

EDDIE BAZA CALVO
Governor

RAY TENORIO

Lieutenant Governor

Office of the Governor Of Guam.

OCT 18 2016

33-16-2109

Office of the Speaker Judith T. Won Pat, Ed.D

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

RE: Board Appointment

Dear Madame Speaker:

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:

Michael G. Topasna

POSITION:

Member, Civil Service Commission

(To replace Commissioner Daniel Leon Guerrero,

Received By: _

whose term has expired.)

TERM LENGTH:

Six (6) years

TERM SERVED:

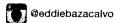
October 1, 2015 to September 30, 2021

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

Senseramente,

EDDIE BAZA CALVO

2109









EDDIE BAZA CALVO
Governor

RAY TENORIO
Lieutenant Governor

Office of the Governor Of Guam.

OCT 1 7 2016

Mr. Michael G. Topasna

Dear Mr. Topasna:

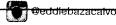
Thank you for your commitment to serve the people of Guam. The Calvo-Tenorio administration continues to face unprecedented challenges, both near and long-term. The task ahead of us will require the collective efforts of the best minds who will have the courage to make tough decisions for the good of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

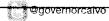
Member, Civil Service Commission (To replace Commissioner Daniel Leon Guerrero, whose term expired) Term Length: Six (6) years Term Served: October 1, 2015 to September 30, 2021

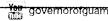
This appointment is subject to the advice and consent of *I Liheslaturan Guåhan*. Please contact the Office of the Governor at 472-8931 should you have any questions.

Senseramente,

EDDIE BAZA CALVO









Boards & Commissions Nomination Information

The following information is required for submission to the Speaker of *I Liheslaturan Guahan* in accordance with Title 4, Guam Code Annotated Section 2103.5 and Section 13104.1:

Topasn	nt	State E-mail	Michael Address		M.I. G Apartment	Date /Unit #
Appointme	ent Civil S		Address		Apartment	/Unit #
Appointme	nt Civil S		Address			
Appointme	ent Civil S	E-mail /	Address		·	
Appointme	nt Civil S	•••	1			
		Service Comm	nission			
of the Unit	ed	YES X NO	If no, are you the U.S.?	authorized	to work in	YES NO
ohn F. Ke	nnedy		City/State	Tamun	ing, Gua	ım
985 T	1990	Did you graduate?	YES X	NO 🗌	Degree	Diploma
Iniversity	of Guam		City/State	Mangil	ao, Guar	m
g 2013 T	Presen	Did you at graduate?	YES 🗌	NO 🌋	Degree	
) 	85 To	hn F. Kennedy 85 To 1990 niversity of Guam	hn F. Kennedy 85 To 1990 Did you graduate? niversity of Guam Did you	hn F. Kennedy 85 To 1990 Did you graduate? Niversity of Guam City/State City/State	hn F. Kennedy City/State Tamun 85 To 1990 Did you graduate? NO Did you Gity/State Mangil	hn F. Kennedy City/State Tamuning, Gua To 1990 Did you graduate? Pegree City/State Mangilao, Guar Did you Did you No Degree

Doc. No. 33GL-16-2109

Graduate				_					
School	and the second s			City	/State				
From		То	Did you graduate?	YI	ES 🗌	NO 🗌	Degree		
Other Degree				City	/State				
From		То	Did you graduate?	YI	ES []	NO []	Degree		
EMPLOYMEN	IT HISTOI	RY							
(1) Present Employer		dent			Position		<u> </u>		
Address					Dates Held				
(2) Previous Employer	De	CA (0	Commissary	')	Position	Sales Store Check			
Address	And	Andersen AFB			Dates Held	2012	2 - 2013		
(3) Previous Employer	Wo	unde	ed Warrior B	N	Position	Squ	Squad Leader		
Address	Fort	Cars	son, Colorado		Dates Held	2008	2008 - 2010		
(4) Previous Employer	Col	orad	o ANG		Position	Tec	hnician		
Address	Den	ver, (Colorado		Dates Held	2007	7 - 2008		
(5) Previous Employer					Position				
Address		····		47-22-20-20-20-20-20-20-20-20-20-20-20-20-	Dates Held				
PRIOR GOVE	RNMEN	T OF G	UAM SERVICE						
Agency					Phone	•			
Address		· · · · · · · · · · · · · · · · · · ·							
lob Title			Fron	n:	То				

Agency			Phone		
Address					
Job Title		From:		То	
PRIOR GOVER	NMENT SERVICE (E)	KCLUDING GOV	ERNMEN	T OF GUAM)	
Agency	DeCA Commissary		Phone 6	671-366-2264	
Address Anderse	n AFB				
Job Title Sales S	tore Checker	From: 04-2	2012	T∘11-2013	· #####
Agency			Phone		
Address					
Job Title		From:		То	
TRAINING					
	On-the-Job Training:			Date	
					•
					nnemen en e

AWARDS		231			
List all educational,	professional, civic awards	, and recognition for	oublic servi	ce:	, , , , , , , , , , , , , , , , , , ,
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(1980) 1980)			***************************************		
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PROFESSIO	NAL II	IVOLVEMENT							
List involvement	List involvement on a local/national/international level, list organization, activities participated in, offices held:								
		Squad Leader Wo	unded Warrid	or Trar	sition BI	٧			
		Knights of Co	olumbus, Cou	ncil 13	373				
		American Marketing	Association, L	Inivers	ity of Gua	am			
				20 C C C M C N C 1 M C 1		· · · · · · · · · · · · · · · · · · ·			
COMMUNITY	/ / CIV	C INVOLVEMENT							
List organization	ns, activi	ties, participated in, offices held	d						
PUBLICATIO	NS AN	ID PRESENTATIONS							
		es, papers delivered at professi	ional meetings, et	c.:					
				the feet of the second	anning de de viden and de verde verde de alle alle anne en en en en	and the second s			
	,,								
						····			
MII ITADV SE	:DVIICE	(PLEASE ATTACH FORM D	ND 2441						
Branch		National Guard	ID-214)	From	1995	То	2010		
Rank at Discharç		SGT				1	Honorable		
	SGT Type of Discharge Honorab				попогаріе				

Rev. 04-2013_v.2.scm All other versions obsolete 4 | P a g e

OTHER INFORMATION		
(1) Have you ever been found guilty of a felony in any court, whether within or without the United States?	YES []	NO 🔳
If so, please specify in detail:		
Address of the court:		
Date of Conviction:		
Specific infraction committed:		
(2) Have you ever been declared mentally incompetent by any court, whether within or without the United States?	YES 🗌	NO 🔳
If so, please specify in detail the reasons and facts related to such declaration:		
]
(3) Have you ever been found not guilty or not punishable in any criminal proceedings by reason of insanity?	YES 🗌	NO 🔳
(4) Have you ever been confined to a mental institution for any reason?	YES 🗌	NO 🔳
If so, please specify in why the appointing authority believes you that you are not suffering f affliction:	rom any menta	l illness or

All other versions obsolete 5 | P a g e



Statement of Financial Interests

(Required by 4 G.C.A. § 13104.1)

Governor Eddie Baza Calvo

Adelup, Guam 96910

Ricardo J. Bordallo Governor's Complex

Michael Gofigan Topasna

TO:

FROM:

Rev. 04-2013_v.2.scm

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						
_							

All other versions obsolete

6|Page

AFFIDAVIT / DECLARATION UNDER PENALTY OF PERJURY

I, the undersigned, do hereby depose and say that: (1) 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 and that I am competent to testify to said matters; and (3) that this Declaration 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 (4 G.C.A. Section 4308) that the foregoing is true and correct.

Signature

Michael G. Topasna

Date

1 SEP 2014

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All other versions obsolete

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SUPERIOR COURT OF GUAM

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

Telephone (671) 475-3370/475-3449 Fax (671) 472-2856

DANIELLE T. ROSETEClerk of Court

Name:	MICHAEL GOFIGAN TOPASNA	
SS#:	ID#	

CERTIFICATE OF SEARCH

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

Crimin	Criminal Cases:			Civil Cases:		
A.	\bowtie	No Case Found	A.	[]	No Case Found	
B.	1.	Criminal Case No. CM0692-89	B.	1.	Civil Case No.	
	2.	Criminal Case No.		2.	Civil Case No.	
	3.	Criminal Case No.		3.	Civil Case No.	
	4.	Criminal Case No.		4.	Civil Case No.	
	5.	Criminal Case No.		5.	Civil Case No.	
	Crimina	al Record: Page 1 of 1		Civil R	ecord: Page 1 of 1	

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, Hagatña, 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: 08/24/2016

The absence of an original Court Seal invalidates this document

DANIELLE T. ROSETE

Clerk of Court

BY: Diego, John J. Deputy Clerk

Prepared By: JJD



Government of Guam GUAM POLICE DEPARTMENT RECORDS & IDENTIFICATION SECTION

GUAM

P.O. Box 23909 Guam Main Facility, Guam 96921

August 25, 2016

SUBJECT: CRIMINAL HISTORY RECORD

NAME:	Michael C	Sofigan TOPASNA		
DATE OF	BIRTH:		FINGERPRINT#:	
	The indivious to Community	dual has no record of Guam law and rules an	criminal conviction(s) in GPD files the regulations of the Department.	ıat are

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.



By Direction: angela

The absence of an original GUAM POLICE

Chief of Police

IDENTIFICATION PURPOSES SAFEGUARI			RENDER	FOR	M VOI
CERTIFICATE OF RELEASE OR I This Report Contains Information Subject					
	MPONENT AND BRANCH		LSECURIT	Y NUN	IBER
4a. GRADE, RATE OR RANK b. PAY GRADE	6. RESERVE C (YYYYMMDD)			TION	DATE
7a. PLACE OF ENTRY INTO ACTIVE DUTY b. HOWE OF	RECORD AT TIME OF ENTRY (City and	d state, or co	mplete addre	ss if kno	own)
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND COARNG ELE JFHQ FWD2 NG	b. STATION WHERE SEPARATED FORT CARSON, CO 80913-2	965			
9. COMMAND TO WHICH TRANSFERRED USAR CON GP (RETRES) 1 RESERVE WAY, ST LOUIS,	MO 63132	ı	OVERAGE NT: \$ 400		NONE .00
11. PRIMARY SPECIALTY (List number, title and years and months in	12. RECORD OF SERVICE	YEAR(S)	MONTH(S)	DA	Y(S)
specialty. List additional specialty numbers and titles involving periods of	a. DATE ENTERED AD THIS PERIOD	2008	03	2	8
one or more years.) 21K2O PLUMBER - 2 YRS 1 MOS//NOTHING FOLLOWS	b. SEPARATION DATE THIS PERIOD	2010	05	0)9
21K20 PBOMBER - 2 1K5 1 MOS//NOTHING POLILOWS	c. NET ACTIVE SERVICE THIS PERIOD	0002	01		2
	d. TOTAL PRIOR ACTIVE SERVICE	0002	02		.6
	e. TOTAL PRIOR INACTIVE SERVICE	0008	08	100)5
	f. FOREIGN SERVICE	0000	11	Sequential (1))7)0
	g. SEA SERVICE h. INITIAL ENTRY TRAINING	0000	00	1000	0
	i. EFFECTIVE DATE OF PAY GRADE	2007	08		9
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN	14. MILITARY EDUCATION (Course tit	le numbero	fweeks and r	nonth a	nd
SERVICE MEDAL (2ND AWARD)//ARMY SERVICE RIBBON//OVERSEAS SERVICE RIBBON//ARMY RESERVE COMPONENT OVERSEAS//CONT IN BLOCK 18					
15a. COMMISSIONED THROUGH SERVICE ACADEMY			YES	Х	NO
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)			YES	Х	NO
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If Y	es, years of commitment: 0)		YES	Х	NO
16. DAYS ACCRUED LEAVE 17. MEMBER WAS PROVIDED COMP	LETE DENTAL EXAMINATION AND A			YES	NO
		–		1111	X
18. REMARKS ////////////////////////////////////	0427-20060403//MEMBER HA RED LIST ////CONT FROM LL W/ M DEVICE//COMBAT A	S COMPI BLOCK : CTION F	ÆTED FI 3: TRAI	RST NING	} ?R
The information contained herein is subject to computer matching within the Department purposes and to determine eligibility for, and/or continued compliance with, the requires	ements of a Federal benefit program.			for veri	ification
19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code) PO BOX 21753 GMF	b. NEAREST RELATIVE (Name and ac JOSE T. TOPASNA HSE #3 TENORIO LANE KAI		de ZIP Code)		
BARRIGADA GUAM 96921	DEDEDO GUAM 96929				
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality)	GU OFFICE OF VETERA			S	NO
 MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE (WASHINGTON, DC) 	OF THE DEPARTMENT OF VETERAN	IS AFFAIR	S X YE	s	NO
21.a. MEMBER SIGNATURE ESIGNED BY: TOPASNA.MICH (YYYYMMDD) ESIGNED BY	AUTHORIZED TO SIGN (Typed name, g.	rade, title, sid		DATE	<u> </u>
ALL.GOFIGAN.1184856847 20100419 JAMERSON.C	: AROLYN.DENISE.110911638		20	YYYYM 1004	
SPECIAL ADDITIONAL INFORMATION			~·· ~ I		
22 TYPE OF SEPARATION	• (i oi use by autiorized agencies only)				

23. TYPE OF SEPARATION RETIREMENT	24. CHARACTER OF SERVICE HONORABLE	E (Include upgrades)
25. SEPARATION AUTHORITY AR 635-40, CHAP 4	26. SEPARATION CODE SEK	27. REENTRY CODE 4R
28. NARRATIVE REASON FOR SEPARATION DISABILITY, TEMPORARY (ENHANCED)		
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) NONE		30. MEMBER REQUESTS COPY 4 (Initials) MGT

DD FORM 214, AUG 2009

PREVIOUS EDITION IS OBSOLETE.

MEMBER - 4