

EDDIE BAZA CALVO
Governor



RAY TENORIO
Lieutenant Governor
2013 FEB 11 PM 2:59

Office of the Governor of Guam

FEB 08 2013

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

32-13-108
Office of the Speaker
Judith T. Won Pat, Ed. D.
Date 2/11/13
Time 2:45 PM
Received by [Signature]

RE: Board 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: Donald G. Taitano
POSITION: Member, Cockpit License Board
TERM LENGTH: One (1) year

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

Senseramente,


EDDIE BAZA CALVO

Enclosure

0108



EDDIE BAZA CALVO
Governor

RAY TENORIO
Lieutenant Governor

Office of the Governor of Guam

JAN 25 2013

Mr. Donald G. Taitano
P.O. Box 5113
Hagatna, Guam 96932

RE: Board Appointment

Dear Mr. Taitano:

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, Cockpit License Board

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: 40

3. Residential Address (NOT mailing address):

[REDACTED]

4. Email Address: dgt@dgtpacific.com

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

If yes, please explain:

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

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

If yes, please explain:

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

If yes, please explain:

[Handwritten Signature]
SIGNATURE

2/1/13
DATE



Appointment application

TODAY'S DATE: _____

POSITION APPLYING FOR:

- Director
 Deputy Director
 Boards/Commission
 Other _____

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

1. COCKPIT LICENSE BOARD

2. _____

3. _____

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

GENERAL INFORMATION

NAME: DONALD G. TAITANO

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

HOME PHONE: _____ **WORK PHONE:** _____ **CELL/PAGER:** _____

SOCIAL SECURITY NUMBER: _____

LICENSES:	TYPE	EXPIRATION DATE
INSURANCE _____	LIFE, HEALTH, ACCIDENT _____	JUNE 30, 2013 _____
SERVICE _____	BUSINESS GOV'T CONSULTING _____	JUNE 30, 2013 _____
_____	_____	_____

BACKGROUND INFORMATION

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

Government of Guam Appointment	Dates of Service
EXECUTIVE APPOINTMENT - STAFF ASSISTANT _____	1999-2001 _____
LEGISLATIVE APPOINTMENT - COMMITTEE ANALYST _____	2002-2003 _____
_____	_____
_____	_____

List all prior other government service excluding Government of Guam:

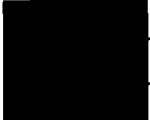
Other Government Appointment

Dates of Service

_____	_____
_____	_____
_____	_____
_____	_____

REFERENCES

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

NAME	ADDRESS	PHONE
1. <u>FRANKLIN P. ARRIOLA</u>	<u>WINDWARD HILLS, GUAM</u>	
2. <u>JOSHUA F. TENORIO</u>	<u>SINAJANA, GUAM</u>	
3. <u>FRANCISCO Q. TAITANO</u>	<u>NIMITZ HILL, GUAM</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>FDMS</u>	School Attended: <u>U. OF PORTLAND</u>	School Attended: _____
	Location: <u>PORTLAND, OR</u>	Location: _____
	Concentration: <u>MANAGEMENT</u>	Concentration: _____
	Degree: <u>BBA</u>	Degree: _____
	Attended From: <u>1989</u> to <u>1993</u>	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
Anti-Money Laundering Compliance for Insurance Producers, LIMRA International	2009
Willful Blindness – Anti-Money Laundering for Insurance Review, LIMRA International	2010
Know Your Customer – Anti-Money Laundering for Insurance Review, LIMRA International	2011
_____	_____
_____	_____

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:

Director, Guam Association of Insurance and Financial Advisors
Member, National Association of Insurance and Financial Advisors (Inactive)
Former Member, Program Advisory Board, Argosy University / Hawaii's School of Business & Information Technology

COMMUNITY/CIVIC INVOLVEMENT

List organizations, activities participated in, offices held:

Member, Guam Chamber of Commerce

PUBLICATIONS & PRESENTATIONS

Cont'd.

List published articles, papers delivered at professional meetings:

N/A

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.

N/A

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: ASSURED LIFE & PROPERTY, INC.	From: 2005	To: PRESENT
Address: 137 MURRAY BLVD., SUITE 206		<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time	
City: AGANA	State GU	Zip 96910	Average hours worked per week: 20-30
Name of Supervisor: JEAN S. TAITANO, PRESIDENT		Starting Salary: COMMISSION per POLICY	
Your Title: VICE PRESIDENT		Ending Salary: COMMISSION per POLICY	
Duties & Responsibilities:		<input checked="" type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other	
Overall management and administration of multi-line insurance agency. Provides insurance services for life insurance			
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		N/A	
2	Employer: DONALD G. TAITANO dba DGT CONSULTING	From: 2004	To: PRESENT
Address: P.O. BOX 5113		<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time	

Cont'd.

City: HAGATNA	State GU	Zip 96932	Average hours worked per week: 20-30
Name of Supervisor: N/A			Starting Salary: 40,000.00 per ANNUM
Your Title: PRINCIPAL CONSULTANT			Ending Salary: 72,000.00 per ANNUM
Duties & Responsibilities:			<input type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other
DGT leads a team of consultants associates and utilizes a network of top-notch industry professionals that are experts within their respective industries to provide first rate services for the clients we serve.			
Assists organizations to improve their performance, primarily through the analysis of existing organizational problems and development of plans for improvement.			
Provide organizational change management assistance, development of coaching skills, technology implementation, strategy development, or operational improvement services.			
May we contact your previous employer: <input checked="" type="radio"/> YES <input type="radio"/> NO			Reason(s) for Leaving: N/A
What did you NOT like about your job? N/A			
3	Employer: 27TH GUAM LEGISLATURE		From: 2002 To: 2003
Address: 155 HESSLER DRIVE			<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time
City: AGANA	State GU	Zip 96910	Average hours worked per week: 40+
Name of Supervisor: JOSHUA F. TENORIO			Starting Salary: 40,000.00 per ANNUM
Your Title: COMMITTEE ANALYST			Ending Salary: 40,000.00 per ANNUM
Duties & Responsibilities:			<input type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other
Committee on Judiciary & Transportation: Served at the pleasure of the Chairman			
Provided all support to Committee Director and Chairman for all legislative matters regarding Transportaion.			
Performed legislative research and analysis.			
Drafted legislation			
May we contact your previous employer: <input checked="" type="radio"/> YES <input type="radio"/> NO			Reason(s) for Leaving: CAREER ADVANCEMENT
What did you NOT like about your job? N/A			
4	Employer: OFFICE OF THE GOVERNOR		From: 1999 To: 2001
Address: RICARDO J. BORDALLO GOVERNOR'S COMPLEX			<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time
City: ADELUP	State GU	Zip 96910	Average hours worked per week: 40+

Cont'd.

Name of Supervisor: JOSHUA F. TENORIO	Starting Salary: 50,000.00 per ANNUM
Your Title: STAFF ASSISTANT	Ending Salary: 60,000.00 per ANNUM
Duties & Responsibilities:	<input type="radio"/> Resigned <input type="radio"/> Discharged <input checked="" type="radio"/> Other
Reported to the Office of the Chief of Staff (Deputy Chief of Staff).	
Provided support for all cabinet functions	
Assisted GAR in times of catastrophe	
May we contact your previous employer: <input checked="" type="radio"/> YES <input type="radio"/> NO	Reason(s) for Leaving: CHANGE OF ADMINISTRATION
What did you NOT like about your job? N/A	

5 Employer: PACSPORTS, LTD	From: 1996 To: 1998
Address:	<input checked="" type="radio"/> Full-Time <input type="radio"/> Part-Time
City: TAMUNING State GU Zip 96913	Average hours worked per week: 40+
Name of Supervisor: FRANKLIN P. ARRIOLA, GM	Starting Salary: 45,000.00 per ANNUM
Your Title: SALES & MARKETING MANAGER	Ending Salary: 45,000.00 per
Duties & Responsibilities:	<input type="radio"/> Resigned <input type="radio"/> Discharged <input type="radio"/> Other
Responsible for all sales & marketing programs.	
Markets included Guam, CNMI, Philippines, and military bases throughout Asia	
May we contact your previous employer: <input type="radio"/> YES <input checked="" type="radio"/> NO	Reason(s) for Leaving: EXECUTIVE APPOINTMENT FOR PUBLIC SERVICE
What did you NOT like about your job? N/A	

Explain any periods of unemployment longer than thirty days: _____

MANAGEMENT EXPERIENCE

A	Have you ever managed a Business, Department or an entire organization? <input type="radio"/> YES <input type="radio"/> NO If YES, did you report to a Board of Directors? <input type="radio"/> YES <input 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 type="radio"/> Deputy Director <input type="radio"/> Supervisor <input type="radio"/> Superintendent <input type="radio"/> Assistant General Manager <input type="radio"/> Manager <input checked="" 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 type="radio"/> 1+ – 3 years <input type="radio"/> 15+ – 20 years <input type="radio"/> 3+ – 5 years <input type="radio"/> 20+ and up <input checked="" 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

Cont'd.

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 checked="" type="radio"/> Under 25	<input type="radio"/> 201 – 300	<input type="radio"/> 501 and up
	<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 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 checked="" 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 checked="" type="radio"/> Facilitated <input type="radio"/> Directed <input type="radio"/> Implemented		
A	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 checked="" 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 type="checkbox"/> Chief Negotiator	<input checked="" type="checkbox"/> Advisor/Consultant
A	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 type="checkbox"/> Management <input type="checkbox"/> Board and/or Commission <input checked="" type="checkbox"/> Legislation (<i>includes lobbying process</i>)		

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 type="checkbox"/> Sponsor	<input type="checkbox"/> Development
		<input checked="" type="checkbox"/> Planning	<input type="checkbox"/> Design
		<input checked="" type="checkbox"/> Coordination	<input checked="" type="checkbox"/> Implementation

GRANTS

A	Have you been involved in applying, administering, awarding Grants? <input type="radio"/> YES <input checked="" type="radio"/> NO
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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	G	_____	WordPerfect	None
Excel	G	_____	Presentation	None
PowerPoint	G	_____	Quattro Pro	None
			Lotus	None

GENERAL

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

As a financial advisor and business|government consultant, I have made distinctive, lasting, and substantial improvement to the performance of organizations by assisting my clients in overcoming their difficult issues and serious challenges.

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

DGT CONSULTING. As a business|government consultant, I have the opportunity to work with experts from various industries providing solutions to my clients identifying more effective or efficient solutions to their challenges.

What do you feel are your outstanding strengths?

Various levels of private sector experience coupled with public service experience in all three (3) branches of governm

What do you feel are your primary weaknesses?

I have not learned everything needed or experience nearly enough to provide solutions to all problems brought before

What gives you the most satisfaction in your work?

With insurance, providing the financial assurance for families when an insured is approved for the coverages needed a affordable rate. With consulting, providing solutions for clients that gives them the competitive edge

What is your concept of success?

Accomplishing what I set out to do regardless whether its for business or family.

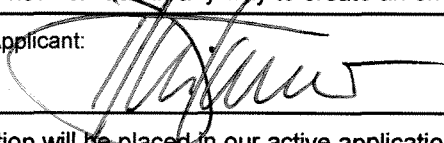
Cont'd.

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:

2-1-13

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: DONALD G. TAITANO

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:
ASSURED LIFE & PROPERTY, INC.

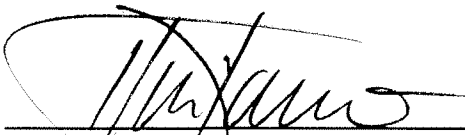
Type and amount of interest
SHAREHOLDER, 40%

DGT CONSULTING

SOLE PROPRIETOR, 100%

GLOBAL SEVEN (G7) ENTERPRISES, LLC

MEMBER, 49%


Signature (sign in ink)

2/1/13
Date



STATEMENT OF TAX LIABILITIES

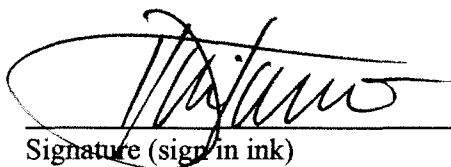
TO: Governor Eddie Baza Calvo
Ricardo J. Bordallo Governor's Complex
Adelup, Guam 96910

FROM: DONALD G. TAITANO

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
ASSURED LIFE & PROPERTY, INC.	
DGT CONSULTING	
GLOBAL SEVEN (G7) ENTERPRISES, LLC	


Signature (sign in ink)

2 / 1 / 13
Date

Cont'd.

Submit



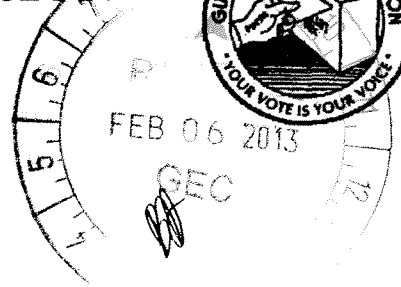
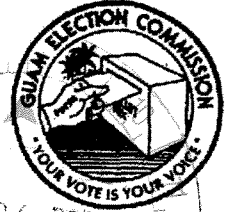
GUAM ELECTION COMMISSION

Kumision Eleksion Guåhan

P.O. Box BG • Hagåtña, Guam 96932

Tel: (671) 477-9791/2 • Fax: (671) 477-1895

E-Mail: vote@gec.guam.gov Website: www.gec.guam.gov



FINANCIAL DISCLOSURE ACT CHAPTER 13, TITLE 4, GUAM CODE ANNOTATED (GCA)

Name: DONALD G. TAITANO

Mailing Address: [REDACTED]

Name of Board or Commission: COCKPIT LICENSE BOARD

Term of Office: 1 YEAR

STATEMENT OF DISCLOSURE OF CONFLICTS OF INTEREST FOR GOVERNMENT BOARD OR COMMISSION MEMBER

Public Law 24-91, Section 13104.1 of Title 4, Guam Code Annotated, requires that notwithstanding any other provision of Public Law, all appointees to Boards and Commissions of the Government of Guam shall be required to disclose and submit a report containing only information where conflicts of interest or possible conflicts of interest exists at the time of appointment. Or as may be expected to exist during their tenure of service on the Board or Commission to which they have been appointed. For purposes of this Section, conflicts of interest shall be defined under the provisions of Section 15205 of Title 4, Guam Code Annotated. Please refer to said statute for further particulars.

Please answer the following:

1. Do you have any present conflicts of interest or expect any conflicts of interest to exist during your tenure of service on the Board or Commission in which you presently serve?

Yes No

2. If so, please provide full disclosure below.

I declare under penalty of perjury pursuant to the laws of Guam, that the above Statement of Disclosure of Conflicts of Interest is true and accurate pursuant to Section 13104.1, Title 4, Guam Code Annotated.



A handwritten signature in cursive script, appearing to read "M. Torres", is written over a horizontal line.

Signature of Board/Commission Member

2/1/13

Date



OFFICE OF THE GOVERNOR
GUAM

AFFIDAVIT

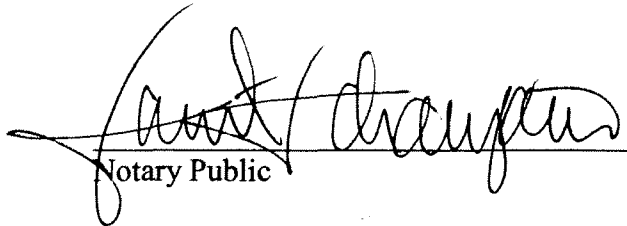
I, **DONALD G. TAITANO**, being first duly sworn, deposes and sayeths:

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.

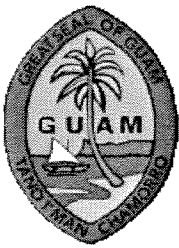
I declare under penalty of perjury that the foregoing is, to the best of my knowledge, true and correct.


DONALD G. TAITANO (SIGNATURE)

SUBSCRIBED AND SWORN TO before me this 1 day of February,
2013.


Notary Public

JANET J. CHAMPACO
NOTARY PUBLIC
In and for Guam, U.S.A.
My Commission Expires: **Feb. 22, 2016**
P.O. Box 3393 Hagatna, Guam 96932



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



February 1, 2013

SUBJECT: CRIMINAL HISTORY RECORD

NAME: Donald G. TAITANO			
DATE OF BIRTH:	[REDACTED]	FINGERPRINT #:	101-223
[REDACTED]	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 : K. VALENZUELA

[Handwritten signature]

[Handwritten signature]

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

**FRED E. BORDALLO, JR.
 CHIEF OF POLICE**



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: DONALD G TAITANO

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.

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: 01/28/13

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