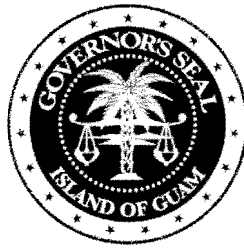


EDDIE BAZA CALVO
Governor



RAY TENORIO
Lieutenant Governor
2013 FEB -4 AM 8:30
sy

Office of the Governor of Guam

February 1, 2013

Honorable Judith T. Won Pat, Ed.D.
Speaker
I Mina'trentai Dos Na Liheslaturan Guâhan
155 Hesler Street
Hagåtña, Guam 96910

Office of the Speaker
Judith T. Won Pat, Ed. D.
Date 2/1/13
Time 4:30 pm
Received by Rob Lopez
32-13-88

Dear Speaker Won Pat:

By virtue of the authority vested in me pursuant to the Organic Act of Guam and the local laws applicable to the following position, I am pleased to transmit the following appointment and supporting documents for:

APPOINTEE: Carl V. Dominguez
POSITION: Director, Department of Public Works

The appointment is subject to the consent of *I Liheslaturan Guâhan*. Please schedule a hearing at your earliest convenience.

Senseramente,

EDDIE BAZA CALVO

Enclosure

0088



EDDIE BAZA CALVO
Governor

RAY TENORIO
Lieutenant Governor

Office of the Governor of Guam

January 8, 2013

Mr. Carl Dominguez
3 Belle Gumataotao Circle
Piti, Guam 96915

Dear Mr. Dominguez:

Thank you for your commitment to serve the people of Guam. The Calvo Tenorio administration is facing unprecedented challenges, both near and long-term. The task ahead of us will require the collective efforts of the best minds who will have the courage to make tough decisions for the good of all our people. I hereby appoint you to serve in the Calvo Tenorio administration as:

Director, Department of Public Works

This appointment is effective January 8, 2013. Please contact the Office of the Governor at 472-8931 for further processing.

Senseramente



EDDIE BAZA CALVO

Enclosure

COPY



OFFICE OF THE GOVERNOR
GUAM

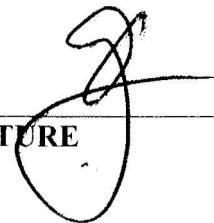
The following is information required for submission to the Speaker of *I Liheslaturan Guåhan* in accordance with 4 G.C.A. § 2103.5 of the Guam Code Annotated.

1. Citizenship: U.S.
2. DOB: [REDACTED] Age: 61
3. Residential Address (NOT mailing address):
[REDACTED]
[REDACTED]
4. Email Address: carlvdominguez@gmail.com (personal) ; carl.dominguez@dpw.guam.gov (work)
5. Have you ever been convicted of a crime? Yes No **XXX**
If yes, please explain:

6. Have you ever been declared mentally incompetent by any court? Yes No **XXX**

7. Have you ever been found **not** guilty or **not** punishable in any criminal proceedings by reason of insanity?
Yes No **XXX**
If yes, please explain:

8. Have you ever been confined to a mental institution? Yes No **XXX**
If yes, please explain:


SIGNATURE

1/22/13
DATE



**Government of Guam
 GUAM POLICE DEPARTMENT
 RECORDS & IDENTIFICATION SECTION
 P.O. Box 23909
 Guam Main Facility, Guam 96921**



January 28, 2013

SUBJECT: CRIMINAL HISTORY RECORD

NAME:	Carl V. DOMINGUEZ		
DATE OF BIRTH:	██████████	FINGERPRINT #:	37-190
■	The individual has no record of criminal conviction(s) in GPD files that are subject to Guam law and rules and regulations of the Department.		

*****NOTHING FOLLOWS*****

THIS INFORMATION MAY BE LIMITED TO A LOCAL CRIMINAL OFFENSE ONLY AND IS NOT INTENDED FOR USE FOR ANY LOCAL, STATE, OR FEDERAL LAW ENFORCEMENT AGENCY. THIS CLEARANCE DOES NOT REFLECT ARREST(S) PENDING ADJUDICATION

By Direction: lisa

**FRED E. BORDALLO, JR.
 Chief of Police**

The absence of an original GUAM POLICE seal invalidates this police clearance.
 REVISED 7/12/11



SUPERIOR COURT OF GUAM

Guam Judicial Center • 120 West O'Brien Drive • Hagåtña, Guam 96910

Telephone (671) 475-3370
Fax (671) 477-1500

RICHARD B. MARTINEZ
Clerk of Courts

Name: **CARL V DOMINGUEZ**

SS#: ID# GUAM DL#: [REDACTED] Date of Birth: [REDACTED]

CERTIFICATE OF SEARCH

The undersigned Clerk hereby certifies the following results of a diligent search of the records of this Court:

Criminal Cases:

- A. No Case Found.
- B. 1. Criminal Case No.
- 2. Criminal Case No.
- 3. Criminal Case No.
- 4. Criminal Case No.
- 5. Criminal Case No.

Civil Cases:

- A. No Case Found
- B. 1. Civil Case No.
- 2. Civil Case No.
- 3. Civil Case No.
- 4. Civil Case No.
- 5. Civil Case No.

Criminal Record: Page of

Civil Record: Page of

Request for further information may be addressed at the Records Division of the Superior Court of Guam, Guam Judicial Center, 120 West O'Brien Drive, Hagatna, Guam. Hours of operation are Monday – Friday, 8:00 a.m. to 5:00 p.m. Closed Saturday, Sunday and local/federal holidays. Court Clearances are Non-Refundable.

Dated: January 22, 2013

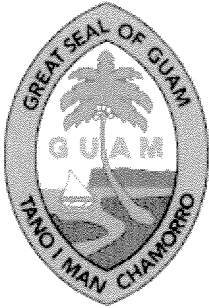
RICHARD B. MARTINEZ
Clerk of Courts

BY:  **LORRAINE C. CRUZ**
Deputy Clerk

Prepared By: JJAP



The absence of an original Court Seal invalidates this document



Appointment application

TODAY'S DATE:	Jan 22, 2013
POSITION APPLYING FOR:	<input checked="" type="checkbox"/> Director <input type="checkbox"/> Deputy Director <input type="checkbox"/> Boards/Commission <input type="checkbox"/> Other _____

AGENCY/DEPARTMENT/BOARDS/COMMISSION DESIRED: List top 3 choices.

1. Department of Public Works

2. _____

3. _____

Would you consider any other positions than listed above? YES NO

GENERAL INFORMATION

NAME: Carl Vincent Dominguez

MAILING ADDRESS: [REDACTED]

CITY: [REDACTED] **STATE:** [REDACTED] **ZIP:** [REDACTED]

HOME PHONE: [REDACTED] **WORK PHONE:** [REDACTED] **CELL/PAGER:** [REDACTED]

SOCIAL SECURITY NUMBER: _____

LICENSES:	TYPE	EXPIRATION DATE
1228012282	Guam Driving License	12/12/2012
_____	_____	_____
_____	_____	_____

BACKGROUND INFORMATION

List your prior Government of Guam Appointments and dates of service:

Government of Guam Appointment	Dates of Service
Guam Power Authority - Electrical Engineer	1971 - 1973
Guam Housing Corporation - Board of Directors	1983 - 1986
Department of Public Works - Deputy Director	2011 - 2012
Department of Public Works - Director	JAN 8, 2013

List all prior other government service excluding Government of Guam:

Other Government Appointment

Dates of Service

_____	_____
_____	_____
_____	_____
_____	_____

REFERENCES

List three (3) character and family references (name, address, & telephone number):

NAME	ADDRESS	PHONE
1. <u>Gerald Dominguez (Brother)</u>	<u>██</u>	<u>████████</u>
2. <u>Annette Dominguez (Sister)</u>	<u>██</u>	<u>████████</u>
3. <u>Paul Mendiola (Son-in-law)</u>	<u>██</u>	<u>████████</u>

EDUCATION

Education (Circle highest grade completed & degree)

High School: 9 10 11 12 College: 1 2 3 4 AA BA BSE Post-Grad: MBA JD MA MS PhD

Location: JFK, Guam School Attended: Marquette Univ School Attended: _____
Location: Milwaukee, WI Location: _____
Concentration: _____ Concentration: _____
Degree: Electrical Engineering Degree: _____
Attended From: Aug-70 to Jun-73 Attended From: _____ to _____

Other Degrees or Certificates: Engineer-In-Training (EIT)

TRAINING

Cont'd.

Include professional institutes, seminars, and on-the-job training attended with date:

INSTITUTE/SEMINARS/ON-THE-JOB

DATE

INSTITUTE/SEMINARS/ON-THE-JOB	DATE
_____	_____
_____	_____
_____	_____
_____	_____

AWARDS

List all educational, professional, civic awards, & recognition for public service:

PROFESSIONAL INVOLVEMENT

List involvement on a local/national/international level, list organizations, activities participated in, offices held:

COMMUNITY/CIVIC INVOLVEMENT

List organizations, activities participated in, offices held:

Latte Jaycees - President

Catholic School Board - Director

PUBLICATIONS & PRESENTATIONS

Cont'd.

List published articles, papers delivered at professional meetings:

None

MILITARY SERVICE

List type of discharge, branch, rank at discharge, current status, record of any court marshals or non-judicial punishment under the Uniform Code of Military Justice, & special distinctions & honors. Please attach copy of DD214.

None

EMPLOYMENT HISTORY

EMPLOYMENT EXPERIENCE: Please begin with your present or last positions you have held for the past ten years. Account for all periods of employment including military service, volunteer work, self employment and periods of unemployment in separate blocks. Use separate blocks if your duties and responsibilities changed while working for the same employer. For volunteer work, write the word "Volunteer" in the salary section for that block. To receive full credit for your experience, describe in detail the tasks you were assigned. If you supervised others, explain your duties as a supervisor and indicate the number and kinds of employees you supervised. If more space is needed, please use supplemental form attached. Your answers may be verified with former employers.

1	Employer: Department of Public Works	From: Jan-11 To: Jan-13
Address: 542 South Marine Corps Drive		<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time
City: Tamuning	State Guam	Zip 96911
Average hours worked per week: 50		
Name of Supervisor: Joanne Brown, Director		Starting Salary: \$75,000.00 per annum
Your Title: Deputy Director		Ending Salary: per
Duties & Responsibilities:		<input checked="" type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other
Support the Director in the operations of the Department including administration, highways (design, contracts, encroachment, inspections & maintenance), transportation maintenance, capital improvement projects (design, construction quality control & contracts), building inspections and permits, highway safety and building construction & facilities maintenance.		
May we contact your previous employer: <input checked="" type="radio"/> YES <input type="radio"/> NO		Reason(s) for Leaving:
What did you NOT like about your job?		N/A
2	Employer: Continental Micronesia, Inc.	From: Feb-97 To: Sep-10
Address: P.O. Box 8778		<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time

Cont'd.

City: Tamuning	State Guam	Zip 96910	Average hours worked per week: 40
Name of Supervisor: Samuel Shinohara			Starting Salary: \$45,000.00 per annum
Your Title: Facilities Manager			Ending Salary: \$64,000.00 per annum
Duties & Responsibilities:			<input type="radio"/> Resigned <input type="radio"/> Discharged <input checked="" type="radio"/> Other
<p>Managed maintenance of commercial building space, including electrical, plumbing, carpentry and air conditioning; utilities, i.e., water and power, trash disposal. Coordinated lease of new space and lease renewals of existing space. Coordinated insurance renewals and periodic loss prevention inspections. Managed space fit-out design and construction, including furniture, fixtures & equipment procurement and installation. Managed baggage/freight scales, X-ray and metal detector repair and certification program.</p>			
May we contact your previous employer: <input checked="" type="radio"/> YES <input type="radio"/> NO			Reason(s) for Leaving: Retirement; looking for new opportunities.
What did you NOT like about your job? Occasional stress			
3	Employer:		From: _____ To: _____
Address:			<input type="radio"/> Full-Time <input type="radio"/> Part-Time
City:	State	Zip	Average hours worked per week:
Name of Supervisor:			Starting Salary: _____ per
Your Title:			Ending Salary: _____ per
Duties & Responsibilities:			<input type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other
<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>			
May we contact your previous employer: <input type="radio"/> YES <input type="radio"/> NO			Reason(s) for Leaving:
What did you NOT like about your job?			
4	Employer:		From: _____ To: _____
Address:			<input type="radio"/> Full-Time <input type="radio"/> Part-Time
City:	State	Zip	Average hours worked per week:

Cont'd.

Name of Supervisor:	Starting Salary: _____ per
Your Title:	Ending Salary: _____ per
Duties & Responsibilities:	<input type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other
<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
May we contact your previous employer: <input type="radio"/> YES <input type="radio"/> NO	Reason(s) for Leaving:
What did you NOT like about your job?	

5 Employer:	From: _____ To: _____
Address:	<input type="radio"/> Full-Time <input type="radio"/> Part-Time
City: _____ State _____ Zip _____	Average hours worked per week: _____
Name of Supervisor:	Starting Salary: _____ per
Your Title:	Ending Salary: _____ per
Duties & Responsibilities:	<input type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other
<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
May we contact your previous employer: <input type="radio"/> YES <input type="radio"/> NO	Reason(s) for Leaving:
What did you NOT like about your job?	

Cont'd.

Explain any periods of unemployment longer than thirty days: Unemployed 3-1/2 months between retirement at Continental Micronesia and new position of Deputy Director at DPW. Interval spent looking for new and challenging career path.

MANAGEMENT EXPERIENCE

A	Have you ever managed a Business, Department or an entire organization? <input checked="" type="radio"/> YES <input type="radio"/> NO
	If YES, did you report to a Board of Directors? <input type="radio"/> YES <input checked="" type="radio"/> NO
If your answer is NO, please select the management position/title you held:	
<input type="radio"/> Lead <input type="radio"/> Administrator <input checked="" type="radio"/> Deputy Director	
<input type="radio"/> Supervisor <input type="radio"/> Superintendent <input type="radio"/> Assistant General Manager	
<input type="radio"/> Manager <input type="radio"/> Director (<i>under a GM/CEO, President</i>) <input type="radio"/> Vice President	
B	Number of years of service in the highest ranking management position you have held. (Please check one of the following)
	<input type="radio"/> under 1 year <input type="radio"/> 9+ – 15 years
	<input checked="" type="radio"/> 1+ – 3 years <input type="radio"/> 15+ – 20 years
	<input type="radio"/> 3+ – 5 years <input type="radio"/> 20+ and up
	<input type="radio"/> 5+ – 9 years
C	Sector of Organization you served with the most years. <input type="radio"/> GOVERNMENT: <input type="radio"/> Local <input type="radio"/> Federal
	<input checked="" type="radio"/> PRIVATE
	<input type="radio"/> OTHER: _____

SUPERVISORY

A	Total number of employees in the organization/department you have managed:		
	<input type="radio"/> 50 and under	<input type="radio"/> 101 – 250	<input type="radio"/> 501 and up
	<input type="radio"/> 51 – 100	<input type="radio"/> 251 – 500	
Average number of staff who reported directly to you:			
		<input type="radio"/> Under 25	<input type="radio"/> 201 – 300
		<input type="radio"/> 26 – 50	<input type="radio"/> 301 – 400
		<input type="radio"/> 51 – 200	<input type="radio"/> 401 – 500
Are you knowledgeable of the local and federal labor laws? <input checked="" type="radio"/> YES <input type="radio"/> NO			

PERFORMANCE RATING

A	Was the organization/department you managed “profitable” or did your organization perform as formally planned?		
<input checked="" type="radio"/> YES <input type="radio"/> NO			
Variance from projected income: <input type="radio"/> Below plan <input checked="" type="radio"/> Met plan <input type="radio"/> Above plan			
Variance from projected expenses: <input type="radio"/> Below plan <input checked="" type="radio"/> Met plan <input type="radio"/> Above plan			

OTHER ABILITIES

A	Have you ever participated in a strategic planning process? <input checked="" type="radio"/> YES <input type="radio"/> NO		
If YES, please select one of the following to describe your participation. <input type="radio"/> Facilitated <input type="radio"/> Directed			
<input checked="" type="radio"/> Implemented			
Do you have any experience with:			
	Restructuring an organization	<input checked="" type="radio"/> YES	<input type="radio"/> NO
	Process Improvement	<input checked="" type="radio"/> YES	<input type="radio"/> NO
	Re-engineering	<input checked="" type="radio"/> YES	<input type="radio"/> NO
	Total Quality Management	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Have you ever participated in formal negotiations with another organization? <input checked="" type="radio"/> YES <input type="radio"/> NO			
If YES, check the boxes describing your role: <input type="checkbox"/> Observer <input checked="" type="checkbox"/> Assistant			
<input type="checkbox"/> Chief Negotiator <input type="checkbox"/> Advisor/Consultant			
Have you been involved in policy making process? <input checked="" type="radio"/> YES <input type="radio"/> NO			
If YES, please check the boxes which best describes your role: <input checked="" type="checkbox"/> Management			
<input type="checkbox"/> Board and/or Commission			
<input checked="" type="checkbox"/> Legislation (includes lobbying process)			

TECHNOLOGY

A	Have you been involved in promoting the use of Technology in your organization? <input checked="" type="radio"/> YES <input type="radio"/> NO		
Please select all items which describes your involvement:			
	<input checked="" type="checkbox"/> Sponsor	<input type="checkbox"/> Development	
	<input type="checkbox"/> Planning	<input type="checkbox"/> Design	
	<input type="checkbox"/> Coordination	<input type="checkbox"/> Implementation	

GRANTS

	Have you been involved in applying, administering, awarding Grants? <input checked="" type="radio"/> YES <input type="radio"/> NO		
--	---	--	--

Please check the boxes which best describes your involvement:

<input type="checkbox"/> Aide	<input type="checkbox"/> Administrator
<input type="checkbox"/> Researchers	<input checked="" type="checkbox"/> Reviewer
<input type="checkbox"/> Writer	<input type="checkbox"/> Funder

SKILLS

Indicate appropriate letter for your skill level:

C=Course only **F**-Fair **G**-Good **E**= Excellent

Windows Software:	Skill Level (C-F-G-E)	Version	Skill Level (C-F-G-E)	Version
MS Word	G	_____	WordPerfect	None
Excel	G	_____	Presentation	None
PowerPoint	F	_____	Quattro Pro	None
			Lotus	None

GENERAL

Summarize and explain any experience and/or skills which you feel would be beneficial to employers: Explain:

Ability to solve problems, i.e., gather facts/data, analyze and direct resources to resolve situations. Ability to work with others, i.e., empathize with and treat people with dignity and respect.

Of the jobs you have held, which did you like best? Why?

Continental Micronesia: Largest organization worked for. Interacted with all departments and at many locations, including Hawaii, CNMI, Micronesia, Fiji, Australia and Asia. Resources were readily available; little bureaucracy.

What do you feel are your outstanding strengths?

Technical knowledge, including electrical engineering background. Communications skills, both written and oral. High work ethic.

What do you feel are your primary weaknesses?

Sometimes I take on more work than I can handle in an efficient manner.

What gives you the most satisfaction in your work?

Getting tasks accomplished on schedule and budget and receiving positive acknowledgement from co-workers, superiors, colleagues, and the public.

What is your concept of success?

First, that one is at peace with his/her God. Second, that one has a good family life, i.e., a happy marriage and healthy, well educated and morally good children. Third, that one has a satisfying career that helps support himself/herself and family.

Cont'd.

Please write any additional information that you would like us to know about you (e.g. hobbies)
Use my spare time mainly at home doing yard work and fixing things around the house. Like to watch movies
and surf the web.

PLEASE READ CAREFULLY BEFORE SIGNING:

I certify that all statements made on this application are true and complete to the best of my knowledge. I understand that any misrepresentation or omission is sufficient to disqualify me for employment or may result in a discharge if employed. I authorize my former employers, schools, government agencies and other entities to give any information (including fact or opinion) they may have regarding me, whether or not it is on their record. I hereby release them and the company from all liabilities as a result of furnishing and receiving this information. I understand that any offer of employment is subject to satisfactory references. I understand and agree that I may be required to submit to pre-employment drug test and post-offer medical examination as part of my application for employment with the offer of employment conditioned on the result of such test and examination. I also understand and agree that at any time during my employment, I may be required to submit to a drug test and/or a medical examination. I authorize the physician conducting the examination and any laboratory testing any specimen obtained by the physician or collection site to disclose the results of the examination and the laboratory test to the organization I am applying to. If employed, I agree to abide by my employer's policies and recognize that this application is not intended in any way to create an employment contract.

Signature of Applicant:

Date:

1/22/13

Your application will be placed in our active application files for twelve months. If you are not employed within six months but still wish to be considered for a specific opening, please contact the Governor's Office to inform us of the specific opening for which you wish to be considered.



STATEMENT OF FINANCIAL INTERESTS

TO: Governor Eddie Baza Calvo
Ricardo J. Bordallo Governor's Complex
Adelup, Guam 96910

FROM: Carl V. Dominguez

Social Security #: [REDACTED]

- I have no financial interest in any business
- I do have interest(s) in the following business(es):

Name and address of business interest:	Type and amount of interest
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Signature (sign in ink)

1 / 22 / 13
Date



STATEMENT OF TAX LIABILITIES

TO: Governor Eddie Baza Calvo
Ricardo J. Bordallo Governor's Complex
Adelup, Guam 96910

FROM: Carl V. Dominguez _____

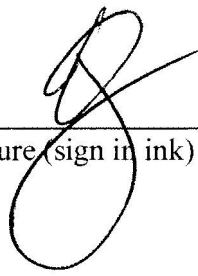
Social Security #: [REDACTED] _____

- I have no delinquent or past-due tax liabilities
- I do have delinquent or past due liabilities as follows:

Name and address of business interest:

Type and amount of interest

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



Signature (sign in ink)

1 / 22 / 13
Date

Cont'd.

Submit



OFFICE OF THE GOVERNOR
GUAM

I, **CARL V. DOMINGUEZ**, first being duly sworn on oath, do hereby depose and say:

1. That I have read and reviewed the information contained in the attached Appointment/Nomination letter from the Governor of Guam.

2. That the matters contained in the Appointment/Nomination letter, together with all attachments thereto, are true and correct.

3. That this Affidavit is made for the purpose of complying with the requirements of 4 G.C.A. Section 2103.5.

I declare under penalty of perjury under the laws of Guam that the foregoing is, to the best of my knowledge, true and correct.

CARL V. DOMINGUEZ

Date: 2/1/13

SUBSCRIBED AND SWORN to before me this 2 day of February, 2013.



NOTARY PUBLIC
NOTARY PUBLIC
In and for Guam, U.S.A.
My Commission Expires: **May 07, 2015**
173 Aspinall Avenue, Ste. 203
Ada Plaza Center, Hagatna, Guam 96932