

RESUBMITTAL

See instructions on reverse

For use by Secretary of State only

STD. 400 (REV. 01-09)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-2011-0920-02	REGULATORY ACTION NUMBER 2013-0102-03SR	EMERGENCY NUMBER
For use by Office of Administrative Law (OAL) only			
NOTICE		REGULATIONS	

ENDORSED FILED
IN THE OFFICE OF

2013 FEB 14 PM 2:16

Despa Bowen
DESPA BOWEN
SECRETARY OF STATE

2013 JAN -3 PM 12:37

OFFICE OF
ADMINISTRATIVE LAW

AGENCY WITH RULEMAKING AUTHORITY
Department of General Services, Procurement Division, Office of Small Business & DVBE Services

AGENCY FILE NUMBER (if any)

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE DVBE Certification and Participation	TITLE(S) 2, Division 2	FIRST SECTION AFFECTED 1896.60	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON Diana Alfaro	TELEPHONE NUMBER (916) 375-4919	FAX NUMBER (Optional) (916) 375-4950
OAL USE ONLY	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER 2011 39-2	PUBLICATION DATE 9-30-2011

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Disabled Veteran Business Enterprise Certification and Participation	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) 2012-0716-03S
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SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT See Attachment.
	AMEND See Attachment.
TITLE(S) 2, Division 2, Chapter 3	REPEAL See Attachment

3. TYPE OF FILING

<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input checked="" type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §511349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input type="checkbox"/> Other (Specify) _____	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)
15-day comment period was from December 14, 2012, to December 28, 2012.

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

<input type="checkbox"/> Effective 30th day after filing with Secretary of State	<input checked="" type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> \$100 Changes Without Regulatory Effect	<input checked="" type="checkbox"/> Effective other (Specify) April 1, 2013 per SB1099
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input checked="" type="checkbox"/> Other (Specify) consultation pursuant to veterans code § 997.5(a)		

7. CONTACT PERSON Diana Alfaro	TELEPHONE NUMBER (916) 375-4919	FAX NUMBER (Optional) (916) 375-4950	E-MAIL ADDRESS (Optional) diana.alfaro@dgs.ca.gov
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I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Fred Klass</i>	DATE 1/2/13
TYPED NAME AND TITLE OF SIGNATORY Fred Klass, Director, Department of General Services	<i>Esteban Almanza, Chief Deputy Director</i>

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ENDORSED APPROVED

FEB 14 2013

Office of Administrative Law

Department of General Services
Procurement Division
Office of Small Business and DVBE Services

Attachment to Notice Publication/Regulations Submission STD 400

Part B. Submission Regulations

B2. Section Numbers Affected

Adopt:

1896.71
1896.76
1896.77
1896.78
1896.81
1896.82
1896.83
1896.84
1896.88
1896.91
1896.92
1896.95
1896.96
1896.97

Amend:

1896.60
1896.61
1896.62
1896.70
1896.72
1896.73
1896.74
1896.75
1896.80
1896.90
1896.99.100
1896.99.120

Repeal:

1896.63
1896.64
1896.85
1896.98