

Motion 2101VCPO02 Official Position of Pacific Swimming on AB-5

Accept the report entitled Assessment of Vendors who Provided Services to Pacific Swimming and Zone Championship Meets According to the Criteria Set Forth in California Assembly Bill 5, as the Official Position of Pacific Swimming on AB-5

Assessment of vendors who provided services to Pacific Swimming and Zone Championship meets according to the Criteria set forth in California Assembly Bill 5

Executive Summary

The mission of USA Swimming and the goals of Pacific Swimming are being provided to serve as the backdrop for a better understanding of the mission and charter of the organizations in promoting and supporting the sport of swimming. Brief descriptions of specific functions of the Meet Director, Timing Operation and Meet Management Computer Operation are provided to help the reader understand the roles and interactions these service providers have with the host clubs whether it is Pacific Swimming or other host clubs.

Analysis of the 3 job functions in a swim meet was performed with respect to the A-B-C criteria of Assembly Bill 5. It was determined that personnel who provide Timing Operations and Meet Management Computer Operations met all 3 criteria of the ABC test and they should be classified as independent contractors, while those who serve as Meet Directors do not, and could be considered as employees.

Introduction to Pacific Swimming:

USA-Swimming (USA-S) is the National Governing Body for the Olympic sport of swimming in the United States. The mission statement of USA Swimming's (USA-S) mission is to grow and strengthen the sport of swimming. Specifically, "***we seek to: BUILD the Base –PROMOTE the Sport –ACHIEVE Sustained Competitive Success***". USA-S is divided into 59 Local Swim Committees (LSCs). The LSC is a separate and independent corporation to whom USA-S has delegated certain governing and supervisory responsibilities within a defined geographical area designated by USA-S.

Pacific Swimming (LSC) has jurisdiction over the sport of swimming in accordance with the Rules and Regulations of USA-S. The LSC conducts swim programs consistent with the policy of USA-S, and provides sanction approval of swim meets. The LSC trains and certifies swim officials who observe and oversee the running of these swim meets to ensure the rules of USA-S on competitive swimming events are observed and enforced.

Pacific Swimming is divided into 5 zones within its geographical region, namely Zone 1 North, Zone 1 South, Zone 2, Zone 3 and Zone 4 (Z1N, Z1S, Z2, Z3 and Z4). The 5 Zones together make up the Pacific Swimming LSC.

Competitive Events conducted by the Zones and Pacific Swimming :

- Zone Championships
Four of the 5 Zones conduct/host an annual Zone Championship swim meet and Zone invitational meets. Goals for these Zone championship meets is two-fold. It is a fund raising event to provide each Zone with operating funds to conduct Zone business, and it serves as a selection meet for members of their Zone All Star team to compete in the Zone All Star Meet sponsored by Pacific Swimming held once a year.

- Zone All-Star Meet

The responsibilities of hosting the Annual Pacific Swimming Zone All Star meet falls on one of the five zones on a rotation basis. All five zones take turns hosting the Zone All Star Meet during the five year cycle. The Zone All Star Meet will be renamed as Zone Challenge Meet starting in 2021-2022 swim season.

- Far Western Championships

Pacific Swimming has, over the last 3 years, experimented with a model of conducting and hosting two championship meets held each year. They are the Short Course Far Western meet (SCFW) and the Long Course Far Western meet (LCFW). For these meets the conduct and management responsibilities are organized in such a way that Pacific Swimming will provide two specific meet operation functions: (1) Timing Operation and (2) Meet Management Computer Operation, while the Meet Host teams are responsible for the rest of the meet operation functions.

At the annual Zone Championship meets and the Zone All Star meet there are services provided by various individuals who will be referred to as Service Providers. These services generally fall into 3 categories; Meet Director, Timing Operator, and Meet Management Computer Operator.

This report is an effort to assess the status of these service providers utilizing the three criteria set forth in AB5 to determine whether these service providers should be classified as Independent Contractors or Employees of Pacific Swimming.

Methodology:

A list of the names of the service providers who have provided services in any of the meets listed above for the swim season from Sep 1, 2018-Aug 31, 2019 and the swim season from Sep 2019 - Aug 2020, were compiled and tabulated in Table 1 (NB; Both Far Western meets and the Zone 1S Invitational LC meet in the 2019-2020 season were cancelled due to Covid-19; names inserted are persons contracted to provide the service).

A survey was sent to each of the listed providers to collect information that would aid in the current assessment. The specific tasks that each provided for those meets during the 2 swim seasons is also listed along with additional details of the events to help in the assessment. A blank copy of the Survey form is in Attachment 1, and copies of the completed surveys are compiled in Attachment 2. No survey was returned by Bill Cunningham who has retired and Tony Daly. A survey response for a new service provider Ethan Schnell, who did not provide services to the listed meets, but may provide his service in the future was included.

Fastlane Tek was not sent a survey as Fastlane Tek, Inc is a privately held company which provides IT services such as Timing Operations and Meet Management Computer Operation services to a large number of meets which includes Pacific Swimming, Pacific Masters Swimming, high school swimming, and a long list of member clubs in Pacific Swimming. Fastlane Tek also provides similar services to teams outside the Pacific Swimming LSC and in other states.

Table 1**List of Swim Meets:**

2018-19 Season									
Meet Name	<i>Zone All Star</i>	<i>Zone 1N Champ</i>	<i>Zone 1S Champ</i>	<i>Zone 1S Invite SC</i>	<i>Zone 1S Invite LC</i>	<i>Zone 2 Champ</i>	<i>Zone 3 Champ</i>	<i>Far Western SC</i>	<i>Far Western LC</i>
Meet host	Zone 1N	Zone 1N	Zone 1S	Zone 1S	Zone 1S	Zone 2	Zone 3	Santa Clara	Orinda Aquatics
Meet Days	<i>1</i>	<i>2</i>	<i>2½</i>	<i>2½</i>	<i>2½</i>	<i>2</i>	<i>2</i>	<i>4</i>	<i>4</i>
Meet Director	Volunteer	Volunteer	Volunteer	Volunteer	Volunteer	Volunteer	Ashley Denize	Club Staff	Volunteer
Timing	Volunteer	Larry Rice	Bill Cunningham Mike Greymont	Bill Cunningham Mike Greymont	Bill Cunningham Mike Greymont	Volunteer	Volunteer	Fastlane Tek	Larry Rice
Meet Management Computer	Fastlane Tek	Darryl Woo	Don Sandbach	Don Sandbach	Don Sandbach	Laurie Benton	Volunteer	Fastlane Tek	Fastlane Tek
2019-2020 Season									
Meet Name	<i>Zone All Star</i>	<i>Zone 1N Champ</i>	<i>Zone 1S Champ</i>	<i>Zone 1S Invite SC</i>	<i>Zone 1S Invite LC</i>	<i>Zone 2 Champ</i>	<i>Zone 3 Champ</i>	<i>Far Western SC</i>	<i>Far Western LC</i>
Meet host	Zone 1S	Zone 1N	Zone 1S	Zone 1S	Zone 1S	Zone 2	Zone 3	Pleasanton Seahawks	Terrapins
Meet Days	<i>1</i>	<i>2</i>	<i>2½</i>	<i>2½</i>	<i>2½</i>	<i>2</i>	<i>2</i>	<i>4</i>	<i>4</i>
Meet Director	John Daly	Volunteer	Volunteer	Volunteer	Volunteer	Volunteer	Ashley Denize	Volunteer	Volunteer
Timing	Larry Rice	Larry Rice	Bill Cunningham Mike Greymont	Bill Cunningham Mike Greymont	Bill Cunningham Mike Greymont	Volunteer	Volunteer	Larry RiceDavid Cottam	Larry RiceDavid Cottam
Meet Management Computer	Jim Bahls	Darryl Woo	Don Sandbach	Don Sandbach	Don Sandbach	Laurie Benton	Volunteer	Fastlane Tek	Fastlane Tek

Job Description of Meet Director, Timing Operation and Meet Management Computer Operator

A brief description of the actual work performed by service providers in each of the three categories listed in the table above is provided below to help the reader to grasp an understanding of the job content of each position at a swim meet,

Meet Director: Team representative (usually a volunteer) who is responsible for hosting the meet. Duties and responsibilities of the Meet Director (MD) include but are not limited to the following:

- Facility - arrange for and secure facilities (swimming pool and support facilities, e.g. office, changing rooms, space for vendors, space for swim teams set up) for the meet, and space and service for spectators.
- Meet Sanction - Prepare a meet Information sheet describing details of the facilities, USA-S and Pacific Swimming rules that are enforced at the meet, and the events offered in the meet. The meet will be granted Sanction upon the approval of the Meet Referee and the Sanction Chairs of the Zone (for Zone meets) and Pacific Swimming. The Sanction chairs verify that all applicable USA-S, LSC and Zone rules will be enforced at the meet.
- Meet Operation - recruit volunteer workers to support all facets of running a meet, e.g. Timing Operation, Meet Management Software operator, meet marshals, office runners, lane timers, etc, interaction with the Meet Referee to ensure the facility and meet operations satisfy the requirements set forth by USA-S Rules and Regulations.
- Snack Bar - Purchase of food, snacks and beverages prior to the meet, and volunteers to staff the snack bar before, during and after the meet.
- Hospitality - Hospitality is to provide food, snacks, and beverages for all volunteers at the meet. These include swim officials, coaches, volunteers, workers supporting meet operations, and lane timers.
- Safety - Oversee and supervise meet marshals to ensure safety procedures are observed at all times in the swim venue.
- Meet Program - prepare and print meet programs for sale at the meet.
- Vendors - select and secure vendors who provide services at the meet, such as T-shirt vendors, photographers, swim equipment/supply vendors, etc.

Timing Operation: As the name implies, the operator is responsible for the set up and operation of either the Automatic or semi-automatic timing system used to record the times achieved by each and every swim during the meet. Timing Operation (TO) service providers (other than volunteers) usually own all the timing equipment that they bring to the meet. Timing equipment usually includes a starting system, timing harness, stop buttons, and timing console at a minimum. Typical cost of timing equipment for a simple 8 lane meet with semi automatic timing system is about \$15,000. A fully automatic timing system adds another \$10,000 to the above cost, an 8 lane scoreboard adds another \$ 9-12,000 to the total costs.

The timing operator is responsible for the set up and take down of the timing equipment before and after the meet. During the meet, the timing operator mans the timing console to collect and record the results, ensures the timing system is fully functional at all times, trouble shoots any timing malfunctions and remedies any issue that may arise.

Meet Management Computer Operator: Specialized and custom software programs have been developed to manage swim meets. The Meet Management Computer Operator (CO) owns and provides the computer, and office equipment they bring to the swim meet. The CO compiles all the entries of a swim meet, seeds swimmers into the proper heat and lane according to the seeding rules proscribed by USA-S, provides the

necessary paper work to let the swimmers know their heat and lane assignment, and the associated paperwork for the Deck Referee, TO, lane timers, and other deck officials. The type of paperwork generated by the CO is defined by the Meet Referee. The CO down loads the results recorded by the Timing system, compiles all the results and declares winners for each and every heat and event conducted in the swim meet. Any timing discrepancies are evaluated by the Administrative Official (a volunteer) who will perform time adjustments, when necessary, according to the methodology set forth in USA-S Rules and Regulations.

The A, B, C Test of AB5

The three prong criteria defining an Independent Contractor are:

- A. The worker is free to perform services without the control or direction of the company, both under the contract for the performance of the work and in fact.
- B. The worker is performing work that is outside the usual course of the company's business activities.
- C. The worker is customarily engaged in an independently established trade, occupation, or business of the same nature as that involved in the work performed.

A The worker is free to perform services without the control or direction of the company, both under the contract for the performance of the work and in fact.

We are evaluating three specific operational job functions of a swim meet, (1) Meet Director (MD), (2) Timing Operation (TO) and (3) Meet Management Computer Operator (CO) in this analysis. The responsibilities and job contents of the three are quite distinct from each other. However, they all share the same trait with respect to control and direction of Pacific Swimming or the Zones which constitute Pacific Swimming.

The specifics of each swim meet are laid out in great detail in the "Meet Information Package" aka the "Meet Sheet". The only principal information in the Meet Sheet that all three operational function providers need are (a) the venue, (b) date of the meet and (c) starting time and (d) length of course e.g. short course yards or long course meters. How the tasks are to be completed is completely up to the individual service provider. What and when they perform their tasks are up to each service provider. The hiring entity depends on the experience and expertise of the service providers to plan and execute their respective operations in accordance with USA-S Rules and Regulations as described above.

All three operational function providers negotiate and set their own rates for each specific meet. They bring their own specific equipment (see detailed lists in above section) to the meet. All three are expected to be present at the venue the date of the swim meet to provide their services. All of the on-site directions and instructions given to the TO and CO are from the Meet Referee, Administrative Referee and other officials, all of whom are volunteers. Directions rarely come from the meet hosts. The MD may have occasions during the meet receives instructions from the meet hosts but most of the time he/she will be receiving requests from the same officials listed above for TO and CO. Should an operational function provider be unable to provide the service, he/she is expected to arrange for and pay for a substitute to take his place.

Based on the above description of the three job functions, it would be appropriate to assess that "The worker is free to perform services without the control or direction of the company, both under the contract for the performance of the work and in fact". This is in fact the same assessment in all the survey responses (Attachment 2). Some responses are in more detail than others, but all convey the same sentiment.

B: The worker is performing work that is outside the usual course of the company's business activities.

It is a common and mistaken perception that USA-S, the National Governing Body, and the 59 LSCs including Pacific Swimming under the USA-S general umbrella has running/hosting swim meets as a usual course of business. Hosting swim meets is not stated in either the mission statement of USA-S or that of Pacific Swimming. The objective of Pacific Swimming as spelled out as the Objective of the LSC in the Bylaws is as follows:

"The objectives and primary purpose of Pacific Swimming shall be the education, instruction and training of individuals to develop and improve their capabilities in the sport of swimming. Pacific Swimming shall promote swimming for the benefit of swimmers of all ages and abilities, in accordance with the standards, rules, regulations, policies and procedures of FINA, USA Swimming, and Pacific Swimming and its Articles of Incorporation."

Providing examples of how Pacific Swimming attains these objectives will help to illustrate the point.

- Education and training of individuals to serve as swim officials: The recruiting, education, training in class rooms (clinic) and on deck (at swim meets) and certifying of Swim Officials is a never ending goal and responsibility of Pacific Swimming. Pacific Swim Officials are adult volunteers who exhibit desire and passion for supporting the sport of swimming by serving as officials in swim meets. Swim Officials ensure both the technical and administrative rules of USA-S are enforced during the competition. If an official observes a swimmer violate a technical rule, the swimmer will be issued a citation and is disqualified (DQ) for that particular event. Penalty for the disqualification is significant in that the swim is nullified and the swimmer will not receive a time for that event. Swim Officials undergo extensive training for each specific meet operation, e.g. Stroke and Turn, Starter, Deck Referee, Administrative Official etc, and are evaluated for their proficiency at the task and certified at a level commensurate with their skills and proficiency by at least 2 experienced swim officials. There are over 600 volunteer swim officials in Pacific Swimming who support the various swim meets that are hosted by various member clubs of Pacific Swimming during the year. Pacific Swimming expends significant energy and financial resources to undertake the effort of recruiting, training and certification of swim officials annually.
- Sanction of swim meets: Swim meets are sanctioned by Pacific Swimming to ensure the venue and the conduct of the meet are in accordance with the conditions delineated in the Rules and Regulations of USA-S, and those of Pacific Swimming in addition to local public health and safety requirements. Only results from Sanctioned swim meets are considered as "Official" and entered into a National database for considerations. Swim meets that are sanctioned will be assigned a sanction number by Pacific Swimming which will be listed prominently in the "Meet Sheet". There are about 170 plus sanctioned swim meets held in Pacific Swimming each year.
- LSC Meet Schedule: Pacific Swimming develops a LSC meet schedule for each swim season. The LSC meet schedule usually comprises 22 swim meets. There are 7 Age group championship meets for age group swimmers annually: one specifically for 10 and under swimmers, 4 meets for 14 and under swimmers, and 2 meets for 8-18 years olds each year. Pacific Swimming hosts only one of these Age Group Championship meets - Zone All Star Meet (ZAM) designed for 14 and under swimmers selected for Zone Teams from each of the 5 Zones, and currently co-hosts two Far Western meets (8-18 year olds) with 2 separate member clubs. The remaining LSC meets are designed for 12 and older swimmers. These are hosted by member clubs who are awarded these LSC meets in a meet bid process managed by the LSC scheduling committee that is open to all member clubs.

- **Zone Meet Schedule:** Each of the five Zones of Pacific Swimming develops a Zone Age Group (6 to 18 year olds) meet schedule for each season. Four of the 5 Zones host a Zone Championship meet, the exception is Zone 4. Swimmers from each of the 4 Zones compete during their Zone Championship meets and are selected to be a member of the Zone All Star Teams (to renamed to Zone Challenge Teams from 2021 swim season forward). Zone 4 uses a different selection process for members of the Zone 4 All Star team. The Zone All Star teams compete against each other in the annual Zone All Star Meet hosted by Pacific Swimming to determine the Zone Age Group Champion. Zone 1S hosts 2 additional Invitational meets each year for 14 and under swimmers in Zone 1S. All other Zone meets are hosted by member clubs of that Zone and are approved by the Zone Sanction chair in addition to the LSC Sanction Chair. The Zone Sanction chair ensures that Zone specific rules for swim competition are enforced. The Zone approved meets are then subject to review and approval by the LSC Sanction chair who ensures all USA-S and Pacific Swimming requirements are met.
- **Zone Officials -** Each Zone recruits, trains and certifies volunteer swim officials who are primarily responsible for official support of Zone meets hosted by the Zone member clubs. In addition, they also officiate at the Zone Championship meet hosted by their respective Zones and LSC meets hosted by other member clubs.

There are about 170+ swim meets each year in Pacific Swimming. Pacific Swimming hosts at most 7-9 meets (with or without the 2 Far Western meets) among the 170+ meets. The Pacific Swimming hosted meets represent approximately only 4 to 5 percent of the meets per year. These statistics demonstrate that running/hosting swim meets is not the usual course of business for the LSC, while promoting the sport of swimming is the primary objective.

C: The worker is customarily engaged in an independently established trade, occupation, or business of the same nature as that involved in the work performed.

Table 1 lists the people who have provided service at Zone Championship Meets, Zone All Star Meets, and Far Western meets hosted by Pacific Swimming and the Zones over the last two swim seasons and who responded to the survey (attachment 2). Except for the two Meet Directors, all other service providers (TO and CO) contract directly with a number of swim clubs hosting swim meets in Pacific Swimming. They provide the same service to a list of at least 6-7 other organizations which host swim meets (high schools, Junior Colleges, Universities, Pacific Masters, etc.) in addition to Pacific Swimming. The providers are paid directly by the organizations or host clubs of the meet for their services. Since they provided services of the same nature as they did for Pacific Swimming, one can conclude that they satisfy **Criteria C** as an independent contractor.

The two Meet Directors do not meet this criteria as they did not provide service in the same capacity for other clients. Tony Daly and Ashley Denize could be considered as employees who provided 1 and 2 days of service respectively per swim season to Pacific Swimming.

Conclusion:

The results of this assessment clearly show that the service providers of Timing Operator and the Meet Management Computer Operations met the ABC criteria of Assembly Bill 5 as Independent Contractors, while those who served as Meet Directors do not meet one of the three criteria and could be classified as employees of Pacific Swimming.

Attachment 1

Pacific Swimming – Request for Information

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information.

Some indicators are listed below – Please check all that apply:

Do you own your own business? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business:
Address of Business:
Type of Business:
Is this business a: <input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input type="checkbox"/> Yes, <input type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input type="checkbox"/> Yes, <input type="checkbox"/> No If Yes, please provide
Do you file IRS Schedule C ? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you file IRS Schedule SE ? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the terms and conditions for providing service? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a business card? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input type="checkbox"/> No Please provide example(s) to illustrate your choice:

Do you have multiple clients in addition to Pacific Swimming? ☐ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

Do you own, store, maintain and replace the equipment and/or software necessary to provide services? ☐ Yes, ☐ No If yes, provide examples:

Additional Comments or Information that would be useful to help us categorize your services?

Name (Print) _____

Signature _____ Date _____

Attachment 2**D. Cottam****Pacific Swimming – Request for Information**

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information.

Some indicators are listed below – Please check all that apply:

Do you own your own business? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business: Cottam Family Timing Service
Address of Business: 4296 Pinewood Ct. Concord, CA 94521
Type of Business: rent and/or operate swim meet timing equipment
Is this business a: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If Yes, please provide
Do you file IRS Schedule C ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you file IRS Schedule SE ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the terms and conditions for providing service? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a business card? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice: I am told how many competition lanes will need equipment and the type of equipment to be provided. Examples are 3 button system, touchpads with 3 button back up and whether or not a scoreboard is needed. I then arrange a time to deliver and set up the timing system with the meet host or venue manager, bring the appropriate equipment, assemble it, test it and run it if necessary. At the end of the meet, I disassemble the equipment and place it my rented business storage unit. I perform routine maintenance to keep the equipment operable.

Attachment 2

D. Cottam

Do you have multiple clients in addition to Pacific Swimming? ☒ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

I provide timing equipment and services to high schools (NCS and leagues), Junior colleges (JC championships), Masters Swimming, recreational championships as well as individual USA-Swimming year round teams and Pacific Swimming.

2017 = timed 1 PC; 4 Rec; 7 USA-S team; 5 H.S. and 1 Masters; so 1PC meet out of 18 total = 6%;

2018 = timed 0 PC; 3 Rec; 8 USA-S team; 3 H.S. and 2 Masters; so 0 PC meet out of 16 total = 0%

2019 = timed 0 PC; 3 Rec; 9 USA-S team; 1 H.S. and 2 Masters; so 0 PC meet out of 16 total = 0%.

Do you own, store, maintain and replace the equipment and/or software necessary to provide services? ☒ Yes, ☐ No If yes, provide examples: Cables, push buttons, timing computers, starting system, loudspeakers, single line and multiline scoreboards, and misc. timing equipment.

Additional Comments or Information that would be useful to help us categorize your services?

I started my business in 1997 and have continuously operated and or rented timing equipment since that time. Some of the swim meet timing equipment I provide is bulky to store and requires specialized trailers to transport.

Name (Print) David Cottam

Signature David Cottam Date 4/6/2020

Attachment 2**L. Rice****Pacific Swimming – Request for Information**

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information. Some indicators are listed below – Please check all that apply:

Do you own your own business? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business: Larry Rice
Address of Business: 507 Lakeview Way, Redwood City, CA 94062
Type of Business: Service
Is this business a: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If Yes, please provide 94-1588195
Do you file IRS Schedule C ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you file IRS Schedule SE ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the terms and conditions for providing service? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a business card? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice: I set the time that I go to set up my timing equipment at the pools, location of the equipment, who is going to help me if help is needed, who runs the equipment if I don't, and who helps me take it down.

Attachment 2

L. Rice

Do you have multiple clients in addition to Pacific Swimming? ☒ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

I do all the meet timing of the clubs in Zone 1 North that host meets in the zone. Also, I do timing for clubs in Zone 2 and Zone 1 South. I do some Master's Meets, a few college meets, a few summer league meets. I also do some consulting for other equipment owners that need help with learning how to use it properly.

Do you own, store, maintain and replace the equipment and/or software necessary to provide services? ☒ Yes, ☐ No If yes, provide examples:

I rent a building to keep the equipment I own indoors and to have a place to do the required maintenance on the equipment.

Additional Comments or Information that would be useful to help us categorize your services?

Although timing a swim meet is a part of the sport, the timing of Pacific Swimming meets is outside the normal activity of Pacific Swimming.

Meets that I do for Pacific Swimming comprise less than 1% of the total meets I provide timing and equipment for. The rest are for the various clubs, the Master program and college and some summer league swim meets.

Name (Print)____Larry Rice_____

Signature _____*Larry Rice*_____ Date __4/6/2020

Attachment 2
E. Schnell

Pacific Swimming – Request for Information

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information. Some indicators are listed below – Please check all that apply:

Do you own your own business? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business: SIERRA TIMING
Address of Business: 768 Mindoro Ct., El Dorado Hills, CA 95762 (as of June 1st, 2020)
Type of Business: Swim Meeting Timing, Sports timer
Is this business a: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If yes, please provide #:1016807
Do you have employees? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If Yes, please provide #84-2589214
Do you file IRS Schedule C ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No 2019 Taxes will be business 1st time filing
Do you file IRS Schedule SE ? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you set the terms and conditions for providing service? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a business card? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice: I am hired by the meet director to run the timing equipment for the meet. But they do not supervise me, they are there to answer questions I may have if needed. I also work with the pool staff as I am setting up on their pool deck.

Attachment 2

E. Schnell

Do you have multiple clients in addition to Pacific Swimming? ☒ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

WCMasters Championship in Oct. and another meet in July. Approx. 20% business

WCSC - summer rec championship in July. Approx 5% (only one meet/yr)

Planned for 2020: North Coast Section Championships meet - not happening in 2020 - 5%

Do you own, store, maintain and replace the equipment and/or software necessary to provide services? ☒ Yes, ☐ No If yes, provide examples:

I own, store, and maintain all of my own equipment.

Additional Comments or Information that would be useful to help us categorize your services?

I don't know what else I could say to help you. I feel I am an independent contractor.

Name (Print) Ethan Schnell

Signature *Ethan Schnell* Date 30Mar2020

Attachment 2**J. Bahls****Pacific Swimming – Request for Information**

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information.

Some indicators are listed below – Please check all that apply:

Do you own your own business? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business: James W. Bahls
Address of Business: 6251 Corte Fuego, Pleasanton CA 94566
Type of Business: Swim Meet Computer Operator
Is this business a: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If Yes, please provide
Do you file IRS Schedule C ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you file IRS Schedule SE ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the terms and conditions for providing service? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you have a business card? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice: I arrive at the pool, setup my equipment, and provide computer services for the meet. I adjust my services for the given meet (for example, how many of each report to provide), but I provide the computer operator service at my own direction.

Attachment 2

J. Bahls

Do you have multiple clients in addition to Pacific Swimming? ☒ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

I also provide computer operator services for Pacific Masters, Oakland High School Section, and Campolindo High School..

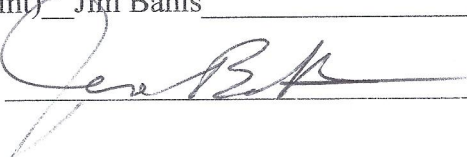
Do you own, store, maintain and replace the equipment and/or software necessary to provide services? ☒ Yes, ☐ No If yes, provide examples:

I own all the physical equipment (computer, printers, etc.). Due to software license terms, each team must provide a license the meet management software.

Additional Comments or Information that would be useful to help us categorize your services?

Name (Print) Jim Bahls

Signature



Date

4/9/20

Pacific Swimming – Request for Information

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information.

Some indicators are listed below – Please check all that apply:

Do you own your own business? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business:
Address of Business: 1374 Lupine Ct, Concord, CA 94521
Type of Business: Swim Meet Management
Is this business a: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If Yes, please provide
Do you file IRS Schedule C ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you file IRS Schedule SE ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the terms and conditions for providing service? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a business card? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice:
The service I'm hired for is to run swim meets and create results. How I provide them is up to me.

Attachment 2

L. Benton

Do you have multiple clients in addition to Pacific Swimming? ☒ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

Pajaro Valley Unified School District
DeLaSalle High School
Orinda Aquatics
Walnut Creek Aquabears
Pacific Swimming, less than 15%

Do you own, store, maintain and replace the equipment and/or software necessary to provide services?
☒ Yes, ☐ No If yes, provide examples:

Computers, printers, software, toner, paper, labels, wireless units.

Additional Comments or Information that would be useful to help us categorize your services?

Name (Print)

Laurie Benton

Signature

Laurie Benton

Date

4/9/20

Attachment 2
M. Greymont

Pacific Swimming – Request for Information

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information. Some indicators are listed below – Please check all that apply:

Do you own your own business? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business: Greymont Service Corp.
Address of Business: 409 Tenant Ave STE 423, Morgan Hill, CA 95037
Type of Business: Consulting, Tech Education, IT, and Computer Services
Is this business a: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If yes, please provide
Do you have employees? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If yes, how many 2
Do you carry general liability insurance? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No EIN: 87-0723904
Do you file IRS Schedule C ? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you file IRS Schedule SE ? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you set the terms and conditions for providing service? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? N/A I use QuickBooks with preformed Invoice from system.
Do you have a business card? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice: I direct and lead the work to be done. A project plan if necessary is formed, and then tasks are date driven to be completed. Invoicing is driven off the work list, and either a fixed rate for a project can be done, or hourly charges and reimbursable expenses are billed out. I also provide support via email/phone/onsite as well as doing various desired computer requests. Work is performed either onsite or remotely.

Attachment 2
M. Greymont

Do you have multiple clients in addition to Pacific Swimming? ☒ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

My clients are very diverse throughout the Bay Area from Alien Technology in San Jose, to Blackoak Casino in Sonora, CA.

As far as percent of work for Pacific Swimming that is considered a billable amount of work that would be about 2.5 percent of all total work based on yearly billable amounts vs amount that is (or would be billed) for work on swim events.

The only billable work that I do is for running timing equipment, and computer operation on/at trailers.

Do you own, store, maintain and replace the equipment and/or software necessary to provide services? ☒ Yes, ☐ No If yes, provide examples:

4 laptops, 3 desktop systems, 2 printers, cellphone, car, and various IT tools and software

Additional Comments or Information that would be useful to help us categorize your services?

I perform consulting and installation services and provide tech support, and operation of computers and databases for a vast variety of customers.

Name (Print)_____Michael H. Greymont_____

Signature _____electronically signed_____ Date __4/14/2020__

Pacific Swimming – Request for Information

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information. Some indicators are listed below – Please check all that apply:

Do you own your own business? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Name of Business:
Address of Business:
Type of Business:
Is this business a: <input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input type="checkbox"/> Yes, <input type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input type="checkbox"/> Yes, <input type="checkbox"/> No If Yes, please provide
Do you file IRS Schedule C ? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you file IRS Schedule SE ? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the terms and conditions for providing service? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a business card? <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input type="checkbox"/> No Please provide example(s) to illustrate your choice:

Attachment 2

C. Kikuta

Do you have multiple clients in addition to Pacific Swimming? ☒ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

Fastlane Tek – Majority of my meets
DACA
SOLO
Valley Splash
Central Coast Section

Do you own, store, maintain and replace the equipment and/or software necessary to provide services?
☒ Yes, ☐ No If yes, provide examples:

Computers, printers and internet hotspot are owned by me. I also supply paper and labels for the meets. Meet license is supplied by the meet host.

Additional Comments or Information that would be useful to help us categorize your services?

The majority of my meets are contacted through Fastlane Tek. My son, Nikolas and I have been researching starting a business for ourselves to hopefully make this easier to conduct business.

Name (Print) Curtiss Kikuta

Signature _____

Date 4/8/2020

Attachment 2
D. Sandbach

Pacific Swimming – Request for Information

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information. Some indicators are listed below – Please check all that apply:

Do you own your own business? <input type="checkbox"/> Y <input type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business: DONALD H. SANDBACH
Address of Business: 18630 GOLD CREEK TRAIL VOLCANO, CA 95689
Type of Business: COMPUTER SERVICE
Is this business a: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If Yes, please provide
Do you file IRS Schedule C ? <input type="checkbox"/> Y <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you file IRS Schedule SE ? <input checked="" type="checkbox"/> Y <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the terms and conditions for providing service? <input type="checkbox"/> Y <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input type="checkbox"/> Y <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input type="checkbox"/> Y <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a business card? <input checked="" type="checkbox"/> Y <input type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice: I OPERATE A COMPUTER AT A SWIM MEET. I PROVIDE ALL MY EQUIPMENT TO PERFORM THE FUNCTION.

Attachment 2

D. Sandbach

Do you have multiple clients in addition to Pacific Swimming? [y] Yes, [] No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

I work mainly with the following teams ggst scsc/mako acsc cruz daca tera

I do no meets directly for pacific swimming. Zone 1 south hires me to do 2 meets a year.

Do you own, store, maintain and replace the equipment and/or software necessary to provide services? [y] Yes, [] No If yes, provide examples:

I wrote and maintain the software to provide meet management services,

As part of providing meet management services I provide each team with their pre meet reports.

This includes meet program, check in lists, relay cards as necessary. This is all done at my home Before leaving for the meet venue.

I provide all my supplies. Paper, award labels, toner, printer ribbons.

I provide the wireless communication equipment to communicate with the electronic timing.

I have been filing a schedule 'c' for 35 years. My social security number is my tax id number.

I interface with pacific swimnings registration relating to swimmers registration issues.

I provide the necessary reports at the end of the meet to be uploaded the pacific swimming Web site and the usa swimming swims database.

For a two day meet I average 14 total hours at the meet venue. For some teams this is the total Tine for the year as I only do 1 meet for the team.

Additional Comments or Information that would be useful to help us categorize your services?

Name (Print)_DONALD SANDBACH_____

Signature _____ Date _4/1/20_____

Attachment 2**D. Woo****Pacific Swimming – Request for Information**

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information.

Some indicators are listed below – Please check all that apply:

Do you own your own business? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Name of Business: Darryl Woo Consultation and Services
Address of Business: 758 Prairie Creek Drive, Pacifica CA 94044
Type of Business: Consultation and Services
Is this business a: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No If Yes, please provide 94-3211798
Do you file IRS Schedule C ? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you file IRS Schedule SE ? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you set the terms and conditions for providing service? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you invoice on business letterhead? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you have a business card? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice:

Attachment 2**D. Woo**

Do you have multiple clients in addition to Pacific Swimming? ☒ Yes, ☐ No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

BAC, MAV, DACA, SOLO, DCD, BSC

Do you own, store, maintain and replace the equipment and/or software necessary to provide services?
☒ Yes, ☐ No If yes, provide examples:

Additional Comments or Information that would be useful to help us categorize your services?

Name (Print) _____

Signature _____ Date _____

Attachment 2**A. Denize****Pacific Swimming – Request for Information**

Under CA AB5, Pacific Swimming is responsible for properly classifying individuals as either employees or as independent contractors when they are paid to perform functions for the LSC. In order to correctly categorize and document you we are requesting the following information.

Some indicators are listed below – Please check all that apply:

Do you own your own business? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Name of Business: N/A
Address of Business: N/A
Type of Business: N/A
Is this business a: <input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership
Do you have a business license? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, please provide
Do you have employees? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If yes, how many?
Do you carry general liability insurance? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
If you have employees, do you carry worker's compensation insurance? <input type="checkbox"/> Yes, <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do you have a Federal Tax Number (EIN) <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No If Yes, please provide
Do you file IRS Schedule C ? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you file IRS Schedule SE ? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you set the terms and conditions for providing service? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you set the fees you charge for providing service and/or equipment? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you invoice on business letterhead? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you have a business card? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
Do you have a website or otherwise advertise your services to the public? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No
When providing your services are you under direct supervision? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No Please provide example(s) to illustrate your choice: not direct supervision but I am required to request approval on many things

Attachment 2

A. Denize

Do you have multiple clients in addition to Pacific Swimming? [] Yes, [x] No If yes, please provide examples of clients (Host clubs, Masters Swimming, College, high school, rec/cabana teams, and swim leagues etc) that you currently service or have serviced in the past. Please provide an estimate of the percentage of your work performed for Pacific Swimming as compared to all other clients.

Do you own, store, maintain and replace the equipment and/or software necessary to provide services? [] Yes, [x] No If yes, provide examples:

Additional Comments or Information that would be useful to help us categorize your services?

Name (Print)_____ashley Denize_____

Signature _____Ashley Denize_____ Date __4/13_____