



**EDDIE BAZA CALVO**  
Governor

**RAY TENORIO**  
Lieutenant Governor

*Office of the Governor of Guam*

FEB 07 2013

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

Office of the Speaker  
**Judith T. Won Pat, Ed. D.**  
Date 2/8/13  
Time 10:33 AM  
Received by faul  
32-13-101

RE: Commission Appointment

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: **Victor F. Cruz**  
POSITION: **Member, Guam Land Use Commission**  
TERM LENGTH: **Five (5) years**

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

*Senseramente,*

  
**EDDIE BAZA CALVO**

2013 FEB - 8 AM 10:45  


Enclosure



EDDIE BAZA CALVO  
Governor

RAY TENORIO  
Lieutenant Governor

*Office of the Governor of Guam*

JAN 25 2013

Mr. Victor F. Cruz  
P.O. Box 85  
Hagatna, Guam 96932

RE: Commission Appointment

Dear Mr. Cruz:

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:

**Member, Guam Land Use Commission**

This appointment is subject to confirmation by *I Liheslaturan Guåhan* and is effective upon your confirmation. Please contact the Office of the Governor at 472-8931-6 should you have any further questions regarding this appointment.

*Senseramente*

EDDIE BAZA CALVO



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: 63

3. Residential Address (NOT mailing address):

[REDACTED]

4. Email Address: vicfcruz@gmail.com

5. Have you ever been convicted of a crime? Yes X No     

If yes, please explain:

DUI 1991

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

7. Have you ever been found **not** guilty or **not** punishable in any criminal proceedings by reason of insanity? Yes      No X

If yes, please explain:

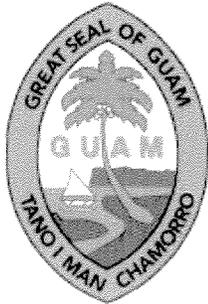
8. Have you ever been confined to a mental institution? Yes      No X

If yes, please explain:

  
SIGNATURE

Feb 7, 2013  
DATE



# Appointment application

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

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

1. Guam Land Use Commission
2. \_\_\_\_\_
3. \_\_\_\_\_

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

## GENERAL INFORMATION

**NAME:**  
Victor F. Cruz

**MAILING ADDRESS:**  
\_\_\_\_\_

**CITY:** \_\_\_\_\_

<b>HOME PHONE:</b>	<b>WORK PHONE:</b>	<b>CELL/PAGER:</b>
_____	_____	_____

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

LICENSES:	TYPE	EXPIRATION DATE
_____	Driver's	7/20/17
_____	_____	_____
_____	_____	_____

## BACKGROUND INFORMATION

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

Government of Guam Appointment	Dates of Service
_____	_____
_____	_____
_____	_____
_____	_____

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>Judge Joaquin V.F. Manibusan Jr.</u>	[REDACTED]	[REDACTED]
2. <u>Noel J. Paine</u>		
3. <u>Paul M. Calvo</u>		

### EDUCATION

Education (Circle highest grade completed & degree)

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

Location: <u>Mangilao, Gu</u>	School Attended: <u>Heald Institute</u>	School Attended: _____
	Location: <u>San Francisco, Ca</u>	Location: _____
	Concentration: _____	Concentration: _____
	Degree: _____	Degree: _____
	Attended From: <u>1971</u> to _____	Attended From: _____ to _____

Other Degrees or Certificates:

### TRAINING

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

INSTITUTE/SEMINARS/ON-THE-JOB

DATE

Shell Company of Australia

Marketing

1988

### 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:

Kiwanis Club of Guam

Shell Guam Babe Ruth League Organization

Fr. Duenas Memorial School Varsity Volleyball Booster Club

Republican Party of Guam - Vice-Chairman

### PUBLICATIONS & PRESENTATIONS

Cont'd.

List published articles, papers delivered at professional meetings:

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### 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.

Honorable Discharge, US Army, SP5, Inactive

### 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.

<b>1</b>	Employer: Gov't. of Guam Governor's Office	From: Jan. 2011 To: Present
Address: P.O. Box 2950		<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time
City: Hagatna State GU Zip 96932		Average hours worked per week: 40
Name of Supervisor: Frank Arriola		Starting Salary: \$60,000 per
Your Title: Special Staff Assistant		Ending Salary: per
Duties & Responsibilities:		<input type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other
<u>Assists the governor in community affairs &amp; other social relations.</u>		
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?		
<b>2</b>	Employer: Gov't. of Guam 28th, 29th, 30th Guam Legislature	From: Jan., 2005 To: Dec., 2010
Address: 155 Hesler Place		<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time

Cont'd.

City: Hagatna State GU Zip 96910		Average hours worked per week: 40
Name of Supervisor: Sen. Edward B. Calvo		Starting Salary: 43,400 annual per
Your Title: Senior Policy Advisor		Ending Salary: per
Duties & Responsibilities:		<input type="radio"/> Resigned <input type="radio"/> Discharged <input checked="" type="radio"/> Other
<p><del>Advises the senator in matters relating to community, public and political affairs.</del></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>		
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?		
3 Employer: Government of Guam 25th & 26th Guam Legislature		From: Jan., 1999 To: Dec., 2002
Address: 155 Hesler Place		<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time
City: Hagatna State GU Zip 96910		Average hours worked per week: 40
Name of Supervisor: Sen. Edward B. Calvo		Starting Salary: 45,000 annual per
Your Title: Chief of Staff		Ending Salary: per
Duties & Responsibilities:		<input type="radio"/> Resigned <input type="radio"/> Discharged <input checked="" type="radio"/> Other
<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>		
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?		
4 Employer: Shell Guam, Inc.		From: Jan., 1992 To: Dec., 1998
Address: Suite 100, 643 Chln. San Antonio		<input type="radio"/> Full-Time <input type="radio"/> Part-Time
City: Tamuning State GU Zip 96913		Average hours worked per week: 40





A	Total number of employees in the organization/department you have managed:		
	<input checked="" 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"/> 501 and up
	<input checked="" 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 type="radio"/> Met plan <input type="radio"/> Above plan		
Variance from projected expenses: <input type="radio"/> Below plan <input 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 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 type="checkbox"/> Assistant <input checked="" type="checkbox"/> Chief Negotiator <input checked="" 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 type="checkbox"/> Legislation (includes lobbying process)			

### TECHNOLOGY

A	Have you been involved in promoting the use of Technology in your organization? <input type="radio"/> YES <input checked="" type="radio"/> NO		
	Please select all items which describes your involvement:		
	<input 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 type="radio"/> YES <input checked="" type="radio"/> NO		
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Cont'd.

Please check the boxes which best describes your involvement:

- Aide
- Researchers
- Writer
- Administrator
- Reviewer
- 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	None	_____	WordPerfect	None
Excel	None	_____	Presentation	None
PowerPoint	None	_____	Quattro Pro	None
			Lotus	None

## GENERAL

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

*Good communication, interpersonal skills, ability to assist people in their needs and public relation skills*

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

*working with management, organizations to achieve milestons / goals*

What do you feel are your outstanding strengths?

*Ability to communicatie and work with people*

What do you feel are your primary weaknesses?

*Sometime being too kind*

What gives you the most satisfaction in your work?

*Accomplishment in helping and serving people*

What is your concept of success?

*Being a people person and communicating*

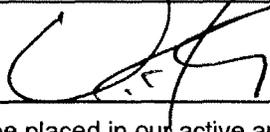
Cont'd.

Please write any additional information that you would like us to know about you (e.g. hobbies)

**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:

Feb 7, 2013

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: Victor F. Cruz

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
<u>Frank Beja LLC</u> <u>P O Box 85 Hagatna, Guam 96932</u>	<u>Property / Building Management and</u> <u>Rentals. 26%</u>
<u>Victor F. Cruz Rental</u> <u>P O Box 85 Hagatana, Guam 96932</u>	<u>Residential, apartment rentals</u> <u>100%</u>

[Signature]  
Signature (sign in ink)

Feb 7, 2013  
Date





Cont'd.

Submit

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME <b>CRUZ, VICTOR FERNANDEZ</b>		2. SERVICE NUMBER <b>RA 68 008 399</b>		3. SOCIAL SECURITY NUMBER [REDACTED]																									
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>ARMY RA OrdC</b>			5a. GRADE, RATE OR RANK <b>SP5</b>	6. PAY GRADE <b>E-5</b>	7. DATE OF RANK <b>23 Jan 70</b>																								
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Inarajan Village, Guam</b>			9. DATE OF BIRTH [REDACTED]																								
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>55 2 49 128</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB# 2 Agana Guam MI 96910</b>			c. DATE INDUCTED <b>NA</b>																								
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Transferred to USAR (See 16)</b>			b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Fort Hood, Texas</b>																										
TRANSFER OR DISCHARGE DATA	a. REASON AND AUTHORITY <b>Sec VIII Ch 5 AR 635-200 SPN 413 (See 30)</b>			d. EFFECTIVE DATE <b>20 Jan 71</b>	e. DATE OF ENTRY <b>18 Mar 68</b>																									
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>647th Maint Co Fort Hood, Texas FOURTH US ARMY</b>			13a. CHARACTER OF SERVICE <b>HONORABLE</b>		14. TYPE OF CERTIFICATE ISSUED <b>None</b>																								
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>Transferred to USAR Control Group(Reinf)USAAC St Louis, MO 63132</b>			15. REENLISTMENT CODE <b>RE-2</b>																										
	16. TERMINAL DATE OF RESERVE/UMT&S OBLIGATION <b>17 Mar 74</b>		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input checked="" type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER		b. TERM OF SERVICE (Years) <b>3</b>	c. DATE OF ENTRY <b>18 Mar 68</b>																								
18. PRIOR REGULAR ENLISTMENTS <b>None</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>PV1</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Guam Marine Barracks FPO SF 9663C</b>																										
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>Ipan Talofof Village Guam MI 96910</b>		22a. CREDITABLE FOR BASIC PAY PURPOSES		22. STATEMENT OF SERVICE																										
23a. SPECIALTY NUMBER & TITLE <b>31E20 Fld Radio Rpmn</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>720.281 Radio Rpmn</b>		<table border="1"> <thead> <tr> <th></th> <th>YEARS</th> <th>MONTHS</th> <th>DAYS</th> </tr> </thead> <tbody> <tr> <td>(1) NET SERVICE THIS PERIOD</td> <td>2</td> <td>10</td> <td>3</td> </tr> <tr> <td>(2) OTHER SERVICE</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>(3) TOTAL (Line (1) plus Line (2))</td> <td>2</td> <td>10</td> <td>3</td> </tr> <tr> <td colspan="4">b. TOTAL ACTIVE SERVICE</td> </tr> <tr> <td colspan="4">c. FOREIGN AND/OR SEA SERVICE <b>USARPAC</b></td> </tr> </tbody> </table>				YEARS	MONTHS	DAYS	(1) NET SERVICE THIS PERIOD	2	10	3	(2) OTHER SERVICE	0	0	0	(3) TOTAL (Line (1) plus Line (2))	2	10	3	b. TOTAL ACTIVE SERVICE				c. FOREIGN AND/OR SEA SERVICE <b>USARPAC</b>			
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b. TOTAL ACTIVE SERVICE																														
c. FOREIGN AND/OR SEA SERVICE <b>USARPAC</b>																														
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>National Defense Service Medal; Sharpshooter(Rifle);</b>																														
25. EDUCATION AND TRAINING COMPLETED <b>USATC/SigC/Ft Gordon, GA - Aviation Flt Cont Equip Rpmn Grs</b>																														
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) <b>None</b>		b. DAYS ACCRUED LEAVE PAID <b>None (See 30)</b>		27a. INSURANCE IN FORCE (INSL or USGL) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO																									
	28. VA CLAIM NUMBER <b>c. NA</b>		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE <b>\$15,000</b>		a. AMOUNT OF ALLOTMENT <b>NA</b>																									
c. MONTH ALLOTMENT DISCONTINUED <b>NA</b>																														
REMARKS	30. REMARKS <b>12 years school Blood Group: "A Pos" Item 11c: To enter or return to college, university or equivalent educational institution. Item 26b: Excess leave 11 days from 15Jul70 thru 25Jul70.</b>																													
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>1080 View Way Pacifica(San Mateo)CA 94044</b>			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Victor F Cruz</i>																										
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>MARY M. PURCELL, MAJ, WAC, Act Asst AG</b>			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Mary M Purcell</i>																										



OFFICE OF THE GOVERNOR  
GUAM

**AFFIDAVIT**

I, **VICTOR F. CRUZ**, being first duly sworn, deposes and sayeths:

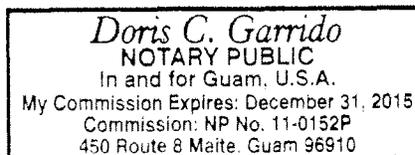
1. That I have read and reviewed the information contained in the attached Nomination Letter from the Governor of Guam.
2. That the matters contained in the Nomination Letter and all attachments thereto are true and correct.
3. That this affidavit is made for the purpose of complying with the requirements of 4 GCA §2103.5.

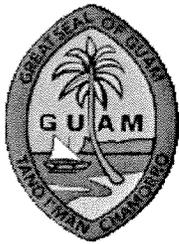
I declare under penalty of perjury that the foregoing is, to the best of my knowledge, true and correct.

\_\_\_\_\_  
**VICTOR F. CRUZ (SIGNATURE)**

SUBSCRIBED AND SWORN TO before me this 7<sup>th</sup> day of February,  
2013.

\_\_\_\_\_  
Notary Public





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



February 5, 2013

**SUBJECT: CRIMINAL HISTORY RECORD**

<b>NAME:</b>	<b>Victor Fernandez CRUZ</b>		
<b>DATE OF BIRTH:</b>	██████████	<b>FINGERPRINT #:</b>	<b>157-671</b>
○	<b>The individual has no record of arrest(s) in GPD files that are subject to Guam law and rules and regulations of the Department.</b>		

\*\*\*\*\*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: RCamacho**

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

The absence of an original GUAM POLICE seal invalidates this police clearance.  
 REVISED 07/12/11



# 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: VICTOR F CRUZ

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. CM0493-91
- 2. Criminal Case No.
- 3. Criminal Case No.
- 4. Criminal Case No.
- 5. Criminal Case No.

Criminal Record: Page of

### Civil Cases:

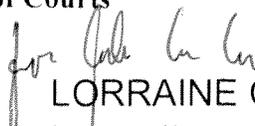
- A.  No Case Found
- B. 1. Civil Case No.
- 2. Civil Case No.
- 3. Civil Case No.
- 4. Civil Case No.
- 5. Civil Case No.

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: February 05, 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