER PERSON)			
TOTAL HOURS TO BE BILLED TO CLIENT			
8			

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DO YOU NEED WORKERS TOMORROW? ☐ YES ☐ NO NO. OF WORKERS NEEDED TIME NEEDED

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6511 Folsom Blvd. • Sacramento, CA 95819 • (916) 455-9919
500 City Way • Suite E • Roseville, CA 95678 • (916) 788-1767

DATE	TIME	NO. OF WORKERS	JOB DESCRIPTION
3/31/2009	7AM	1	1152.00
COMPANY Opus West Construction.			
JOB SITE Horizon Tech Center 10301 Meanley Dr			
REPORT TO Terry/Rick (949) 678-1054			
EMPLOYEE NAME	BELTS	HATS	BOOTS
McLina, Ramon			
MINIMUM BILLING 4 HOURS (PER PERSON)			
TOTAL HOURS TO BE BILLED TO CLIENT			
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REMARKS

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2

October 14, 2008
American Labor Pool, Inc.
8898 Clairemont Mesa Blvd., Ste. A
San Diego, CA 92123

**NOTE: 1 COPY OF THIS LETTER MUST BE
INITIALED & RETURNED TO THIS OFFICE
WITH YOUR CONTRACT**

Initial

JOB / REFERENCE NO. 11152.00

REVIEW EACH ITEM ATTACHED (do not alter originals):

Project: Lockheed Martin TI
Address: 10301, 10325, 10343 Meanley Drive
San Diego, CA 92131

CONTRACT DOCUMENTS:

Sign and return all copies to this office. We will return one completely executed copy to you for your records.

W-9 FORM:

Fill out and return to this office.

APPLICATION FOR PAYMENT:

Use this form as your master Application for Payment form. Reproduce the master for invoicing that will take place during the length of this project.

PROJECT SCHEDULE:

In accordance with the Project Schedule attached and two week detailed schedules created throughout the course of the project.

IIPP/MSDS INFORMATION:

Provide an Injury and Illness Prevention Plan and Material Safety Data Sheets for materials to be utilized on the project, both in accordance with paragraph 18 of the Subcontract Agreement.

MEMO/WAIVERS/SAMPLE:

Use these forms as your master waivers. Reproduce the masters for invoicing that will take place during the length of this project. See 'sample' insurance certificate for correct Additional Insured format and verbiage.

A. THE FOLLOWING ITEMS MUST BE IN OUR OFFICE PRIOR TO RELEASE OF REQUESTED PAYMENT:

NOTE: No payment will be processed until these required documents are on file

1. Original signature fully executed Contract Document.
2. Completed W-9 Form.
3. Original Application For Payment and Waiver (with invoice) submitted per Contract Documents. Application For Payment Forms MUST be received by the 25th of the month for payment by the following 30th. No fax copies will be accepted.
4. Original current insurance certificates submitted per Contract Documents.
>Be aware that any discrepancies will place a hold on your payment<

COPIES AND FAXES ARE NOT ACCEPTED IN LIEU OF ORIGINAL INVOICES

- B. CHANGE ORDERS:** If, during the period of construction, a Change Order is required, submit your change order request to the Project Manager. If your request is valid, an OPUS West Construction Corporation Change Order will be issued. That is the ONLY time payment will be made for increased contract costs. An original signature OPUS West Construction Corporation Change Order MUST be on file prior to release of Change Order funds. If you have submitted a Change Order Request and have not received a Change Order for signature please contact our office. Do not show any unapproved change orders on Pay Request as it will delay your total project payment till the next pay period.
- C. RETENTION:** When requesting release of Retention, you must submit an original Application For Payment and/or invoice requesting the Retention amount specifically.



OPUS

Lockheed Martin T1 / 11152.00
0174100 / Temporary Labor
American Labor Pool, Inc. / Doug Boone
Contact Phone #
Contact Fax #
Payment Terms: Standard

SUBCONTRACT AGREEMENT (Labor and Materials)

This Subcontract Agreement ("Subcontract") is made as of this 14th day of October, 2008, by and between **OPUS West Construction Corporation** ("Contractor"), with its office located at 2050 Main St., Suite 800, Irvine, CA 92614, and **American Labor Pool, Inc.** ("Subcontractor") with its office located at 8898 Clairemont Mesa Blvd., Ste. A, San Diego, CA 92123.

Contractor and Subcontractor agree as follows:

- Subcontract Documents.** The term "Subcontract Documents" is defined in Paragraph 1 of the attached Rider "A".
- Project.** Contractor is providing design and construction-related services to Owner (defined below) in connection with the project generally described as Lockheed Martin T1 ("Project"), located at 10301, 10325, 10343 Meanley Drive, San Diego, CA 92131 ("Project Site"), and consisting of the total work provided by Contractor under contract documents between Owner and Contractor.
- Owner.** The Owner of the Project is Sequoia Realty Limited Partnership ("Owner").
- Architect/Engineer.** The architect and engineers ("Architect/Engineer") of record for the Project are:
Architect of Record: Smith Consulting Architects
Civil Engineer: PBS&J
Structural Engineer of Record: Opus Architects & Engineers, Inc.
- Scope of Work.** Subcontractor's scope of work for the Project is described in the attached Rider "A" and is defined therein as the Work.
- Schedule.** Time is of the essence. Accordingly, all time limits and requirements for completion set forth in the Subcontract Documents, including any intermediate milestones (collectively referred to in the Subcontract Documents as the "Schedule"), are of the essence of this Subcontract. Subcontractor shall begin its Work as soon as the Project is ready for the Work or within three (3) calendar days after being notified orally or in writing to proceed by Contractor. The Substantial Completion of the Work (defined in the General Conditions of Subcontract) shall be achieved as required by job progress, so as to allow the entire Project to be substantially completed on or before . Subcontractor shall conform to all progress and schedule requirements of the Subcontract Documents and as directed by Contractor's project manager, and must achieve the milestones (if any) as described in the attached Rider "A".
- Subcontract Sum.** Contractor shall pay Subcontractor the sum of \$ 10,000.00 ("Subcontract Sum"). The Subcontract Sum includes freight and delivery charges and all applicable state and local taxes including sales and use tax, and if required by law, these taxes must be separately stated on any payment applications, invoices or similar documents delivered by Subcontractor to Contractor for completion of the Work in accordance with the terms and conditions of the Subcontract Documents. A breakdown of the components of the Subcontract Sum is set forth in the attached Rider "A".
- Riders.** The following Riders are attached to and made a part of this Subcontract:
 - Rider A (Scope of Work)
 - Rider B (Indemnification)
 - Rider C (Insurance)

Contractor and Subcontractor sign as follows:

Approved by Contractor's project manager _____

Andrew Ranallo

CONTRACTOR

OPUS West Construction Corporation

By: _____

Jeffery Dickerson

(Print Name)

Vice President of Construction

(Title)

(Date)

SUBCONTRACTOR

American Labor Pool, Inc.

By: _____

JAMES DOUGLAS BOONE

(Print Name)

PRESIDENT / CEO

(Title)

10-24-2008

(Date)

CL

RIDER A

This Rider A is attached to and made a part of the Subcontract between OPUS West Construction Corporation and American Labor Pool, Inc. dated 10/14/2008. All capitalized terms used, but not defined in this Rider "A" have the meaning ascribed to them in the Subcontract.

1. Work/Subcontract Documents.

Subcontractor shall furnish all necessary labor, materials, equipment, skills, services (including design and engineering, if applicable), supervision and appurtenances necessary to complete all Section Temporary Labor work ("Work") for the Project, including but not limited to, strict compliance with the following documents (the "Subcontract Documents"):

Drawings and Specifications

Description	Number	Last Revision
Toilet Partitions Specification	10150	10/29/2007
Toilet Accessories Specification	10160	10/29/2007
Postal Specialties Specification	10550	10/29/2007
Window Blind Specification	12200	10/29/2007
Hydraulic Elevator Specification	14200	05/07/2007
General Mechanical Requirements Specification	15010	05/09/2007
Fire Protection Specification	15300	05/09/2007
Plumbing Specification	15400	05/09/2007
Heating, Ventilating, and Air Conditioning Specification	15500	05/09/2007
Energy Management System Specification	15800	05/09/2007
Electrical Specification	16000	05/09/2007
Demolition Specification	2050	07/05/2007
Earthwork Specification	2200	07/05/2007
Asphaltic Paving Specification	2510	07/05/2007
Site Concrete Specification	2520	07/05/2007
Site Utilities Specification	2600	07/05/2007
Landscape and Irrigation Specification	2900	08/16/2007
Cast in Place Concrete Specification	3002	08/16/2007
Reinforcing Steel Specification	3202	08/16/2007
Structural Metal Framing, Joists, and Deck Specification	5100	07/27/2007
Metal Fabrications Specification	5500	07/27/2007
Finish Carpentry	6200	10/29/2007
Built-Up Roofing Specification	7510	09/19/2007
Sheet Metal Flashing and Trim Specification	7620	09/06/2007
Caulking and Sealants Specification	7910	08/16/2007
Wood Door Specification	8200	09/13/2007
Aluminum Framing & Glazing Systems Specification	8400	09/06/2007
Door Hardware Specification	8700	09/06/2007
Glazed Aluminum Curtainwalls Specification	8900	09/13/2007
Gypsum Board Assemblies Specification	9250	10/29/2007
Ceramic Tile Specification	9300	10/29/2007

Opus Group Subcontract (Labor and Materials)

June 2005 Edition

22

Acoustical Ceilings Specification	9510	10/29/2007
Resilient Flooring & Base Specification	9650	10/29/2007
Carpet Specification	9680	10/29/2007
Painting Specification	9900	10/29/2007
Wallcovering Specification	9950	10/29/2007
Smith Consulting Architects: Lockheed Martin- Building A, B, C Tenant Improvements Specifications	SCA Project No. 08123.T	09/10/2008
Title Sheet	A TS1	07/15/2008
General Notes	A TS2	07/15/2008
Site Plan	A AS.1	07/15/2008
First Floor Exiting Plan	A EX.1	07/15/2008
Second Floor Exiting Plan	A EX.2	07/15/2008
First Floor Plan	A A1	07/15/2008
Second Floor Plan	A A2	07/15/2008
First Floor Reflected Ceiling Plan	A A2.1	07/15/2008
Second Floor Reflected Ceiling Plan	A A2.2	07/15/2008
Door Schedule/Details	A A3.1	07/15/2008
Details	A AD1	07/15/2008
Schedules	M-1A	07/15/2008
First Floor Plan	M-2A	07/15/2008
Second Floor Plan	M-3A	07/15/2008
First Floor Piping Plan	M-4A	07/15/2008
Second Floor Piping Plan	M-5A	07/15/2008
Title 24 Calcs	M-6A	07/15/2008
Schedules, Notes, Details	PA-01	07/15/2008
First Floor Plan	PA-1.0	07/15/2008
Second Floor Plan	PA-1.1	07/15/2008
Note Sheet	E1.1A	07/15/2008
Luminaire Schedule	E1.2A	07/15/2008
Title 24 Calcs	E1.3A	07/15/2008
First Floor Lighting Plan	E2.1A	07/15/2008
Second Floor Lighting Plan	E2.2A	07/15/2008
Horizon Tech Center	A_A6.2	02/20/2008
First Floor Power Plan	E3.1A	07/15/2008
Second Floor Power Plan	E3.2A	07/15/2008
Roof Power Plan	E4.1A	07/15/2008
Singleline Diagram	E5.1A	07/15/2008
Panel Schedules	E6.1A	07/15/2008
Detail Sheet 1	E7.1A	07/15/2008
Detail Sheet 2	E7.2A	07/15/2008
Title Sheet	B TS1	07/15/2008

Ch

General Notes	B TS2	07/15/2008
Site Plan	B AS.1	07/15/2008
First Floor Exiting Plan	B EX.1	07/15/2008
Second Floor Exiting Plan	B EX.2	07/15/2008
First Floor Plan	B A1	07/15/2008
Second Floor Plan	B A2	07/15/2008
First Floor Reflected Ceiling Plan	B A2.1	07/15/2008
Second Floor Reflected Ceiling Plan	B A2.2	07/15/2008
Door Schedule/Details	B A3.1	07/15/2008
Details	B AD1	07/15/2008
Schedules	M-1B	07/15/2008
First Floor Plan	M-2B	07/15/2008
Second Floor Plan	M-3B	07/15/2008
Roof Plan	M-4B	07/15/2008
First Floor Piping Plan	M-5B	07/15/2008
Second Floor Piping Plan	M-6B	07/15/2008
Title 24 Calcs	M-7B	07/15/2008
Schedules, Notes, Details	PB-01	07/15/2008
First Floor Plan	PB-1.0	07/15/2008
Second Floor Plan	PB-1.1	07/15/2008
Note Sheet	E1.1B	07/15/2008
Luminaire Schedule	E1.2B	07/15/2008
Title 24 Calcs	E1.3B	07/15/2008
First Floor Lighting Plan	E2.1B	07/15/2008
Second Floor Lighting Plan	E2.2B	07/15/2008
First Floor Power Plan	E3.1B	07/15/2008
Second Floor Power Plan	E3.2B	07/15/2008
Roof Power Plan	E4.1B	07/15/2008
Singleline Diagram	E5.1B	07/15/2008
Panel Schedules	E6.1B	07/15/2008
Detail Sheet 1	E7.1B	07/15/2008
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Title Sheet	C TS1	07/15/2008
General Notes	C TS2	07/15/2008
Site Plan	C AS.1	07/15/2008
First Floor Exiting Plan	C EX.1	07/15/2008
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Schedules, Notes, Details	PC-01	07/15/2008
First Floor Plan	PC-1.0	07/15/2008
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First Floor Lighting Plan	E2.1C	07/15/2008
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First Floor Power Plan	E3.1C	07/15/2008
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Horizon Tech Center - Fire Tested Assemblies and Penetrations	A_AC.1	02/20/2008
Horizon Tech Center - Architectural Site Plan	A_A1.1	02/20/2008
Horizon Tech Center - Site Plan Details	A_A1.2	02/20/2008
Horizon Tech Center - First Level Floor Plan	A_A2.1	02/20/2008
Horizon Tech Center - Second Level Floor Plan	A_A2.2	02/20/2008
Horizon Tech Center - Roof Plan	A_A2.3	02/20/2008
Horizon Tech Center - Enlarged Floor Plans	A_A2.4	02/20/2008
Horizon Tech Center - Exterior Elevations	A_A3.1	02/20/2008
Horizon Tech Center - Wall Sections	A_A4.1	02/20/2008
Horizon Tech Center - Stair and Elevator Sections	A_A4.2	02/20/2008
Horizon Tech Center - Details	A_A5.1	02/20/2008
Horizon Tech Center - Partition Schedule and Details	A_A6.1	02/20/2008
Horizon Tech Center - Door Schedule and Hardware Groups	A_A6.2	02/20/2008
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Horizon Tech Center - Interior Details	A_A8.1	02/20/2008
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Horizon Tech Center - Tilt-Up Panel Wall Elevations	A_S5.2	02/20/2008
Horizon Tech Center - Tilt-Up Panel Wall Sections and Details	A_S5.3	02/20/2008
Horizon Tech Center - Sections and Details	A_S6	02/20/2008
Horizon Tech Center - Sections and Details	A_S7	02/20/2008
Horizon Tech Center - Sections and Details	A_S8	02/20/2008
Horizon Tech Center - Sections and Details	A_S9	02/20/2008
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Horizon Tech Center - Schedule, Notes, Legend, Details and T-24	A_M1.0a	01/02/2008
Horizon Tech Center - Site Plan and Equipment Pad Layout	A_M1.1a	01/02/2008
Horizon Tech Center - Mechanical HVAC 1st Floor Plan	A_M2.1a	01/02/2008
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Horizon Tech Center - Specifications and Calculations	A_P-1	11/15/2007
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Horizon Tech Center - Site Plan Utility	A_E2.1	11/15/2007
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Horizon Tech Center - Exterior Elevations	B_A3.1	02/20/2008
Horizon Tech Center - Wall Sections	B_A4.1	02/20/2008
Horizon Tech Center - Stair and Elevator Sections	B_A4.2	02/20/2008
Horizon Tech Center - Details	B_A5.1	02/20/2008
Horizon Tech Center - Partition Schedule and Details	B_A6.1	02/20/2008
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Horizon Tech Center - Interior Elevations	B_A7.1	02/20/2008
Horizon Tech Center - Interior Details	B_A8.1	02/20/2008
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Horizon Tech Center - Title Sheet	B_S1	02/20/2008
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Horizon Tech Center - Framing Plan Level 02	B_S3	02/20/2008
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Horizon Tech Center - Tilt-Up Panel Wall Elevations	B_S5.2	02/20/2008
Horizon Tech Center - Tilt-Up Panel Wall Sections and Details	B_S5.3	02/20/2008
Horizon Tech Center - Sections and Details	B_S6	02/20/2008
Horizon Tech Center - Sections and Details	B_S7	02/20/2008
Horizon Tech Center - Sections and Details	B_S8	02/20/2008
Horizon Tech Center	B_S9	02/20/2008
Horizon Tech Center - Sections and Details	B_S10	02/20/2008
Horizon Tech Center - Schedule, Notes, Legend, Details and T-24	B_M1.0b	01/02/2008
Horizon Tech Center - Site Plan and Equipment Pad Layout	B_M1.1b	01/02/2008
Horizon Tech Center - Mechanical HVAC 1st Floor Plan	B_M2.1b	01/02/2008
Horizon Tech Center - Mechanical HVAC 2nd Floor Plan	B_M2.2b	01/02/2008
Horizon Tech Center - Mechanical HVAC Roof Plan	B_M2.3b	01/02/2008
Horizon Tech Center - Specifications and Calculations	B_P1	11/15/2007
Horizon Tech Center - Site Plan	B_P2	11/15/2007
Horizon Tech Center - First Floor Plan	B_P3	11/15/2007
Horizon Tech Center - Second Floor Plan	B_P4	11/15/2007
Horizon Tech Center - Roof Plan	B_P5	11/15/2007

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Horizon Tech Center - Note Sheet	B_E1.1	11/15/2007
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Horizon Tech Center	B_E2.1	11/15/2007
Horizon Tech Center	B_E2.2	11/15/2007
Horizon Tech Center - First Floor Lighting Plan	B_E3.1	11/15/2007
Horizon Tech Center - First Floor Power Plan	B_E3.2	11/15/2007
Horizon Tech Center - Second Floor Lighting Plan	B_E4.1	11/15/2007
Horizon Tech Center - Second Floor Power Plan	B_E4.2	11/15/2007
Horizon Tech Center	B_E5.1	11/15/2007
Horizon Tech Center - Single Line Diagram and Panel Schedules	B_E6.1	11/15/2007
Horizon Tech Center - Detail Sheet	B_E7.1	11/15/2007
Horizon Tech Center - Detail Sheet #2	B_E7.2	11/15/2007
Horizon Tech Center - Title Sheet	C_T1.1	02/20/2008
Horizon Tech Center - Title 24 Energy Compliance	C_T1.2	02/20/2008
Horizon Tech Center - Fire Tested Assemblies and Penetrations	C_AC.1	02/20/2008
Horizon Tech Center - Architectural Site Plan	C_A1.1	02/20/2008
Horizon Tech Center - Site Plan Details	C_A1.2	02/20/2008
Horizon Tech Center - First Level Floor Plan	C_A2.1	02/20/2008
Horizon Tech Center - Second Level Floor Plan	C_A2.2	02/20/2008
Horizon Tech Center - Roof Plan	C_A2.3	02/20/2008
Horizon Tech Center - Enlarged Floor Plan	C_A2.4	02/20/2008
Horizon Tech Center - Exterior Elevations	C_A3.1	02/20/2008
Horizon Tech Center - Wall Sections	C_A4.1	02/20/2008
Horizon Tech Center - Stair and Elevator Sections	C_A4.2	02/20/2008
Horizon Tech Center - Details	C_A5.1	02/20/2008
Horizon Tech Center - Partition Schedule and Details	C_A6.1	02/20/2008
Horizon Tech Center - Door Schedule and Hardware Groups	C_A6.2	02/20/2008
Horizon Tech Center - Interior Elevations	C_A7.1	02/20/2008
Horizon Tech Center - Interior Details	C_A8.1	02/20/2008
Horizon Tech Center - Reflected Ceiling Plan	C_A9.1	02/20/2008
Horizon Tech Center - Enlarged Finish Plans	C_A10.1	02/20/2008
Horizon Tech Center - Title Sheet	C_S1	02/20/2008
Horizon Tech Center - Foundation Plan	C_S2	02/20/2008
Horizon Tech Center - Framing Plan Level 2	C_S3	02/20/2008
Horizon Tech Center - Tilt-Up Panel Wall Elevations	C_S5.1	02/20/2008
Horizon Tech Center - Tilt-Up Panel Wall Elevations	C_S5.2	02/20/2008
Horizon Tech Center - Tilt-Up Wall Sections and Details	C_S5.3	02/20/2008

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Horizon Tech Center - Sections and Details	C_S7	02/20/2008
Horizon Tech Center - Sections and Details	C_S8	02/20/2008
Horizon Tech Center - Sections and Details	C_S9	02/20/2008
Horizon Tech Center - Sections and Details	C_S10	02/20/2008
Horizon Tech Center - Schedule, Notes, Legends, Details and T-24	C_M1.0c	01/02/2008
Horizon Tech Center - Site Plan and Equipment Pad Layout	C_M1.1c	01/02/2008
Horizon Tech Center - Mechanical HVAC 1st Floor Plan	C_M2.1c	01/02/2008
Horizon Tech Center - Mechanical HVAC 2nd Floor Plan	C_M2.2c	01/02/2008
Horizon Tech Center - Mechanical HVAC Roof Plan	C_M2.3c	01/02/2008
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Horizon Tech Center - Restroom Details	C_P6	11/15/2007
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Horizon Tech Center - Exterior Title 24	C_E1.2B	11/15/2007
Horizon Tech Center - Lighting Detail Sheet	C_E1.3	11/15/2007
Horizon Tech Center - Site Plan Utility	C_E2.1	11/15/2007
Horizon Tech Center - Site Plan Lighting	C_E2.2	11/15/2007
Horizon Tech Center - First Floor Lighting Plan	C_E3.1	11/15/2007
Horizon Tech Center - First Floor Power Plan	C_E3.2	11/15/2007
Horizon Tech Center - Second Floor Lighting Plan	C_E4.1	11/15/2007
Horizon Tech Center - Second Floor Power Plan	C_E4.2	11/15/2007
Horizon Tech Center - Roof Plan	C_E5.1	11/15/2007
Horizon Tech Center - Single Line Diagram and Panel Schedules	C_E6.1	11/15/2007
Horizon Tech Center - Detail Sheet	C_E7.1	11/15/2007
Horizon Tech Center - Detail Sheet #2	C_E7.2	11/15/2007
Horizon Tech Center - Detail Sheet #3	C_E7.3	11/15/2007
First Floor - Building 'A'	A-1	06/02/2008
Second Floor - Building 'B'	A-2	06/02/2008
First Floor - Building 'B'	B-1	06/02/2008
Second Floor - Building 'B'	B-2	06/02/2008
First Floor - Building 'C'	C-1	06/02/2008
Second Floor - Building 'C'	C-2	06/02/2008

Field Bulletins

Date	Number	Name
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Opus Group Subcontract (Labor and Materials)

June 2005 Edition

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N/A

Supplemental Design Documents

Description	Date
Special Conditions of Subcontract	04/25/2007
Supplemental General Conditions of Subcontract	04/25/2007
General Conditions of Subcontract	04/25/2007

Other Documents

N/A

Subcontractor acknowledges that Contractor has made available to Subcontractor all of the Subcontract Documents, and Subcontractor shall be responsible for obtaining copies pertinent to its Work. Subcontractor represents that it has carefully examined the Subcontract Documents.

Modifications and Clarifications

This Subcontract includes, but is not limited to, the following items:

1. Subcontractor is to provide general labor as directed by Contractor's Superintendent. Subcontractor is required to use detailed time tracking tickets and/or daily forms that must be signed off daily by Contractor's Superintendent. Contractor will not be responsible to pay for labor that is not signed off daily by Contractor's Superintendent.
2. Subcontractor to provide labor without minimum time requirements. Eight, four and/or one hour minimum time requirements will not be allowed and will not be paid for by Contractor.
3. Subcontractor shall provide labor services up to the below stated contract amount. Subcontractor shall not exceed this Time and Material contract amount without prior approval from Contractor in the form of a Subcontractor Subcontract Change Order. At no time shall the subcontractor perform work which will cause them to exceed the current contract amount. Contractor is not responsible for and will not pay for any work which is in excess of the current contract amount.

This Subcontract excludes the following:

2. Schedule. Subcontractor will achieve the following milestones (referred to as the "Schedule"):

N/A

Schedule Notes

3. Subcontract Sum Breakdown. The breakdown of the Subcontract Sum is as follows:

Subcontract Recap

Sub-Job Number	Sub-Job Name	Name	Rate
11152.00	Lockheed Martin T1	General Labor, Time and Material Allowance, Not to Exceed	\$10,000.00
Total			\$10,000.00

Subcontract Sum Breakdown

Name	Account Code	Amount
Const Progress Clean - Subcontract	11152.00-M30-01741.00-S	\$10,000.00
Total		\$10,000.00

4. Unit Pricing.

If requested by Contractor, Subcontractor will provide additional units of work, as directed, at the unit prices set forth below. Unit prices will apply to all building construction and will include, without limitation, all material, labor, equipment, compensation, general conditions, benefits, overhead, clean-up, supervision, profit, parking, shop drawings, small tools and all sales, use and other applicable taxes. Unit prices do not include design. Unit prices will also apply to net quantity changes in the Work made pursuant to the Subcontract Documents.

The following unit prices shall be in effect until :

Unit Price List

Name	Rate	Quantity UOM
Laborer	\$16.30	Hour

5. Alternates.

If requested by Contractor, Subcontractor will promptly provide the alternate work set forth below for the stated amount. When requested by Contractor, the alternate work will become part of the Work defined in Paragraph 1 above.

Alternates

N/A

The alternate prices shall be in effect until :

Alternates Notes

END OF RIDER A

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Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)

AMERICAN HARBOUR POOL, INC.

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☒ Corporation ☐ Partnership

☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶

☐ Other (see instructions) ▶

☐ Exempt
payee

Address (number, street, and apt. or suite no.)

8898 CLAYMONT MESA BL. # A

City, state, and ZIP code

SAN DIEGO, CA 92123

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

or

Employer identification number

33: 0705 60

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign
Here

Signature of
U.S. person ▶

Date ▶ 10-24-2008

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). Check the "Limited liability company" box only and enter the appropriate code for the tax classification ("D" for disregarded entity, "C" for corporation, "P" for partnership) in the space provided.

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

For an LLC classified as a partnership or a corporation, enter the LLC's name on the "Name" line and any business, trade, or DBA name on the "Business name" line.

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 7

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

²However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt payees, see *Exempt Payee* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ³
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ³
5. Sole proprietorship or disregarded entity owned by an individual	The owner ³
For this type of account:	Give name and EIN of:
6. Disregarded entity not owned by an individual	The owner
7. A valid trust, estate, or pension trust	Legal entity ⁴
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.consumer.gov/idtheft or 1-877-IDTHEFT(438-4338).

Visit the IRS website at www.irs.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP IDAH
AMERLAL

DATE (MM/DD/YYYY)
10/30/08

PRODUCER

(OC) Heffegnan Insurance Brkrs
1855 Katella Ave, Suite 255
Orange CA 92867-4459
Phone: 714-997-8100 Fax: 714-460-9935

INSURED

American Labor Pool Inc.
Doug Boone
8898 Clairemont Mesa Blvd.
San Diego CA 92123

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

NAIC

INSURER A: FIREMAN'S FUND INS. CO.
INSURER B: PROGRESSIVE CASUALTY INS. CO.
INSURER C:
INSURER D:
INSURER E:

21873
24260

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADOL INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	SPK1000113	04/12/08	04/12/09	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COMP/OP AGG \$ 2000000
B		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	CA074577558 CA074577558 CA074577558	05/03/08 05/03/08 05/03/08	05/03/09 05/03/09 05/03/09	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Lockheed Martin TI, 10301, 10325, 10343 Meanley Drive, San Diego, CA 92131
Project #11152.00. Opus West Construction Corporation, Sequoia Realty Limited Partnership and Lockheed Martin Corp are named as Additional Insureds per attached form.

CERTIFICATE HOLDER

Opus West Construction Corporation
2050 Main St. #800
Irvine CA 92614

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL

30 DAYS WRITTEN

NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE


POLICY NUMBER: SPK1000113

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS (FORM B)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization show in the Schedule, but only with respect to Liability arising out of "your work" for that insured by or for you.

Named Insured: American Labor Pool Inc.

SCHEDULE

Name of Person or Organization:

Opus West Construction Corporation, Sequoia Realty Limited Partnership and Lockheed Martin Corp.

**STATE
COMPENSATION
INSURANCE
FUND**

P.O. BOX 420807, SAN FRANCISCO, CA 94142-0807

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

ISSUE DATE: 10-28-2008

GROUP:

POLICY NUMBER: 1670817-2008

CERTIFICATE ID: 3298

CERTIFICATE EXPIRES: 04-01-2008
04-01-2008/04-01-2009

OPUS WEST CONSTRUCTION CORPORATION

SD

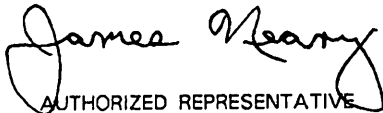
2050 MAIN ST STE 800
IRVINE CA 92614-8260JOB: PROJECT# 11152.00
MEANLY DRIVE
SAN DIEGO
CA

This is to certify that we have issued a valid Workers' Compensation insurance policy in a form approved by the California Insurance Commissioner to the employer named below for the policy period indicated.

This policy is not subject to cancellation by the Fund except upon 30 days advance written notice to the employer.

We will also give you 30 days advance notice should this policy be cancelled prior to its normal expiration.

This certificate of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policy listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate of insurance may be issued or to which it may pertain, the insurance afforded by the policy described herein is subject to all the terms, exclusions, and conditions, of such policy.


AUTHORIZED REPRESENTATIVE
PRESIDENT

EMPLOYER'S LIABILITY LIMIT INCLUDING DEFENSE COSTS: \$1,000,000 PER OCCURRENCE.

ENDORSEMENT #2085 ENTITLED CERTIFICATE HOLDERS' NOTICE EFFECTIVE 04-01-2002 IS
ATTACHED TO AND FORMS A PART OF THIS POLICY.— ENDORSEMENT #2001 ASBESTOS CERTIFICATION EFFECTIVE 04-01-2008 IS ATTACHED TO AND FORMS
A PART OF THIS POLICY.

EMPLOYER

AMERICAN LABOR POOL, INC.
8898 CLAIREMONT MESA BLVD STE A
SAN DIEGO CA 92123

SD

[JFU,CS]

PRINTED : 10-28-2008