



# COMMISSION ON DECOLONIZATION

FELIX P. CAMACHO  
Governor

Michael W. Cruz, M.D.  
Lieutenant Governor



P.O. Box 2950, Hagåtña, Guam 96932 / Tel: (671) 473-5267 Fax: (671) 475-9165

January 28, 2010

The Honorable Speaker Judith P. Won Pat  
Mina' Trenta Na Liheslaturan Guahån  
Hagåtña, Guam 96910

**SUBJECT:** Quarterly Report

Ha'ånen Minagof,

In compliance with P.L. 29-02 and P.L. 28-68, attached are our quarterly financial reports of all accounts under our purview and administration for the 1st quarter of FY2010.

I hereby certify that the information contained in these reports is true and correct.

If you have the need for further information, please contact our office.

Un Dångkolo Na Si Yu'os Ma'åse

Attachments

Cc: Office of the Public Auditor  
BBMR, Analyst  
Office of Finance and Budget  
Guam Legislature  
Office of the Governor

Office of the Speaker  
Judith P. Won Pat  
Hagåtña, Guam 96910  
2010 FEB 1 PM 1:47  
30-10-0104

2010 FEB 1 PM 1:47

**For Appropriation/Expenditure Report pursuant to PL 30- 55  
Government of Guam  
(2010 1st Qtr) Appropriation/Expenditure Report  
(Run Date January 25, 2010)**

**COMMISSION ON SELF DETERMINATION**

<b>Fund</b>	<b>Object Category</b>	<b>Appropriations</b>	<b>YTD Allotment</b>	<b>Expenditures</b>	<b>Outstanding Encumbrances</b>	<b>Funds Available</b>	<b>Unallotted Balance</b>
GENERAL FUND	REGULAR SALARY	50,440.00	19,400.00	26,465.12	0.00	-7,065.12	31,040.00
	FRINGE	14,040.00	5,322.00	7,456.07	0.00	-2,134.07	8,718.00
	HEALTH BENEFIT	0.00	0.00	340.32	0.00	-340.32	0.00
	MISCELLANEOUS	25,000.00	0.00	0.00	0.00	0.00	25,000.00
<b>GENERAL FUND Fund Totals:</b>		<b>89,480.00</b>	<b>24,722.00</b>	<b>34,261.51</b>	<b>0.00</b>	<b>-9,539.51</b>	<b>64,758.00</b>
<b>COMMISSION ON SELF DETERMINATION TOTALS:</b>		<b>89,480.00</b>	<b>24,722.00</b>	<b>34,261.51</b>	<b>0.00</b>	<b>-9,539.51</b>	<b>64,758.00</b>



# COMMISSION ON DECOLONIZATION

FELIX P. CAMACHO  
Governor

MICHAEL W. CRUZ, M.D.  
Lieutenant Governor



P.O. Box 2950, Hagåtña, Guam 96932 / Tel: (671) 473-5267 Fax: (671) 475-9165  
Website: [www.decolonizeguam.com](http://www.decolonizeguam.com) Email: [decolonizeguam@yahoo.com](mailto:decolonizeguam@yahoo.com)  
Website: [www.decolonizeguam.com](http://www.decolonizeguam.com)

For Appropriation/Expenditure report pursuant to PL 30-55  
Government of Guam  
(2010 1st Qtr) Appropriation/Expenditure Report

### COMMISSION ON SELF DETERMINATION

Fund	Object Category	Appropriations	YTD Allotment	Expenditures	Outstanding Encumbrances	Funds Available	Unallotted Balance
GENERAL FUND	REGULAR SALARY	50,440.00	19,400.00	26,465.12	0.00	-7,065.12	31,040.00
	FRINGE	14,040.00	5,322.00	7,456.07	0.00	-2,134.07	8,718.00
	HEALTH BENEFIT	0.00	0.00	340.32	0.00	-340.32	0.00
	BLDG RENT	0.00	0.00	0.00	0.00	0.00	0.00
	MISCELLANEOUS	25,000.00	0.00	0.00	0.00	0.00	25,000.00
<b>GENERAL FUND Fund Totals:</b>		<b>89,480.00</b>	<b>24,722.00</b>	<b>34,261.51</b>	<b>0.00</b>	<b>-9,539.51</b>	<b>64,758.00</b>
<b>COMMISSION ON SELF DETERMINATION TOTALS:</b>		<b>89,480.00</b>	<b>24,722.00</b>	<b>34,261.51</b>	<b>0.00</b>	<b>-9,539.51</b>	<b>64,758.00</b>

Department/Agency: COD  
 Division/Program: Administration

OFB Departmental Funding/Expenditure Fact Sheet  
 General Fund

Department/Agency Head Certification as to the accuracy of information contained herein:	
<i>Amyl Garcia</i>	Name (Print)
<i>[Signature]</i>	Signature
1/29/10	Date

AS400 Account Code	Appropriation Classification	FY 2009						FY 2010								
		FY 2009 Appropriations PL 27-106 & 27-107	FY 2008 Lapses Carried Over into FY 2009	FY 2009 Governor's Transfer +/-	Total FY 2009 Spending Authorized (G)+(H)+(I)	FY 2009 Expenditures/Encumbrances*	FY 2009 Available Balance (D)-(E)	FY 2010 Appropriations PL 27-106 & 27-107	FY 2009 Lapses Carried Over into FY 2009	FY 2010 Governor's Transfer +/-	Total FY 2010 Spending Authorized (G)+(H)+(I)	FY 2010 YTD Allotment	FY 2010 YTD Expenditures/Encumbrances*	FY 2010 Projected Expenditures	FY 2010 Total Expenditures/Encumbrances (L)+(M)	FY 2009 Available Projected Balance (J)-(N)
<b>PERSONNEL SERVICES</b>																
111	Regular Salaries/Increments	135768.00			135768.00	135768.00	0.00	50440.00			50440.00	19400.00	26465.12	31040.00	57505.12	-7085.12
112	Overtime/Special Pay - Health Benefit				0.00		0.00				0.00	340.32		340.32	-340.32	
113	Benefits	40194.00			40194.00	28631.35	11562.65	14040.00			14040.00	5322.00	7456.07	8718.00	16174.07	-2134.07
	<b>TOTAL PERSONNEL SERVICES</b>	<b>175962.00</b>	<b>0.00</b>	<b>0.00</b>	<b>175962.00</b>	<b>164399.35</b>	<b>11562.65</b>	<b>64480.00</b>	<b>0.00</b>	<b>0.00</b>	<b>64480.00</b>	<b>24722.00</b>	<b>34261.51</b>	<b>39758.00</b>	<b>74019.51</b>	<b>-9539.51</b>
<b>OPERATIONS</b>																
220	TRAVEL- Off-Island/Local Mileage Reimbursements	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
230	CONTRACTUAL SERVICES	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
233	OFFICE SPACE RENTAL	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
240	SUPPLIES & MATERIALS	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
250	EQUIPMENT	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
271	DRUG TESTING	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
280	SUB-RECIPIENT/SUBGRANT	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
290	MISCELLANEOUS	0.00			0.00		0.00	25000.00			25000.00	0.00	0.00	25000.00	25000.00	0.00
	<b>TOTAL OPERATIONS</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>25000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>25000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>25000.00</b>	<b>25000.00</b>	<b>0.00</b>
<b>UTILITIES</b>																
361	Power	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
362	Water/Sewer	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
363	Telephone/Toll	0.00			0.00		0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
	<b>TOTAL UTILITIES</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
701	<b>INDIRECT COST</b>	0.00			0.00	0.00	0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
450	<b>CAPITAL OUTLAY</b>	0.00			0.00	0.00	0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00
	<b>TOTAL</b>	<b>175962.00</b>	<b>0.00</b>	<b>0.00</b>	<b>175962.00</b>	<b>164399.35</b>	<b>11562.65</b>	<b>89480.00</b>	<b>0.00</b>	<b>0.00</b>	<b>89480.00</b>	<b>24722.00</b>	<b>34261.51</b>	<b>64758.00</b>	<b>99019.51</b>	<b>-9539.51</b>
<b>FULL TIME EQUIVALENCIES (FTE's)</b>																
	UNCLASSIFIED	2						2								
	CLASSIFIED	0						0								
	<b>TOTAL FTE's</b>	<b>2</b>						<b>2</b>								

\*Indicate on separate sheet amounts expended for: 1). promised compensation; 2). prior year obligations.



## **COMMISSION ON DECOLONIZATION**

FELIX P. CAMACHO  
Governor

MICHAEL W. CRUZ, M.D.  
Lieutenant Governor



P.O. Box 2950, Hagåtña, Guam 96932 / Tel: (671) 473-5267 Fax: (671) 475-9165  
Website: [www.decolonizeguam.com](http://www.decolonizeguam.com) Email: [decolonizeguam@yahoo.com](mailto:decolonizeguam@yahoo.com)  
Website: [www.decolonizeguam.com](http://www.decolonizeguam.com)

*For Appropriation/Expenditure report  
2010 1ST QRTR - JAN 28'10*

### ***PRIOR YEAR OBLIGATIONS***

***NONE AT THIS TIME***

### ***FEDERAL PROGRAM FUNDS***

***NONE AT THIS TIME***

**Government of Guam  
Fiscal Year 2010 Budget  
Agency Staffing Pattern  
CURRENT**

[BBMR SP-1]

FUNCTIONAL AREA: Executive Direction

DEPARTMENT/AGENCY: Commission on Decolonization

PROGRAM: Administration

FUND: General Fund

Input by Department										Input by Department										
No.	(A) Position Number	(B) Position Title	(C) Name of Incumbent	(D) Grade/Step	(E) Salary	(F) Overtime	(G) Special*	(H) Increment		(J) (E+F+G+I) Subtotal	(K) Retirement (J * 25.20%)	(L) Retire (DDI) (\$15.52*26PP)	(M) Social Security (6.2% * J)	Benefits			(P) Medical (Premium)	(Q) Dental (Premium)	(R) Total Benefits (K thru Q)	(S) (J + R) TOTAL
								Date	Amt.					(N) Medicare (1.45% * J)	(O) Life (1/)					
1	COD-001	Executive Director				\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0			\$0	\$0	
2	COD-002	Staff Assistant	Agnes Cruz Aguon		30,328	0	0		0	30,328	\$7,643	404	0	440	174	0	0	8,660	38,988	
3	COD-003	Staff Assistant	Norita K. Charfauros		55,000	0	0		0	55,000	\$13,860	0	0	798	174	3,606.20	0	18,437.70	73,437.70	
4					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
5					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
6					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
7					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
8					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
9					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
10					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
11					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
12					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
13					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
14					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
15					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
16					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
17					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
18					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
19					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
20					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
21					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
22					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
23					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
24					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
25					0	0	0		0	0	\$0	0	0	0	0	0	0	0	0	
			Grand Total:		\$85,328	\$0	\$0		\$0	\$85,328	\$21,503	\$404	\$0	\$1,237	\$348	\$3,606.20	\$0	\$27,098.11	\$112,426.11	

\* Night Differential / Hazardous / Worker's Compensation / etc.

1/: FY 2009 (current) GovGuam contribution for Life Insurance is \$174 per annum; Subject to change in FY 2010