1. Fullname TAINATONGO, KAYARA JT		2. Date of Birth		3.Employee ID 60427	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	J OF THE FOLLOWIN	IG ACTION A	FFECTING	C YOUR EMPLOYMEN	IT
5.Nature of Action TERMINATION - EXP OF APPT / CONTR	1	6.Effective Date 31 Oct 2025		7.Legal Authority RULE13.101	
FROM	Descr	ription		то	
Position CUSTOMER SERVICE REP Pay Grade HX 32355 Step Rate per Hour 15.56 Department DEPARTMENT OF LABOR Section/Division DOL - DEPARTMENT OF LABOR FTE PUA-006	9. Pay Gra Salary Ra	11. Div./Section		on	
Next Increment:	Exp/Separation Date			_	5111/113001-101-24-
Action No.: A-325456 Work Schedule: FULL-TIME	PMIS Action Date: Request ID: DOA	10-13-2025 A-HR-162256	,1	JON: 2400-24-10:	2
Retirement Type: DC - DEFINED CONT	FRIBUTION DEDUCTION	ON		Personnel Jacket No	210602
1/ DEMARKS (continue in item 21 if neces					

14.REMARKS (continue in item 21, if necessary)

TERMINATION OF TEMPORARY APPOINTMENT.

K-

ESIGN-005-D10202025

2. Date of Birth 3.Employee ID 4.Date Requested

SANCHEZ, GIANA LYN F	XX XXX XXXX	27547	7 20	Oct 2025	
THIS IS TO NOTIFY YOU O	F THE FOLLOWIN	IG ACTION AFFE	CTING YOUR EI	MPLOYMENT	
5.Nature of Action LIMITED TERM APPOINTMENT	6.Effectiv 23 Oc	re Date t 2025	7.Legal A	uthority 4.603	
FROM	Desci	ription		то	
Pay Grade Salary Per Annum O Step Rate per Hour O Department Section/Division FTE	8. Positio 9. Pay Gra Salary Ra 10. Depar 11. Div./Se	n Title	Pay Grade JX Step 01 Department		IT RESEAR:
Action No.: A-326026 PN	p/Separation Date: equest ID: DO/	10-15-2025	0400001	n No.: 6111001- 040026001	100-26-
Retirement Type: DB 1.75 - DEFINED BEN	IEFIT 1.75		Personne	el Jacket No.:	21566

14.REMARKS (continue in item 21, if necessary)

1. Fullname

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. PURSUANT TO RULE 4.603 (A), OF THE PERSONNEL RULES AND REGULATIONS, THIS APPOINTMENT IS NOT TO EXCEED ONE (I) YEAR FROM THE EFFECTIVE DATE ABOVE.

K. L

ESIGN-005-D10202025

1. Fuliname COMODA, WYLIE J		2. Date of Birth		3.Employee ID 63195	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	J OF THE FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action SALARY INCREMENT		6.Effective Date 20 Oct 2025		7.Legal Authority RULE 10.008	
FROM	Descr	iption		то	
Position SAFETY INSPECTOR I Pay Grade HX 32355 Step O1 15.56 Department DEPARTMENT OF PUBLIC WORKS Section/Division DPW - DIRECTOR'S OFFICE FTE 4085	8. Position 9. Pay Gra Salary Rat 10. Depart 11. Div./Se 12. FTE	nde/Step te tment	Pay Gr. HX Step 02 Depart DEPAI	Salary 33581 Rate 16.14	PRKS
Next Increment: Action No.: A-326040 Work Schedule: FULL-TIME	Exp/Separation Date: PMIS Action Date: Request ID: DOA	10-14-202		Bdgt Accn No.: 6 208 1000 207 JON:	5111001 / 6113001 25
Retirement Type: DC - DEFINED CONT	TRIBUTION DEDUCTION	NC	5	Personnel Jacket No	5.: 331808

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: 10/20/2024 TO 10/19/2025. (S)

K. L

ESIGN-005-D10202025

1. Fullname		2. Date of Birth	3.Employee ID	4.Date Requested	
HERRERA, EWALANI MARIE E		XX XXX XXXX	37611	20 Oct 2025	
THIS IS TO NOTIFY YO	U OF THE FOLLOWIN	G ACTION AFFECTI	NG YOUR EMPLOYM	ENT	
5.Nature of Action	6.Effectiv	e Date	7.Legal Authority		
TERMINATION - EXP OF APPT / CONTR	RACT 17 Oc	t 2025	RULE13.101		
FROM	Desc	Description			
Program Coordinator II	8. Positio	n Title	tion		
Pay Grade————————————————————————————————————	9. Pay Gra Salary Ra	ade/Steb	Grade——Salary— 0	29	
Step ————————————————————————————————————		Step	0		
DEPARTMENT OF LABOR	10. Depar	tment			
Section/Division DOL - DIRECTOR'S OFFICE	11. Div./Se	ection			
PTE 0107	12. FTE	FTE-			
Next Increment:	Exp/Separation Date:	10-17-2025	Bdgt Accn No.: 2417108	6111/113001-101-25-	
Action No.: A-326157 Work Schedule: FULL-TIME	Request ID: DO	A-HR-208669	JON: 2417-25-1	08	
Retirement Type: DC - DEFINED CON	TRIBUTION DEDUCTI	ON	Personnel Jacket	No.: 17648	
· · · · · · · · · · · · · · · · · · ·					

14.REMARKS (continue in item 21, if necessary)

EXPIRATION OF TEMPORARY APPOINTMENT.

K.L.

ESIGN-005-D10202025

1. Fullname		2. Date of Birth	3.Employee ID	4.Date Requested
ONEDERA, SOLLIE T		XX XXX XXXX	4159	20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	G ACTION AFFECTIN	NG YOUR EMPLOYM	ENT
5.Nature of Action	6.Effectiv	e Date	7.Legal Authority	
RETIREMENT SERVICE	17 Oct	2025	4GCA CH8	
FROM	Descr	iption	ТО	
Position———————————————————————————————————	8. Position	n Title Posit	ion	
Pay Grade————————————————————————————————————	9. Pay Gra Salary Ra	de/steb	Srade——Salary— 0	
Rate per Hour 39.81		Step-	Rate	
DEPARTMENT OF YOUTH AFFAIRS	10. Depart	tment	rtment-	
Section/Division DYA - YOUTH CORRECTION	11. Div./Se	ction	on/Division————	
506	12. FTE	FTE		-
	Exp/Separation Date PMIS Action Date:	: 10-17-2025 10-13-2025	Bdgt Accn No.: 2012001	6111/113001-100-26-
Action No.: A-325983 Work Schedule: FULL-TIME	Request ID: DOA	A-HR-667046	JON: 20122600	וי
Retirement Type: NON BASE - DEFINE	D BENEFIT		Personnel Jacket	No.: 19905086

14.REMARKS (continue in item 21, if necessary)

LUMP SUM PAYMENT IS AUTHORIZED AND WILL BE MADE FOR ANNUAL LEAVE UP TO 320 HOURS. PURSUANT TO 4 GCA, 2108 AND RULE 4.502, CHAPTER 4 OF THE PERSONNEL RULES AND REGULATIONS, YOU MAY BE CONSIDERED FOR RE-EMPLOYMENT FOR THE CLASS OF POSITION IN WHICH YOU LAST HAD A PERMANENT APPOINTMENT. WITHIN FOUR (4) YEARS FROM THE EFFECTIVE DATE OF SEPARATION, YOU MAY CONTACT THE APPOINTING AUTHORITY OF YOUR FORMER DEPARTMENT FOR CONSIDERATION. EMPLOYEES MUST PASS DRUG TESTING PRIOR TO RE-EMPLOYMENT. YOU MAY ALSO APPLY FOR THE POSITION IF IT SHOULD BE ANNOUNCED.

K.L

ESIGN-005-D10202025

1. Fullname PANGELINAN, ANTHONY J.C.		2. Date of Birth		3.Employee ID 10000431	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION	AFFECTING	G YOUR EMPLOYMEN	IT	
5.Nature of Action TEMPORARY APPOINTMENT		6.Effective Date 15 Oct 2025		7.Legal Authority RULE 4.603(B)		
FROM	Descr	ription		то		
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department Section/Division FTE	9. Pay Gra Salary Rad	Description 8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section		Position COMPUTER OPERATOR I Pay Grade HX 32355 Step Rate 15.56 Department OFFICE OF TECHNOLOGY Section/Division OFFICE OF TECHNOLOGY FTE 21090		
Action No.: A-326160 Exp/Separation Date: PMIS Action Date: 10 Work Schedule: Request ID: DOA-HF			5	Bdgt Accn No.: 6 2100001 JON: 210026001	511*001-100-26-	
Retirement Type: DC - DEFINED CONTRIB	UTION DEDUCTION	ON		Personnel Jacket No	D.: 19910934	

14.REMARKS (continue in item 21, if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS PURSUANT TO 4 GCA SECTION 4102 (A) (6) AND 4103 (E), THIS APPOINTMENT IS NOT TO EXCEED 120 WORKING DAYS OR 960 HOURS WHICHEVER COMES FIRST.

K. L

ESIGN-005-D10202025

1. Fullname PANGELINAN, ANTHONY J.C.			2. Date of Birth		3.Employee ID 10000431	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE F	OLLOWIN	G ACTION	AFFECTING	G YOUR EMPLOYMEN	IT
5.Nature of Action TERMINATION - EXP OF APPT / CONTRA		6.Effective			7.Legal Authority RULE13.101	2
FROM		Descri	ption		то	
Position— COMPUTER OPERATOR I Pay Grade— HX 32355 Step— 01 15.56 Department— OFFICE OF TECHNOLOGY Section/Division— OFFICE OF TECHNOLOGY FTE— 21090		8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		rade————————————————————————————————————		
PMIS Action		on Date:	: 10-14- 10-17-202 -HR-08424	25	Bdgt Accn No.: 6 2100001 JON: 210024001	511*001-100-26-
Work Schedule: Retirement Type: DC - DEFINED CONTI	RIBUTION	DEDUCTIO	DN		Personnel Jacket No	э.: 19910934

14.REMARKS (continue in item 21,if necessary)

EXPIRATION OF LIMITED TERM APPOINTMENT.

K.L

ESIGN-005-D10202025

1. Fullname EATA, FRITZI JOY YPARRAGUIRRE		2. Date of Birth		3.Employee ID 10002420	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU O	F THE FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	ir	
5.Nature of Action PROBATIONAL APPOINTMENT		6.Effective Date 13 Oct 2025		7.Legal Authority RULE4.602		
FROM	Descr	Description		то		
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department Section/Division FTE	9. Pay Gra Salary Rad	8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		Position— ADMINISTRATIVE ASSISTANT Pay Grade— JX 37913 Step— 01 18.23 Department— GWSA - GUAM SOLID WASTE AUTHORITY Section/Division— GSWA - GUAM SOLID WASTE AUTHORITY FTE— 5376		
PN	p/Separation Date: Property of the property o	10-15-202		Bdgt Accn No.: 6 JON: 6111001 416		

14.REMARKS (continue in item 21, if necessary)

DC - DEFINED CONTRIBUTION DEDUCTION

Retirement Type:

APPOINTMENT IS SUBJECT TO COMPLETION OF A SIX (6) MONTH INITIAL PROBATIONARY PERIOD. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/13/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. THIS ACTION IS BEING PROCESSED IAW WITH INFORMATION PROVIDED AND CERTIFIED BY THE GUAM SOLID WASTE AUTHORITY (GSWA). ALL CLASSIFICATION AND RECRUITMENT PROCEDURES WERE CONDUCTED SOLELY BY THE GSWA AND NOT THE DEPARTMENT OF ADMINISTRATION. INFORMATION CONTAINED IN THIS NOTIFICATION OF PERSONNEL ACTION HAS NOT BEEN VALIDATED AND IS BEING PROCESSED SOLELY FOR PAYROLL PURPOSES.

K-

Personnel Jacket No.:

19920266

GOVERNMENT OF GUAM^{HR Division} AGANA, GUAM NOTIFICATION OF PERSONNEL ACTION

1. Fullname LUJAN, JUDILYN B			Birth XXX	3.Employee ID 59918	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY	YOU OF THE FOLLOWII	NG ACTION	AFFECTIN	G YOUR EMPLOYME	ENT
5.Nature of Action LIMITED TERM APPOINTMENT FROM		6.Effective Date 13 Oct 2025 Description		7.Legal Authority RULE 4.603	
				то	
Pay Grade—Salary Per Annum— O Step—Rate per Hour— O Department—Section/Division—FTE—FTE—	8. Position 9. Pay Gr Salary Ra 10. Depair 11. Div./Sa 12. FTE	ade/Step nte rtment	Pay Gi HX Step— 01 Depart GSW/	Rate————————————————————————————————————	TE AUTHORITY
Action No.: A-326057 Work Schedule: FULL-TIME	Exp/Separation Date: PMIS Action Date: Request ID: DO	10-14-202	25	Bdgt Accn No.: JON: 6111001 410	6112001 416 26 6 26 9910201
Retirement Type: DC - DEFINED C	ONTRIBUTION DEDUCT	ION		Personnel Jacket i	No.: 125055

14.REMARKS (continue in item 21,if necessary)

PURSUANT TO RULE 4.603 (A), OF THE PERSONNEL RULES AND REGULATIONS, THIS APPOINTMENT IS NOT TO EXCEED ONE (I) YEAR FROM THE EFFECTIVE DATE ABOVE. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/13/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. FOR ANNUAL LEAVE RATE OF ACCUMULATION PURPOSES, AND PURSUANT TO SECTION 4109 (A) OF THE GOVERNMENT CODE OF GUAM AND RULE 8.104 OF THE PERSONNEL RULES AND REGULATIONS, CREDITABLE GOVERNMENT OF GUAM SERVICE IS HEREBY FURNISHED MAYORS OFFICE: 4 YEARS, 4 MONTHS, 25 DAYS THIS ACTION IS BEING PROCESSED IAW WITH INFORMATION PROVIDED AND CERTIFIED BY THE GUAM SOLID WASTE AUTHORITY (GSWA). ALL CLASSIFICATION AND RECRUITMENT PROCEDURES WERE CONDUCTED SOLELY BY THE GSWA AND NOT THE DEPARTMENT OF ADMINISTRATION. INFORMATION CONTAINED IN THIS NOTIFICATION OF PERSONNEL ACTION HAS NOT BEEN VALIDATED AND IS BEING PROCESSED SOLELY FOR PAYROLL PURPOSES.

GOVERNMENT OF GUAM **HR Division AGANA, GUAM**

NOTIFICATION OF PERSONNEL ACTION

1. Fullname			2. Date of Birth		3.Employee ID	4.Date Requested
MAYO, CHARLENE D			XX XXX XX	XXX	10000395	20 Oct 2025
THIS IS TO NOTIFY YO	U OF THE	FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYME	NT
5.Nature of Action	0	6.Effective	e Date		7.Legal Authority	
PROBATIONAL APPOINTMENT	13 0		13 Oct 2025 RULE4.602			
FROM	=	Descri	iption		то	
Position Salary Per Annum O Rate per Hour O		8. Position	n Title	CLAIN	MS SPECIALIST III	
		9. Pay Grade/Step Salary Rate		Pay Gi HX		
		п		01	15.56	
—Department—		10. Depart	ment	DEPA	RTMENT OF PUBLIC H	EALTH & SOCIAL SE
Section/Division—		11. Div./Sed	ction	Section/Division PHSS - BUREAU OF HEALTH CARE FINA)
FTE		12. FTE		6982		
· · · · · · · · · · · · · · · · · · ·		ration Date ion Date:			Bdgt Accn No.:	611*001-101-25-
		ID: DOA-HR-679188			JON: 1723-25-10	ח
Retirement Type: DC - DEFINED CON	TRIBUTION	N DEDUCTIO	ON		Personnel Jacket I	No.: 19910788

14.REMARKS (continue in item 21, if necessary)

APPOINTMENT IS SUBJECT TO COMPLETION OF A SIX (6) MONTH INITIAL PROBATIONARY PERIOD. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/13/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. FOR ANNUAL LEAVE RATE OF ACCUMULATION PURPOSES, AND PURSUANT TO SECTION 4109 (A) OF THE GOVERNMENT CODE OF GUAM AND RULE 8.104 OF THE PERSONNEL RULES AND REGULATIONS, CREDITABLE GOVERNMENT OF GUAM SERVICE IS HEREBY FURNISHED Cham.Land Trust: 2 YEARS 2 MONTHS 29 DAYS SELECTED FROM CERTIFICATION OF ELIGIBLES CI25-308; DATED 08/14/2025.

K. W

ESIGN-005-D10202025

1. Fuliname QUINATA, LAZARO T.		2. Date of Birth XX XXX XXXX		3.Employee ID 10002370	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	J OF THE FOLLOWII	NG ACTION	AFFECTING	G YOUR EMPLOYME	NT	
5.Nature of Action PROBATIONAL APPOINTMENT		6.Effective Date 13 Oct 2025		7.Legal Authority RULE4.602		
FROM	Desc	ription		то		
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department Section/Division FTE	9. Pay Gr Salary Ra	8. Position Title 9. Pay Grade/Step Salary Rate Pay G MX Step 01 10. Department Depar DEPA 11. Div./Section Positi PROC Pay G MX Step 01 Depar DEPA Section PHSS		23.91 ARTMENT OF PUBLIC HEALTH & SOCIAL SE ion/Division— SS - FOOD STAMPS		
Next Increment: Action No.: A-325647 Work Schedule:	Exp/Separation Date: PMIS Action Date: Request ID: DO	10-14-20		Bdgt Accn No.: 6***001-101-25-172910 JON: 1729-25-101)1	
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCT	ION		Personnel Jacket N	o.: 19920265	

14.REMARKS (continue in item 21,if necessary)

APPOINTMENT IS SUBJECT TO COMPLETION OF A SIX (6) MONTH INITIAL PROBATIONARY PERIOD. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/13/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. SELECTED FROM CERTIFICATION OF ELIGIBLES C125-65SS DATED: 08/01/2025.

K.L

ESIGN-005-D10202025

1. Fuliname PANGELINAN, BROOKE ASHLEY		2. Date of Birth		3.Employee ID 10002362	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF TH	E FOLLOWIN	IG ACTION	AFFECTIN	G YOUR EMPLOYMEN	iT .
5.Nature of Action UNCLASSIFIED APPOINTMENT		6.Effective Date 13 Oct 2025		7.Legal Authority 4GCA4102A(6)	
FROM	Desci	ription		ТО	
Pay Grade Salary Per Annum O Step Rate per Hour O Department Section/Division		9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section CARECON Pay Grade/Step NX Step 01 Department GUAM Section GUAM		RECOORDINATOR Grade Salary 54918 PRAte 26.4 PARTMENT AM BEHAVIORAL HEALTH AND WELLNESS C Stion/Division AM BEHAVIORAL HEALTH AND WELLNESS C	
Action No.: A-325584 PMIS A	paration Date: st ID: DOA	10-14-20		Bdgt Accn No.: 6 2300024 JON: 25-2300024	5111/113001-602-25- 4 - 111/113
Retirement Type: DC - DEFINED CONTRIBUTION	ON DEDUCTI	ON		Personnel Jacket No	o.: 19920264

14.REMARKS (continue in item 21,if necessary)

EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/13/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. PRIOR GOVERNMENT OF GUAM SERVICE WILL BE CREDITED UPON RECEIPT OF OFFICIAL PERSONNEL FILES FROM UOG.

K. W

ESIGN-005-D10202025

1. Fullname ESPINAL-PACHECO, SHANELLE OLLANO		2. Date of Birth XX XXX XXXX		3.Employee ID 10000596	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU O	F THE FOLLOWIN	G ACTION A	FFECTING	G YOUR EMPLOYME	NT
5.Nature of Action PROBATIONAL APPOINTMENT		6.Effective Date 13 Oct 2025		7.Legal Authority RULE4.602	
FROM	Descr	iption		то	
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department	9. Pay Gra Salary Rat	de/Step te	Pay Gr. FL21 Step 01 Depart DEPAI		
	11. Div./Se	ction	Section/Division———————————————————————————————————		7.
FTE	12. FTE		FTE—940		
Next Increment: Exp/Separation PMIS Action		10-14-202	5	Bdgt Accn No.: 6111001-100-25-1631019 / 6113-100-25-1631019	
Action No.: A-325382 Re Work Schedule:	quest ID: DOA	A-HR-516502		JON: 163125019	
Retirement Type: DC - DEFINED CONTRIB	BUTION DEDUCTION	ON		Personnel Jacket I	No.: 19920263

14.REMARKS (continue in item 21,if necessary)

APPOINTMENT IS SUBJECT TO COMPLETION OF A SIX (6) MONTH INITIAL PROBATIONARY PERIOD. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/13/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. PRIOR GOVERNMENT OF GUAM SERVICE WILL BE CREDITED UPON RECEIPT OF OFFICIAL PERSONNEL FILES FROM GDOE. SELECTED FROM CERTIFICATION OF ELIGIBLES C125-255S1 DATED 08/05/2025.

Kr

ESIGN-005-D10202025

1. Fullname AWA, SHAIANNE RAE R.		2. Date of Birth		3.Employee ID 10002381	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	G ACTION A	FFECTING	S YOUR EMPLOYME	NT
5.Nature of Action PROBATIONAL APPOINTMENT	1 0	6.Effective Date 13 Oct 2025		7.Legal Authority RULE4.602	
FROM	Descr	iption		то	
Pay Grade—Salary Per Annum—0 Step—Rate per Hour—0 Department—Section/Division—FTE	8. Position 9. Pay Gra Salary Rat 10. Depart 11. Div./Se 12. FTE	n Title MICR MICR Pay Gr LX Step 01 Depart DEPA Section		OBIOLOGIST I rade Salary 45262 Rate 21.76 tment RTMENT OF PUBLIC HEALTH & SOCIAL SE on/Division S- BUREAU OF COMMUNICABLE DISEASE I	
	Exp/Separation Date: PMIS Action Date: 10-14-2025 Request ID: DOA-HR-652468			Bdgt Accn No.: 1713143 JON: 1713-23-143	6111/113001-101-23-
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCTION	ON		Personnel Jacket N	o.: 19920262

14.REMARKS (continue in item 21, if necessary)

APPOINTMENT IS SUBJECT TO COMPLETION OF A SIX (6) MONTH INITIAL PROBATIONARY PERIOD. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/13/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. PRIOR GOVERNMENT OF GUAM SERVICE WILL BE CREDITED UPON RECEIPT OF OFFICIAL PERSONNEL FILES FROM GDOE. SELECTED FROM CERTIFICATION OF ELIGIBLES C125-307 DATED 08/14/2025.

ESIGN-005-D10202025

K:-

1. Fullname ARCEO, JENNIFER R		2. Date of Birth XX XXX XXXX		3.Employee ID 8925	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF THI	E FOLLOWIN	IG ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action TRANSFER - LATERAL		6.Effective Date 13 Oct 2025		7.Legal Authority RULE 4.501	
FROM	Descr	ription		то	
Position— ADMINISTRATIVE OFFICER Pay Grade————————————————————————————————————	8. Position 9. Pay Gra Salary Ra 10. Depart 11. Div./Se 12. FTE	ade/Step te tment	Pay Gr LX Step— 07 Depart GUAN	Rate————————————————————————————————————	
PMIS Ad	paration Date:	10-13-202		Bdgt Accn No.: 1 JON: 2030-002	101-24-3400113
Retirement Type: DC - DEFINED CONTRIBUTION	ON DEDUCTION	ON		Personnel Jacket No	o.: 4597

14.REMARKS (continue in item 21, if necessary)

TRANSFER AND CONTINUE ALL BENEFITS AND DEDUCTIONS FROM DEPARTMENT OF YOUTH AFFAIRS.

K.L

ESIGN-005-D10202025

1. Fullname SANTOS, NONITO R		2. Date of Birth		3.Employee ID 3340	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	OF THE FOLLOWI	NG ACTION	AFFECTIN	G YOUR EMPLOYM	ENT	
5.Nature of Action DETAIL APPOINTMENT		6.Effective Date 09 Oct 2025		7.Legal Authority RULE 4.506		
FROM	Desc	Description		то		
Position EQUIPMENT OPERATOR II Pay Grade GX 45486 Step Rate per Hour 21.87 Department GWSA - GUAM SOLID WASTE AUTHORITY Section/Division GSWA - GUAM SOLID WASTE AUTHORITY FTE 5032	9. Pay Gr Salary Ra	Position Title Pay Grade/Step ary Rate Department Div./Section Position EQUIP Pay Gra JX Step 08 Department GWSA Section GSWA		PMENT OPERATOR LEADER II rade Salary 48894 Rate 23.51 tment A - GUAM SOLID WASTE AUTHORITY In/Division A - GUAM SOLID WASTE AUTHORITY		
Next Increment: Action No.: A-325951	Exp/Separation Date: PMIS Action Date: Request ID: DO	10-14-202		Bdgt Accn No.: JON: 6111001 4	6112001 416 26 16 26 9910201	
Work Schedule: FULL-TIME						
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCT	ION		Personnel Jacket	No.: 1055	

14.REMARKS (continue in item 21,if necessary)

COMPENSATION WHILE BEING DETAILED AS EQUIPMENT OPERATOR LEADER II, PURSUANT TO SECTION 6.008, CHAPTER 6 OF THE PERSONNEL RULES AND REGULATIONS. THIS PAY ADJUSTMENT IS EQUIVALENT TO STEP 080F PAY GRADE JX. THIS DETAIL IS NOT TO EXCEED 90 CALENDAR DAYS FROM THE EFFECTIVE DATE ABOVE. THIS ACTION IS BEING PROCESSED IAW WITH INFORMATION PROVIDED AND CERTIFIED BY THE GUAM SOLID WASTE AUTHORITY (GSWA). ALL CLASSIFICATION AND RECRUITMENT PROCEDURES WERE CONDUCTED SOLELY BY THE GSWA AND NOT THE DEPARTMENT OF ADMINISTRATION. INFORMATION CONTAINED IN THIS NOTIFICATION OF PERSONNEL ACTION HAS NOT BEEN VALIDATED AND IS BEING PROCESSED SOLELY FOR PAYROLL PURPOSES.

K-

ESIGN-005-D10202025

1. Fullname		2. Date of Birth		3.Employee ID	4.Date Requested	
CAMACHO, SPADE MARQUEZ		XX XXX XXXX		11165	20 Oct 2025	
THIS IS TO NOTIFY YO	U OF THE FOLLOW	ING ACTION	AFFECTIN	G YOUR EMPLOYM	ENT	
5.Nature of Action	6.Effec	6.Effective Date		7.Legal Authority		
NAME CHANGE	08	Oct 2025		PR&R		
FROM	Des	scription		то		
Position SECURITY GUARD (ARMED) Pay Grade Salary Per Annum		8. Position Title 9. Pay Grade/Step		Position———————————————————————————————————		
Step————————————————————————————————————	Salary I	Rate	Step—	39331 —Rate———————————————————————————————————		
DEPARTMENT OF MILITARY AFFAIRS		artment	Depart	RTMENT OF MILITAR	Y AFFAIRS	
Section/Division MIL AFF - SECURITY	11. Div./	Section		Section/Division———————————————————————————————————		
PS-013		12. F E		E—————————————————————————————————————		
		aration Date: tion Date: 10-15-2025		Bdgt Accn No.: 3740105 6113001-1		
Action No.: A-326077 Work Schedule: FULL-TIME	Request ID: D	OA-HR-17005	6	JON: 3740-25-1	05	
Retirement Type: DC - DEFINED CON	TRIBUTION DEDUC	TION		Personnel Jacket	No.: 6837	

14.REMARKS (continue in item 21,if necessary)

NAME CHANGE FROM SARAH RIA M. CAMACHO TO SPADE MARQUEZ CAMACHO, BY COURT ORDER.

K.L

ESIGN-005-D10202025

1. Fullname TORRES, ROCHELLE C.		2. Date of Birth		3.Employee ID 10002402	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	OF THE FOLLOWI	NG ACTION A	AFFECTING	G YOUR EMPLOYMEN	T	
5.Nature of Action EXEMPTED APPOINTMENT	I	6.Effective Date 08 Oct 2025		7.Legal Authority 4GCA4102A(6)		
FROM	Desc	ription		то		
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department Section/Division		8. Position Title 9. Pay Grade/Step Salary Rate Department		Rate— 22.78 rtment— OR'S COUNCIL on/Division— OR - ADMINISTRATION		
Action No.: A-325767 Work Schedule:	Exp/Separation Date: PMIS Action Date: 10-14-2025 Request ID: DOA-HR-786170			Bdgt Accn No.: 5 111/113 JON:	5100A252880SE001-	
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCT	ION		Personnel Jacket No).: 19920261	

14.REMARKS (continue in item 21, if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/08/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017.

K.L

ESIGN-005-D10202025

1. Fullname RODRIGUEZ, RHIA D		2. Date of Birth		3.Employee ID 59715	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT							
5.Nature of Action AMENDMENT		6.Effective Date 08 Oct 2025		7.Legal Authority PR&R			
FROM	Desci	ription		то	5 ×		
Position— COMPUTER SYSTEMS ANALYST II Pay Grade————————————————————————————————————		8. Position Title SYS		Position— SYSTEMS PROGRAMMER Pay Grade————————————————————————————————————			
Step Rate per Hour 23.91	Salary Ra		Step—	54918 Rate 26.4			
OFFICE OF TECHNOLOGY	10. Depar	10. Department OFFIC OFFIC Section		Department OFFICE OF TECHNOLOGY Section/Division OFFICE OF TECHNOLOGY			
Section/Division OFFICE OF TECHNOLOGY	11. Div./Se						
ETE	12. FTE		FTE—21008	}	77		
Next Increment:	Exp/Separation Date:	e: 10-13-202	5	Bdgt Accn No.:	6*** 001 100 26 2100		
Action No.: A-326025 Work Schedule: FULL-TIME	on No.: A-326025 Request ID: DOA			JON: 2100001			
Retirement Type: DC - DEFINED CON	TRIBUTION DEDUCTI	ON		Personnel Jacket N	o.: 93085		
	T						

14.REMARKS (continue in item 21, if necessary)

THIS ACTION AMENDS PA#325881 (PROMOTION) EFFECTIVE DATE SHOULD READ: 10/08/2025 VICE 09/30/2025.

K. 6

ESIGN-005-D10202025

1. Fullname TAITAGUE, ESTHER MARIE G		2. Date of Birth		3.Employee ID 5892	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF	FFECTING	S YOUR EMPLOYMEN	NT			
5.Nature of Action SALARY INCREMENT	OK	6.Effective Date 08 Oct 2025		7.Legal Authority RULE 10.008		
FROM	Descr	Description		то		
Position PLANNER IV Pay Grade OX 86219 Step Rate per Hour 41.45 Department BUREAU OF STATISTICS AND PLANS Section/Division BOSP - COASTAL ZONE MANAGEMENT FTE GCMP-011	8. Position 9. Pay Gra Salary Ra 10. Depart 11. Div./Se 12. FTE	n Title Position PLAN Pay Gr OX Step 12 Depart BURE Section BOSP FTE		NNER IV Salary 88956		
Next Increment: Exp/Separation Date PMIS Action Date: Action No.: A-325996 Work Schedule: FULL-TIME		10-13-2025		Bdgt Accn No.: 6 25-0930101 JON: 0930101	6111001/6113001-101-	
Retirement Type: DB - DEFINED BENEFIT [DEDUCTION			Personnel Jacket No	o.: 1913	

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: FROM 10/08/2023 TO 10/07/2025 (S)

K.L

ESIGN-005-D10202025

1. Fullname DUENAS, THERESE ER		2. Date of Birth XX XXX XXXX		3.Employee ID 9544	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	OF THE FOLLOWI	NG ACTION	AFFECTIN	G YOUR EMPLOYME	NT	
5.Nature of Action REGULAR RETIREMENT - DEFINED CONTRIBUTION		6.Effective Date 08 Oct 2025		7.Legal Authority 4 GCA8211		
FROM	Desc	ription		то		
Position CUSTOMER SERVICE REP Pay Grade HX 44417 Step 10 Rate per Hour 21.35 Department DEPARTMENT OF REVENUE & TAXATION		on Title rade/Step ate rtment	—Pay Gr	Pay Grade Salary 0 Step Rate 0		
Section/Division R&T - DEPUTY TAX COMMISSIONER FTE 0207	11. Div./S	11. Div./Section		n/Division		
Next Increment: Action No.: A-325962 Work Schedule: FULL-TIME Exp/Separation Date: PMIS Action Date: Request ID: DO		10-13-202		Bdgt Accn No.: 111/113 JON: 0810 26 2	5603A260810SE201- 01-111/113	
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCT	ION		Personnel Jacket	No.: 5218	

14.REMARKS (continue in item 21,if necessary)

LUMP SUM PAYMENT IS AUTHORIZED AND WILL BE MADE FOR ANNUAL LEAVE UP TO 320 HOURS AND 50% OF ANY UNUSED SICK LEAVE. PURSUANT TO 4 GCA, 2108 AND RULE 4.502, CHAPTER 4 OF THE PERSONNEL RULES AND REGULATIONS, YOU MAY BE CONSIDERED FOR RE-EMPLOYMENT FOR THE CLASS OF POSITION IN WHICH YOU LAST HAD A PERMANENT APPOINTMENT. WITHIN FOUR (4) YEARS FROM THE EFFECTIVE DATE OF SEPARATION, YOU MAY CONTACT THE APPOINTING AUTHORITY OF YOUR FORMER DEPARTMENT FOR CONSIDERATION. EMPLOYEES MUST PASS DRUG TESTING PRIOR TO RE-EMPLOYMENT. YOU MAY ALSO APPLY FOR THE POSITION IF IT SHOULD BE ANNOUNCED.

KL

ESIGN-005-D10202025

1. Fuliname FORD, ALEXANDER JAMES		2. Date of		3.Employee ID 10002404	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YO	U OF THE FOLLOWI	NG ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action UNCLASSIFIED APPOINTMENT		6.Effective Date 08 Oct 2025		7.Legal Authority 4GCA4102A(6)	
FROM	Desc	ription		то	
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department Section/Division FTE	9. Pay Gr Salary Ra	SPEC Pay Grade/Step Salary Rate O. Department OFFICE SPEC Pay Grade/Step Step Depart OFFICE Section GOV		45.18 rtment CE OF THE GOVERNOR on/Division - EXECUTIVE DIRECTION	
Action No.: A-325938 Work Schedule:			25 3	Bdgt Accn No.: 6 26-0200001 JON: 0200-26-00	5111001/6113001-100-
Retirement Type: DC - DEFINED CON	TRIBUTION DEDUCT	ION		Personnel Jacket No	5.: 19920259
	_				

14.REMARKS (continue in item 21, if necessary)

EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/08/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. PRIOR GOVERNMENT OF GUAM SERVICE WILL BE CREDITED UPON RECEIPT OF OFFICIAL PERSONNEL FILES FROM AGO.

K.L

ESIGN-005-D10202025

1. Fullname NARCIS, DAMIAN HARLAN A	=	2. Date of Birth XX XXX XXXX		3.Employee ID 38060	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION A	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action PROBATIONAL APPOINTMENT		6.Effective Date 08 Oct 2025		7.Legal Authority RULE4.602	
FROM	Descr	Description		то	
Pay Grade—Salary Per Annum—0 Step—Rate per Hour—0 Department—Section/Division—FTE—FTE—	8. Position 9. Pay Gra Salary Rat 10. Depart 11. Div./Se 12. FTE	de/Step te tment	Position— LAND AGENT I Pay Grade— IX 34886 Step— Rate— 16.77 Department— CHAMORRO LAND TRUST COMMISSION Section/Division— CLTC BUDGET FTE—		
1 **	Separation Date	e: 11-21-2	2020	Bdgt Accn No.:	5111001-100-24-
1	PMIS Action Date: 10-13-2025 Request ID: DOA-HR-472462			4400001 / 6113001-100 JON: 244400001	
Retirement Type: DC - DEFINED CONTRIBU	JTION DEDUCTION	ON		Personnel Jacket No	62344

14.REMARKS (continue in item 21,if necessary)

APPOINTMENT IS SUBJECT TO COMPLETION OF A SIX (6) MONTH INITIAL PROBATIONARY PERIOD. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/08/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. SELECTED FROM CERTIFICATION OF ELIGIBLES C125-148 DATED 03/04/2025.

K-

ESIGN-005-D10202025

1. Fullname LEON GUERRERO, NICOLE L		2. Date of Birth		3.Employee ID 10760	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF TH	E FOLLOWIN	IG ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action UNCLASSIFIED APPOINTMENT		6.Effective Date 07 Oct 2025		7.Legal Authority 4GCA4102A(6)	
FROM	Desci	ription		то	
Pay Grade—Salary Per Annum—0 Step—Rate per Hour—0 Department—Section/Division—FTE—FTE—	9. Pay Gra Salary Ra 10. Depar	PRIVATION TITLE PRIVATION OF THE PRIVAT		ARTMENT OF YOUTH AFFAIRS on/Division - DIRECTOR'S OFFICE	
Action No.: A-325677 PMIS A	paration Date: st ID: DO/	10-13-202		Bdgt Accn No.: 6 2000001 JON: 200025001	5111 / 113001-100-25-
Retirement Type: DC - DEFINED CONTRIBUTION	ON DEDUCTI	ON		Personnel Jacket No	o.: 6427

14.REMARKS (continue in item 21, if necessary)

EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/07/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. FOR ANNUAL LEAVE RATE OF ACCUMULATION PURPOSES, AND PURSUANT TO SECTION 4109 (A) OF THE GOVERNMENT CODE OF GUAM AND RULE 8.104 OF THE PERSONNEL RULES AND REGULATIONS, CREDITABLE GOVERNMENT OF GUAM SERVICE IS HEREBY FURNISHED DYA: 10 YEARS, 06 MONTHS, 12 DAYS

K.L

ESIGN-005-D10202025

1. Fullname SAN NICOLAS, ODYESSA L		2. Date of Birth		3.Employee ID 60442	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	IG ACTION AF	FECTING	C YOUR EMPLOYMEN	IT	
5.Nature of Action TEMPORARY APPOINTMENT		6.Effective Date 06 Oct 2025		7.Legal Authority RULE 4.603		
FROM	Desc	ription		то		
Pay Grade Salary Per Annum 0 Rate per Hour 0 Department Section/Division FTE	9. Pay Gra Salary Ra	8. Position Title 9. Pay Grade/Step Salary Rate Pay Grade/Step NX Step 01 10. Department DEPAR 11. Div./Section Pay Grade/Step NX Step 01 Department DEPAR Section DCA -		26.4 rtment ARTMENT OF CHAMORRO AFFAIRS on/Division - GUAM MUSEUM		
Action No.: A-325650	Exp/Separation Dat PMIS Action Date: Request ID: DO	10-15-2025	026	Bdgt Accn No.: 60 26-3620001 JON: 3620-26-00	5111001/6113001-100-	
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCTI	ON		Personnel Jacket No	o.: 212875	

14.REMARKS (continue in item 21, if necessary)

EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. PURSUANT TO 4 GCA SECTION 4102 (A) (6) AND 4103 (E), THIS APPOINTMENT IS NOT TO EXCEED 120 WORKING DAYS OR 960 HOURS WHICHEVER COMES FIRST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/09/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. PRIOR GOVERNMENT OF GUAM SERVICE WILL BE CREDITED UPON RECEIPT OF OFFICIAL PERSONNEL FILES FROM UOG.

K.L

ESIGN-005-D10202025

1. Fullname		2. Date of Birth		3.Employee ID	4.Date Requested	
TAITANO, TYRONE J	TAITANO, TYRONE J		XX	11327	20 Oct 2025	
THIS IS TO NOTIFY YOU	J OF THE FOLLOWIN	IG ACTION A	FFECTING	G YOUR EMPLOYMEN	NT	
5.Nature of Action UNCLASSIFIED APPOINTMENT	6.Effectiv	e Date		7.Legal Authority		
				4GCA4102A(6)		
FROM	Descr	ription		ТО		
Pay Grade Salary Per Annum Rate per Hour Department Section/Division FTE	8. Position 9. Pay Gra Salary Ra 10. Depart 11. Div./Se 12. FTE	rade/Step Pay Grate Step— Depart OFFIC		d3.27 ICE OF THE GOVERNOR ion/Division— ICE OF THE GOVERNOR		
	Exp/Separation Date:	10-14-2025	-	26-0200001	6111001/6113001-100-	
Work Schedule: FULL-TIME	Request ID: DOA	\-HR-639794		JON: 0200-26-00	01	
Retirement Type: DC - DEFINED CONT	TRIBUTION DEDUCTION	ON	M	Personnel Jacket N	o.: 19907849	
14.REMARKS (continue in item 21,if neces	sary)					

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. BUDGET ACCOUNT NO. 6111001/6113001-100-26-0200001 / 0200-26-001

K.L

ESIGN-005-D10202025

1. Fullname		2. Date of Birth	3.Employee ID	4.Date Requested	
EVELUCK, HENTRICK M		XX XXX XXXX	60455	20 Oct 2025	
THIS IS TO NOTIFY YOU	J OF THE FOLLOWIN	G ACTION AFFEC	TING YOUR EMPLOY	MENT	
5.Nature of Action UNCLASSIFIED APPOINTMENT		6.Effective Date 06 Oct 2025		7.Legal Authority 4GCA4102A(6)	
FROM	Descr	iption	TO	0	
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department Section/Division	9. Pay Gra Salary Rat 10. Depart 11. Div./Se	n Title side/Step te stment oction	STAFF ASSISTANT Say Grade Salary 56268 Step Rate 27.05 Separtment OFFICE OF THE GOVERNOR Section/Division GOV - EXECUTIVE DIRECTION		
				· · · · · · · · · · · · · · · · · · ·	
Action No.: A-326041	e: 10-14-2025	Bdgt Accn No.: 26-0200001	·		
Work Schedule: FULL-TIME	Request ID: DOA	4-HR-417182	- JON: 0200-2	26-001 	
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCTION	ON	Personnel Jack	et No.: 224751	
1/ DEMARKS (continue in item 21 if neces	eand				

14.REMARKS (continue in item 21,if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. BUDGET ACCOUNT NO.: 6111001/6113001-100-26-0200001 / 0200-26-001

K. L

ESIGN-005-D10202025

1. Fullname FLORIDA, JENNY H		2. Date of Birth		3.Employee ID 10585	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU O	F THE FOLLOWIN	G ACTION A	AFFECTING	G YOUR EMPLOYMEN	IT
5.Nature of Action SALARY INCREMENT	ľ	6.Effective Date 05 Oct 2025		7.Legal Authority RULE 10.008	
FROM	Descr	8. Position Title 9. Pay Grade/Step Salary Rate Pay Grade/Step JX Step 06 Department DEPAR 11. Div./Section		то	
Position— REVENUE OFFICER II Pay Grade— JX 43995 Step————————————————————————————————————	9. Pay Gra Salary Rad			Position REVENUE OFFICER II Pay Grade JX 45661 Step Rate	
2250			2250		
PM	Exp/Separation Date: PMIS Action Date: Request ID: DOA		5	Bdgt Accn No.: 111/113 JON:	5100A260810CE007-
Retirement Type: DB 1.75 - DEFINED BEN	EFIT 1.75	9.		Personnel Jacket N	o.: 6265

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: FROM 10/05/2024 TO 10/04/2025. (S)

K. w

ESIGN-005-D10202025

1. Fullname DUENAS, CRYSTAL NB		2. Date of Birth		3.Employee ID 9004	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	J OF THE FOLLOWIN	IG ACTION	AFFECTING	G YOUR EMPLOYMEN	IT :
5.Nature of Action SALARY INCREMENT		6.Effective Date 05 Oct 2025		7.Legal Authority RULE 10.008	
FROM	Desci	ription		то	
Position— REVENUE OFFICER II Pay Grade— JX 43995 Step————————————————————————————————————	9. Pay Gra Salary Ra	8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section REVEL Pay Grade/Step JX Step 06 Depart DEPAI		Sition—SVENUE OFFICER II y Grade—Salary—45661 Rep—Rate—21.95 partment—PARTMENT OF REVENUE & TAXATION ction/Division— aT - TAX ENFORCEMENT E——————————————————————————————————	
	Exp/Separation Date: PMIS Action Date: 10-1 Request ID: DOA-HR-5			Bdgt Acen No.: 5	5100A260810CE007-
Retirement Type: DB 1.75 - DEFINED B	BENEFIT 1.75	<u></u>		Personnel Jacket No	o.: 4670

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: FROM 10/05/2024 TO 10/04/2025. (S)

K.L

ESIGN-005-D10202025

1. Fuliname OLIVA, PAUL B		2. Date of Birth		3.Employee ID 2568	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	IG ACTION A	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action SALARY INCREMENT		6.Effective Date 03 Oct 2025		7.Legal Authority RULE 10.008	
FROM	Desci	ription		то	
Position SCHOOL BUS DRIVER Pay Grade HX 47279 Step Rate per Hour 22.73 Department DEPARTMENT OF PUBLIC WORKS Section/Division DPW - BUS OPERATIONS FTE 4926	8. Positio 9. Pay Gra Salary Ra 10. Depar 11. Div./Se	ade/Step te tment	SCHO Pay Gr HX Step— 13 Depart DEPA	Rate 23.45 ment RTMENT OF PUBLIC WO	PRKS
	Exp/Separation Date:	e: 10-14-202	25	Bdgt Accn No.: 6	5111001-205-26-
Action No.: A-326069 Work Schedule: FULL-TIME	Request ID: DO	A-HR-377097	7	JON:	_
Retirement Type: DB 1.75 - DEFINED BE			Personnel Jacket No	o.: 19908105	

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: 10/03/2023 to 10/02/2025. (S)

K. W

ESIGN-005-D10202025

1. Fullname BORJA, JOELYN M		2. Date of Birth		3.Employee ID	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYME	ENT
5.Nature of Action SALARY INCREMENT		6.Effective Date 03 Oct 2025		7.Legal Authority RULE 10.008	
FROM	Descr	iption		то	
Position SOCIAL SERVICE SUPERVISOR I Pay Grade OX 73315 Step Rate per Hour 35.25 Department DEPARTMENT OF PUBLIC HEALTH & SOCIAL Section/Division DPHSS FTE 22-6958	9. Pay Gra Salary Rad	9. Pay Grade/Step Salary Rate OX Step 07 10. Department DEPAR 11. Div./Section DPHS:		on— AL SERVICE SUPERVISOR I rade————————————————————————————————————	
2	xp/Separation Date			Bdgt Accn No.:	6111001-101-25-
	MIS Action Date: Request ID: DOA	10-14-202 A-HR-88021		1726136 JON: 172625136	5
Retirement Type: DB 1.75 - DEFINED BE	NEFIT 1.75			Personnel Jacket	No.: 5765

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: 10/03/2024 TO 10/02/2025. (S)

K. W

ESIGN-005-D10202025

1. Fullname TAITANO, TYRONE J		2. Date of Birth	3.Employee ID	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	G ACTION AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action TERMINATION	6.Effectiv 03 Oc	e Date t 2025	7.Legal Authority RULE13.101	
FROM	Descr	iption	то	
Position SPECIAL ASSISTANT Pay Grade Salary Per Annum 90000 Step Rate per Hour 43.27 Department OFFICE OF THE GOVERNOR Section/Division OFFICE OF THE GOVERNOR FTE .	8. Position 9. Pay Gra Salary Ra 10. Depart 11. Div./Se 12. FTE	ride/Step te Pay Gi	Rate 0	
	Exp/Separation Date PMIS Action Date:		Bdgt Accn No.: 6	5111001/6113001-692-
	Request ID: DOA		JON: 0222-23-30	2
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCTION	ON	Personnel Jacket No	b.: 19907849
24 22 4 24 24 24 24 24 24 24 24 24 24 24				

14.REMARKS (continue in item 21, if necessary)

NO LUMP SUM.

K.L

ESIGN-005-D10202025

1. Fullname		2. Date of Birth		3.Employee ID	4.Date Requested
EVELUCK, HENTRICK M		XX XXX XXXX		60455	20 Oct 2025
THIS IS TO NOTIFY YO	U OF THE FOLLOWIN	G ACTION A	AFFECTIN	G YOUR EMPLOYME	NT
5.Nature of Action	6.Effectiv	e Date		7.Legal Authority	
TERMINATION	03 Oc	t 2025		RULE13.101	
FROM	Descr	ription		то	
Position———————————————————————————————————	8. Positio	n Title	Positio	P.N.	
Pay Grade——Salary Per Annum——56268	9. Pay Gra Salary Ra		—Pay Gr	Salary	
Rate per Hour—27.05			Step	Rate	
OFFICE OF THE GOVERNOR	10. Depart	tment	Depart	ment	
GOV - EXECUTIVE DIRECTION	11. Div./Se	ction	Section	n/Division	
FTE	12. FTE		FTE—		
Next Increment: Action No.: A-326038	Exp/Separation Date PMIS Action Date: Request ID: DOA	10-14-202	5	Bdgt Accn No.: 23-0222302 JON: 0222-23-30	6111001/6113001-692-
Work Schedule: FULL-TIME			.		
Retirement Type: DC - DEFINED CON	TRIBUTION DEDUCTION	ON	-	Personnel Jacket N	lo.: 224751

14.REMARKS (continue in item 21,if necessary)

NO LUMP SUM.

K.L

ESIGN-005-D10202025

1. Fullname PANGELINAN, JAVIER J.I.		2. Date of Birth		3.Employee ID 10002419	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU	U OF THE	FOLLOWIN	G ACTION	AFFECTING	G YOUR EMPLOYMEN	IT	
5.Nature of Action PROBATIONAL APPOINTMENT		6.Effective Date 03 Oct 2025		7.Legal Authority RULE4.602			
FROM		Descr	iption		то		
Pay Grade—Salary Per Annum—0 Step—Rate per Hour—0 Department—		8. Position 9. Pay Gra Salary Rat	de/Step te	Pay Gr. HX Step 01	Step—Rate—15.56 Department—		
Section/Division———————————————————————————————————		11. Div./Se	ction	Section	(
Next Increment: Action No.: A-326007 Work Schedule:	PMIS Action Date: 10 tion No.: A-326007 Request ID: DOA-HR				Bdgt Accn No.: 6 JON: 6111001 416	26 9910201	
Retirement Type: DC - DEFINED CONT	1 DEDUCTION			Personnel Jacket No	o.: 19920260		

14.REMARKS (continue in item 21,if necessary)

APPOINTMENT IS SUBJECT TO COMPLETION OF A SIX (6) MONTH INITIAL PROBATIONARY PERIOD. TEMPORARY WAIVER OF PHYSICAL EXAMINATION REQUESTED BY APPOINTING AUTHORITY AND AUTHORIZED PURSUANT TO RULE 9.004 AND DOA CIRCULAR 2011-017. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. ENTITLEMENT DATE FOR BASIC LIFE INSURANCE IS 04/03/2026. YOU HAVE THIRTY-ONE (31) DAYS AFTER ENTITLEMENT DATE TO ELECT SUPPLEMENTAL COVERAGE. THIS ACTION IS BEING PROCESSED IAW WITH INFORMATION PROVIDED AND CERTIFIED BY THE GUAM SOLID WASTE AUTHORITY (GSWA). ALL CLASSIFICATION AND RECRUITMENT PROCEDURES WERE CONDUCTED SOLELY BY THE GSWA AND NOT THE DEPARTMENT OF ADMINISTRATION. INFORMATION CONTAINED IN THIS NOTIFICATION OF PERSONNEL ACTION HAS NOT BEEN VALIDATED AND IS BEING PROCESSED SOLELY FOR PAYROLL PURPOSES.

K-

1. Fuliname CLORES, MELISSA NINA P			2. Date of Birth		3.Employee ID 10878	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	J OF THE F	FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action SALARY INCREMENT		6.Effective Date 02 Oct 2025		7.Legal Authority RULE 10.008		
FROM		Descr	iption	-	то	
Position NUTRITION ASSISTANT I Pay Grade HX 37545 Step 05 Rate per Hour 18.05 Department DEPARTMENT OF PUBLIC HEALTH & SOCI Section/Division PHSS - PUBLIC HEALTH FTE 6774	IAL SE	8. Position 9. Pay Gra Salary Rat 10. Depart 11. Div./Se 12. FTE	de/Step te tment	Pay Gr HX Step— 06 Depart DEPAI	Salary—38967 Rate—18.73	ALTH & SOCIAL SE
Next Increment: Action No.: A-325978	Exp/Separation Date: PMIS Action Date: 10-13-2025 Request ID: DOA-HR-739575			Bdgt Accn No.: 6***001101261712101 JON:		
Work Schedule: FULL-TIME						
Retirement Type: DB 1.75 - DEFINED B			Personnel Jacket No	o.: 6544		

14.REMARKS (continue in item 21, if necessary)

WAITING PERIDO 10/2/2024 TO 10/01/2025. (S)

K. W

ESIGN-005-D10202025

1. Fullname LIZAMA, LUCELLE R		2. Date of Birth		3.Employee ID 60822	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF THE	FOLLOWIN	IG ACTION A	AFFECTING	G YOUR EMPLOYMEN	IT
5.Nature of Action LIMITED TERM APPOINTMENT	1	6.Effective Date 01 Oct 2025		7.Legal Authority RULE 4.603	
FROM	Descr	Description		то	
Pay Grade—Salary Per Annum—0	9. Pay Gra	8. Position Title 9. Pay Grade/Step Salary Rate		Position— MULTI-MEDIA TECHNICIAN II Pay Grade————————————————————————————————————	
Step————————————————————————————————————			O1 Depart	15.56	
Dahai dilatit	10. Department		AMORRO LANGUAGE COMMISSION		
Section/Division—	11. Div./Se	11. Div./Section		ection/Division———————————————————————————————————	
FTE-	12. FTE	4	FTE—CCL-0	004	-
Action No.: A-326159 2026 Work Schedule: FULL-TIME PMIS Ac	earation Date:	10-17-202	5	Bdgt Accn No.: 1 111/113 JON: 0672-26-00	
Retirement Type: DC - DEFINED CONTRIBUTIO	N DEDUCTION	ON		Personnel Jacket No	o.: 275939

14.REMARKS (continue in item 21, if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. PURSUANT TO RULE 4.603 (A), OF THE PERSONNEL RULES AND REGULATIONS, THIS APPOINTMENT IS NOT TO EXCEED ONE (I) YEAR FROM THE EFFECTIVE DATE ABOVE.

K.L

ESIGN-005-D10202025

1. Fuliname HEFLIN, MARIE S		2. Date of Birth		3.Employee ID	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF TH	E FOLLOWIN	IG ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT	
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON	1	6.Effective Date 01 Oct 2025		7.Legal Authority PR&R		
FROM	Desci	Description		то		
Position STATISTICAN I Pay Grade IX 65358 Step Rate per Hour 31.42 Department DEPARTMENT OF LABOR Section/Division DOL - EMPLOYMENT & TRAINING - GUAM EMP FTE 4005	9. Pay Gra Salary Ra 10. Depar	8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		-Position STATISTICAN I -Pay Grade IX 65358 -Step 20 Rate 31.42 -Department DEPARTMENT OF LABOR -Section/Division DOL - BUREAU OF LABOR STATISTICS -FTE 4005		
PMIS A	paration Date ction Date: it ID: DOA	10-17-202		Bdgt Accn No.: 6 2440201 JON: 2440-26-20	5111 /113001-232-26- 91	
Retirement Type: NON BASE - DEFINED BENE	FIT			Personnel Jacket No	o.: 19901938	

14.REMARKS (continue in item 21,if necessary)

CHANGE OF BUDGET ACCOUNT NO. TO: 6111/113001-232-26-2440201 JON TO: 2440-26-201 SECTION/DIVISION: 2440-DOL - BUREAU OF LABOR STATISTICS CONTINUE ALL BENEFITS AND DEDUCTIONS.

K-

ESIGN-005-D10202025

1. Fullname ARTERO, EUFEMIA-KIANA L		2. Date of Birth		3.Employ		4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	FOLLOWIN	L					
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON	6.Effective Date 01 Oct 2025			7.Legal Authority PR&R			
FROM		Description			то		
Position TECHNICAL ASSISTANCE COORDINATOR Pay Grade MX 49731 Step Rate per Hour 23.91 Department GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division GUAM BEHAVIORAL HEALTH AND WELLNESS C		8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section		Pay G MX Step- 01 Depar GUAN	Position TECHNICAL ASSISTANCE COORDINATOR Pay Grade MX 49731 Step Rate		
BHSA.004							
Next Increment: Action No.: A-326138 Work Schedule:	PMIS Acti		:: 10-17-202 \-HR-57976		2300124/		5111001-100-26- -26-2300124 111/113
Retirement Type: DC - DEFINED CONT	TRIBUTION	DEDUCTION	NC		Personne	el Jacket No	5.: 19911080

14.REMARKS (continue in item 21,if necessary)

CHANGE OF BUDGET ACCOUNT NO. TO: 6111001-100-26-2300124/6113001-100-26-2300124 JON TO:230026124-111/113 CONTINUE ALL BENEFITS AND DEDUCTIONS. FROM ARP TO CJP-GF.

K. W

ESIGN-005-D10202025

1. Fullname TORRES, SPENCER DEAN P		2. Date of Birth		3.Employee ID	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	J OF THE FOLLOWIN	IG ACTION A	AFFECTING	G YOUR EMPLOYMEN	IT	
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON		6.Effective Date 01 Oct 2025		7.Legal Authority PR&R		
FROM	Desci	ription	-	то		
Position DATA ADMINISTRATIVE CLERK (UNCL) Pay Grade Salary Per Annum 30169 Step Rate per Hour 14.5 Department GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division GUAM BEHAVIORAL HEALTH AND WELLNESS C 11.		9. Pay Grade/Step Salary Rate Pay Grade/Step GX Step 01 10. Department GUAM Section		A ADMINISTRATIVE CLERK (UNCL) Srade Salary 30169 Rate 14.5 rtment M BEHAVIORAL HEALTH AND WELLNESS C on/Division M BEHAVIORAL HEALTH AND WELLNESS C		
Next Increment: Exp/Separati			_	_	5111001-101-26-	
Action No.: A-326014 PMIS Action Date: Request ID: DO. Work Schedule: FULL-TIME		10-15-2029 4-HR-962877	_	2300120/6113001-101-2 JON: 101-26-2300		
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCTION	ON		Personnel Jacket No	o.: 6801	

14.REMARKS (continue in item 21, if necessary)

THIS POSITION IS 100% FEDERALLY FUNDED AND FULL-TIME EMPLOYMENT IS CONTINGENT UPON THE AVAILABILITY OF FEDERAL FUNDS. CHANGE OF BUDGET ACCOUNT NO. TO: 6111001-101-26-2300120/6113001-101-26-2300120 JON TO: 101-26-2300120-111/113 CONTINUE ALL BENEFITS AND DEDUCTIONS.

K. W

ESIGN-005-D10202025

1. Fullname RABAGO, TOGO JAMES Y			2. Date of Birth		3.Employee ID 60070	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF	THE FOLI	LOWING	ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT	
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON		Effective 01 Oct 2			7.Legal Authority PR&R		
FROM		Descrip	otion		то		
Position—TECHNICAL ASSISTANCE COORDINATOR Pay Grade—Salary Per Annum— MX 51615 Step—Q2 24.81 Department—QUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division—GBHWC - CHILD/ADOLESCENT SERVICES FTE—HTPT.013		8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		Position— TECHNICAL ASSISTANCE COORDINATOR Pay Grade— Salary 51615 Step— Rate— 24.81 Department— GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division— GBHWC - CHILD/ADOLESCENT SERVICES FTE— HTPT.013			
PMI	o/Separation I IS Action I quest ID:	Date:	10-15-202	-	Bdgt Accn No.: 6 2310002/6113001-602 JON: 231026002-	-26-2310002	
Retirement Type: DC - DEFINED CONTRIBU	UTION DE	EDUCTIO	N		Personnel Jacket No	5.: 153217	

14.REMARKS (continue in item 21, if necessary)

CHANGE OF BUDGET ACCOUNT NO. TO: 6111001-602-26-2310002/6113001-602-26-2310002 JON TO:231026002-111/113 CONTINUE ALL BENEFITS AND DEDUCTIONS. MOVING FROM ARP TO HFF CLINICAL

K.L

ESIGN-005-D10202025

1. Fullname RESPICIO, KARLA JANESSA A		2. Date of		3.Employee ID 25066	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE FOLLOW	NG ACTION	AFFECTING	G YOUR EMPLOYMEN	т
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON		6.Effective Date 01 Oct 2025		7.Legal Authority PR&R	
FROM	Desc	ription		то	
Pay Grade Salary Per Annum 53571 Step Rate per Hour 25.76 Department GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division GBHWC - CHILD/ADOLESCENT SERVICES TEAM		8. Position Title 9. Pay Grade/Step Salary Rate NX Step 03 10. Department GUAM 11. Div./Section TECHI Pay Grade/Step MX Step 03 Depart GUAM		Salary 53571 Rate 25.76 TIMENT M BEHAVIORAL HEALTH AND WELLNESS C In/Division VC - CHILD/ADOLESCENT SERVICES TEAN	
Next Increment: Exp/Separ)E	Bdgt Accn No.: 6	
	PMIS Action Date: Request ID: DO			JON: 101-26-2320	
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCT	ION		Personnel Jacket No	7228

14.REMARKS (continue in item 21,if necessary)

THIS POSITION IS 100% FEDERALLY FUNDED AND FULL-TIME EMPLOYMENT IS CONTINGENT UPON THE AVAILABILITY OF FEDERAL FUNDS. CHANGE OF BUDGET ACCOUNT NO. TO: 6111001-101-26-2320112/6113001-101-26-2320112 JON TO: 101-26-2320112-111/113 CONTINUE ALL BENEFITS AND DEDUCTIONS.

KL

ESIGN-005-D10202025

1. Fullname PABALAN, MARIFE DIZON		2. Date of Birth		3.Employee ID 10000390	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	IG ACTION	AFFECTIN	G YOUR EMPLOYMEN	lT .
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON	6.Effectiv	e Date		7.Legal Authority PR&R	
FROM	Desci	iption	_	ТО	=
Position—PSYCHIATRIC NURSE I Pay Grade—Salary Per Annum— 59426	8. Positio 9. Pay Gra	nde/Step	(HIATRIC NURSE I Salary 59426	
Step——Rate per Hour——28.57			Step	Rate 28.57	
GUAM BEHAVIORAL HEALTH AND WELLNES	3S C 10. Depar	10. Department		M BEHAVIORAL HEALTH AND WELLNESS C	
Section/Division———————————————————————————————————	11. Div./Se	11. Div./Section		HWC - NURSING SERVICES	
FTE	12. FTE	-	FMT.0	7.0034	
Next Increment: Exp/Separation PMIS Action Request ID: Work Schedule:		10-14-202	25	Bdgt Accn No.: 60 2330007/6113001-602 JON: 233026007-	2-26-2330007
Retirement Type: DC - DEFINED CONTRI	IBUTION DEDUCTION	ON		Personnel Jacket No	o.: 19910795

14.REMARKS (continue in item 21, if necessary)

CHANGE OF BUDGET ACCOUNT NO. TO READ: 6111001-602-26-2330007/6113001-602-26-2330007 JON:233026007-111/113 CONTINUE ALL BENEFITS AND DEDUCTIONS. FROM ARP TO HFF NURSING FTE TO READ: FMT.0034

K.L

ESIGN-005-D10202025

1. Fuliname MENDOZA, ROBERTA A		2. Date of Birth XX XXX XXXX		3.Employee ID 60989	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU	AFFECTING	G YOUR EMPLOYMEN	iT				
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON	6.Effectiv			7.Legal Authority PR&R			
FROM	Desci	iption		то			
Position LICENSED PRACTICAL NURSE I Pay Grade H-N 37875 Step O1 18.21 Department GUAM BEHAVIORAL HEALTH AND WELLNE Section/Division GBHWC - NURSING SERVICES FTE FMT.0073	9. Pay Gra Salary Ra	B. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section		Position LICENSED PRACTICAL NURSE I Pay Grade H-N 37875 Step Rate 01 18.21 Department GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division GBHWC - NURSING SERVICES FTE FMT.0073			
	Exp/Separation Date	e: 07-02	!-	Bdgt Accn No.: 6 2330007/6113001-602			
	PMIS Action Date: Request ID: DOA	10-14-202 A-HR-2 75 135		JON: 233026007-	-111/113		
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCTION	ON _		Personnel Jacket No	5.: 301362		

14.REMARKS (continue in item 21,if necessary)

CHANGE OF BUDGET ACCOUNT NO. TO READ:6111001-602-26-2330007/6113001-602-26-2330007 CONTINUE ALL BENEFITS AND DEDUCTIONS. MOVING FROM ARP TO HFF NURSING

K. W

ESIGN-005-D10202025

1. Fuliname MATA, ALEXA C			2. Date of		3.Employee ID 60205	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	U OF THE I	FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	iT .	
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON		6.Effective			7.Legal Authority PR&R		
FROM		Descr	iption		то		
Section/Division— GUAM BEHAVIORAL HEALTH AND WELLNESS C ETE		8. Position Title 9. Pay Grade/Step Salary Rate Control On Department On Depa		DATA Pay Gr GX Step— 01 Depart GUAN Section GUAN	osition— OATA ADMINISTRATIVE CLERK (UNCL) ay Grade—Salary—30169 tep—Rate—14.5 epartment—SUAM BEHAVIORAL HEALTH AND WELLNESS C ection/Division—SUAM BEHAVIORAL HEALTH AND WELLNESS C		
Next Increment: Exp/Separate PMIS Action Action No.: A-326006 Request ID:		on Date:	10-14-20 10-18654		Bdgt Accn No.: 62 2310002/6113001-602 JON: 231026002-	-26-2310002	
Work Schedule: FULL-TIME			2				
Retirement Type: DC - DEFINED CONT	I DEDUCTION	NC		Personnel Jacket No	5.: 176092		

14.REMARKS (continue in item 21,if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. FROM CMHC BLOCK GRANT TO HFF CLINICAL

K.L

ESIGN-005-D10202025

1. Fullname		2. Date of Birth		3.Employee ID	4.Date Requested
PANGELINAN, ANGIELYN CARIJOE	1	XX XXX XXX	X	60479	20 Oct 2025
THIS IS TO NOTIFY	YOU OF THE FOLLOWIN	IG ACTION AF	FECTIN	G YOUR EMPLOYME	NT
5.Nature of Action UNCLASSIFIED APPOINTMENT	6.Effectiv			7.Legal Authority	
		t 2025		4GCA4102A(6)	
FROM	Desc	ription		ТО	
Position Pay Grade Salary Per Annum O Rate per Hour O Department Section/Division FTE	9. Pay Grasalary Ra 10. Depar	ade/Step ite rtment	Position—STAFF ASSISTANT Pay Grade—Salary—38000 Step—Rate—18.27 Department—OFFICE OF THE GOVERNOR Section/Division—GOV - GUAM MEDICAL REFERRAL OFFICE		
			0		
Action No.: A-325903 Work Schedule: FULL-TIME	Exp/Separation Date: PMIS Action Date: Request ID: DO	e: 10-14-2025 A-HR-337171	-	Bdgt Accn No.: 26-0240010 JON: 0240-26-0	6111001/6113001-100-
Retirement Type: DC - DEFINED CO	ONTRIBUTION DEDUCTI	ON		Personnel Jacket N	lo.: 227447
14.REMARKS (continue in item 21.if ne	cessary)				

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. BUDGET ACCOUNT #6111001/6113001-100-26-0240010

K.L

ESIGN-005-D10202025

1. Fuliname FEGURGUR, MARY K		2. Date of		3.Employee ID	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT	
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON	6.Effectiv 01 Oct			7.Legal Authority PR&R		
FROM	Descr	iption		то		
Position— CLINICAL PSYCHOLOGIST Pay Grade————————————————————————————————————	8. Position 9. Pay Gra Salary Rat 10. Depart	nde/Step te tment	Pay Gr Step Depart GUAN	Position— CLINICAL PSYCHOLOGIST Pay Grade— Salary— 131016 Step— Rate— 62.99 Department— GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division— GBHWC - PROFESSIONAL SUPPORT UNIT		
FMT.1500	12. FTE		(FMT.1500		
PMI	/Separation Date S Action Date: uest ID: DOA	10-13-202	25	Bdgt Accn No.: 6 2300001/6113001-100- JON: 230026001-	-26-2300001	
Retirement Type: DB - DEFINED BENEFIT I	DEDUCTION			Personnel Jacket No	5.: 6290	

14.REMARKS (continue in item 21,if necessary)

CHANGE OF BUDGET ACCOUNT NO. TO READ: 6111001-100-26-2300001/6113001-100-26-2300001 JON: 230026001-111/113 CONTINUE ALL BENEFITS AND DEDUCTIONS. FROM ARP TO GENERAL FUND DIRECTOR'S OFFICE

. K. L

ESIGN-005-D10202025

1. Fullname		2. Date of Birth	3.Employee ID	4.Date Requested	
CRISOSTOMO, JON PAUL B		XX XXX XXXX	60301	20 Oct 2025	
THIS IS TO NOTIFY YOU	CTING YOUR EMPLOYM	ENT			
5.Nature of Action SALARY INCREMENT	6.Effectiv 01 Oct		7.Legal Authority RULE 10.008		
FROM	Descr	iption	то		
Position FIREFIGHTER I Pay Grade IL21 39750 Step Rate per Hour 19.11 Department GUAM FIRE DEPARTMENT Section/Division GFD - FIRE SUPPRESSION BUREAU FTE FD12133	9. Pay Gra Salary Rat 10. Depart 11. Div./Se 12. FTE	n Title	Position—FIREFIGHTER I Pay Grade—Salary—41959 Step—Rate—20.17 Department—GUAM FIRE DEPARTMENT Section/Division—GFD - FIRE SUPPRESSION BUREAU FTE—FD12133		
Next Increment:	Exp/Separation Date		Bdgt Accn No.:	611*001-100-26-	
Action No.: A-325980 Work Schedule: FULL-TIME	PMIS Action Date: Request ID: DOA	10-13-2025 A-HR-981244	4250005 JON :		
Retirement Type: DB 1.75 - DEFINED E	BENEFIT 1.75		Personnel Jacket	No.: 189147	

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: FROM 10/01/2024 TO 09/30/2025. (S)

K. L

ESIGN-005-D10202025

1. Fullname BENITEZ, CHRISTIAN PAUL N					3.Employee ID 9867	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	OLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	T _		
5.Nature of Action EXTENSION OF DETAIL		6.Effectiv e			7.Legal Authority RULE 4.506		
FROM		Descr	iption		то		
Position PLANNER III Pay Grade NX 70825 Step Rate per Hour 34.05 Department BUREAU OF STATISTICS AND PLANS Section/Division BOSP - COASTAL ZONE MANAGEMENT FTE GCMP-005		8. Position 9. Pay Gra Salary Rat 10. Depart 11. Div./Sec	de/Step te tment	PLAN Pay Gr OX Step 07 Depart BURE Section BOSP	76093 Rate 36.58 Ment AU OF STATISTICS AND n/Division - COASTAL ZONE MANA	PLANS	
Next Increment: Action No.: A-325968 Work Schedule: FULL-TIME Exp/Separation PMIS Action Request ID:			10-13-202		Bdgt Accn No.: 6 26-0930101 JON: 0930101	311001/6113001-101-	
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION Personnel Jacket No.: 552					5529		

14.REMARKS (continue in item 21,if necessary)

COMPENSATION WHILE BEING DETAILED AS A PLANNER IV, PURSUANT TO SECTION 6.008, CHAPTER 6 OF THE PERSONNEL RULES AND REGULATIONS. THIS PAY ADJUSTMENT IS EQUIVALENT TO STEP 07 OF PAY GRADE OX. THIS DETAIL IS NOT TO EXCEED 90 CALENDAR DAYS FROM THE EFFECTIVE DATE ABOVE. EXTENSION OF DETAIL APPOINTMENT IS IN ACCORDANCE WITH DOA DIRECTOR APPROVAL (HRD NO.: 25-328 DATED 09/16/2025).

K.L

ESIGN-005-D10202025

1. Fullname LIZAMA, LUCELLE R		2. Date of		3.Employee ID 60822	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	AFFECTIN	G YOUR EMPLOYMEN	IT		
5.Nature of Action TERMINATION - EXP OF APPT / CONTR		ective Date O Sep 2025		7.Legal Authority RULE13.101	
FROM	D	escription		то	
Position MULTI-MEDIA TECHNICIAN II Pay Grade Salary Per Annum 9. Pay C Salary I Step Rate per Hour 15.56 Department CHAMORRO LANGUAGE COMMISSION Section/Division		epartment v./Section	Title Position Pay Grade Salary O Step Rate O Department Section (Division		
	Exp/Separation	Date: 09-30)-	Bdgt Accn No.: 1	00-25-0672002
Action No.: A-326137 PMIS Action Date: Work Schedule: FULL-TIME Request ID: DO.		te: 10-17-202 DOA-HR-49215		JON: 0672-25-00	2
Retirement Type: DC - DEFINED CONT	JCTION		Personnel Jacket No	275939	

14.REMARKS (continue in item 21, if necessary)

EXPIRATION OF LIMITED TERM APPOINTMENT.

K. w

ESIGN-005-D10202025

1. Fullname REYES, JOEY PATRICK			2. Date of Birth		3.Employee ID 10000420	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	U OF THE F	OLLOWIN	G ACTION A	AFFECTIN	G YOUR EMPLOYME	NT	
5.Nature of Action LIMITED TERM APPOINTMENT		6.Effectiv 30 Sep			7.Legal Authority RULE 4.603		
FROM		Description		то			
Position Salary Per Annum Salary Per Annum Rate per Hour Department Section/Division 11. 1		9. Pay Gra Salary Rat 10. Depart	Position Title Pay Grade/Step H Branch Bra		Position STOREKEEPER I Pay Grade HX 32355 Step 01 Department DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division PHSS - BUREAU OF COMMUNICABLE DISEASE FTE DPH25-023		
Action No.: A-325440 Work Schedule:	Exp/Separa 2026 PMIS Action Request ID	on Date:	09-29 10-14-202 10-14-333316	25	Bdgt Acen No.: 1713123 JON: 1713-25-123	6111/113001-101-25-	
Retirement Type: DC - DEFINED CONT	TRIBUTION	DEDUCTIO	ON		Personnel Jacket N	lo.: 19910905	
		191					

14.REMARKS (continue in item 21,if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. PURSUANT TO RULE 4.603 (A), OF THE PERSONNEL RULES AND REGULATIONS, THIS APPOINTMENT IS NOT TO EXCEED ONE (1) YEAR FROM THE EFFECTIVE DATE ABOVE.

K.L

ESIGN-005-D10202025

1. Fullname FRANCISCO, ANTHONY I			2. Date of		3.Employee ID 6774	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	U OF THE	FOLLOWIN	G ACTION A	AFFECTIN	C YOUR EMPLOYME	NT	
5.Nature of Action RETIREMENT SERVICE		6.Effectiv	e Date o 2025		7.Legal Authority 4GCA CH8		
FROM		Description		ТО			
Position— CORRECTION OFFICER I —Pay Grade————————————————————————————————————		8. Position		Position—Pay Gr			
Step————————————————————————————————————		Salary Ra	- 1	Step0			
DEPARTMENT OF CORRECTIONS		10. Department		Depart	Department		
Section/Division DOC - ADULT CORRECTION FACILITY	11. Div./s		Div./Section		n/Division—————		
		12. FTE		FTE—			
Next Increment:	2025	ration Date			25-1310003	6111001/6113001-100-	
Action No.: A-325924 Work Schedule: FULL-TIME	PMIS Acti Request I		10-13-202 A-HR-52007		JON: 1310003		
Retirement Type: DB 1.75 - DEFINED E	BENEFIT 1.7	' 5		·	Personnel Jacket N	lo.: 2762	

14.REMARKS (continue in item 21, if necessary)

LUMP SUM PAYMENT IS AUTHORIZED AND WILL BE MADE FOR ANNUAL LEAVE UP TO 320 HOURS. PURSUANT TO 4 GCA, 2108 AND RULE 4.502, CHAPTER 4 OF THE PERSONNEL RULES AND REGULATIONS, YOU MAY BE CONSIDERED FOR RE-EMPLOYMENT FOR THE CLASS OF POSITION IN WHICH YOU LAST HAD A PERMANENT APPOINTMENT. WITHIN FOUR (4) YEARS FROM THE EFFECTIVE DATE OF SEPARATION, YOU MAY CONTACT THE APPOINTING AUTHORITY OF YOUR FORMER DEPARTMENT FOR CONSIDERATION. EMPLOYEES MUST PASS DRUG TESTING PRIOR TO RE-EMPLOYMENT. YOU MAY ALSO APPLY FOR THE POSITION IF IT SHOULD BE ANNOUNCED.

K. L

ESIGN-005-D10202025

1. Fuliname RODRIGUEZ, RHIA D		2. Date of Birth XX XXX XXXX		3.Employee ID 59715	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	IG ACTION	AFFECTIN	G YOUR EMPLOYME	NT	
5.Nature of Action PROMOTION		/e Date p 2025		7.Legal Authority RULE 4.506		
FROM		ription		то		
Pay Grade MX 49731 Step O1 Payer Annum 49731 Rate per Hour 23.91		ade/Step SYST Pay G NX Step 01				
OFFICE OF TECHNOLOGY	11. Div./Se	ection		FFICE OF TECHNOLOGY		
FTE		12. FTE 2100		98		
	Exp/Separation Date PMIS Action Date: Request ID: DO	10-13-202		Bdgt Accn No.: 001 JON: 2100001	6*** 001 100 26 2100	
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCTI	ON		Personnel Jacket N	lo.: 93085	

14.REMARKS (continue in item 21, if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS. Selected from Certification of Eligibles CI25-345 dated 9/16/25

K. W

ESIGN-005-D10202025

1. Fullname BIELING, FRIEDRICH C	2. Date of Birth		3.Employee ID 8019	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YO	U OF THE FOLLOWIN	IG ACTION A	FFECTING	G YOUR EMPLOYME	NT
5.Nature of Action AMENDMENT	6.Effectiv 29 Se	e Date p 2025		7.Legal Authority PR&R	
FROM	Desci	ription		то	
Pay Grade——Salary Per Annum———————————————————————————————————		rade/Step te BC Step—36		SICIAN SPEC (BOARD CERTIFIED) Strade Salary 318586	
Department	10. Depar	tment	Department DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division PHSS - BUREAU OF PRIMARY CARE SERVICES		
Section/Division—	11. Div./Se	ection			
FTE————————————————————————————————————			6517		
Next Increment:	Exp/Separation Date 2027			Bdgt Accn No.: 1716005	6111/6113001-105-23-
Action No.: A-326086 Work Schedule: PART-TIME	PMIS Action Date: Request ID: DO	10-15-2025 A-HR-110860		JON: 171623005	
Retirement Type: DC - DEFINED CON	TRIBUTION DEDUCTI	ON		Personnel Jacket N	No.: 3825

14.REMARKS (continue in item 21,if necessary)

THIS ACTION AMENDS PA#A-325193 (CONTRACTUAL APPOINTMENT) RATE AND SALARY SHOULD READ: 153.17 RATE (\$318586.00 SALARY).

K.L

ESIGN-005-D10202025

1. Fuliname RIVERA, JULIA N		2. Date of Birth		3.Employee ID 60817	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	IG ACTION A	FFECTING	G YOUR EMPLOYMEN	Т	
5.Nature of Action PROBATIONAL APPOINTMENT	6.Effectiv 29 Se	e Date p 2025		7.Legal Authority RULE4.602		
FROM	Descr	ription		то		
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department Section/Division	9. Pay Gra Salary Ra	8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section Position Po		Position—PUBLIC INFORMATION OFFICER Pay Grade—Salary—49731 Step—Rate—23.91 Department—DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division—PHSS - GENERAL ADMINISTRATION FTE—7057		
FIE	12. FTE					
PMIS	Separation Date: Action Date:	e: 10-14-202 A-HR-480676	_	Bdgt Accn No.: 5 611*001-100-25-17000 JON: 170025001	5100A251700GA001 01	
Retirement Type: DB 1.75 - DEFINED BENEF	IT 1.75			Personnel Jacket No	27 5907	

14.REMARKS (continue in item 21, if necessary)

APPOINTMENT IS SUBJECT TO COMPLETION OF A SIX (6) MONTH INITIAL PROBATIONARY PERIOD. SELECTED FROM CERTIFICATION OF ELIGIBLES CI25-316; DATED:08/22/2025 CONTINUE ALL BENEFITS AND DEDUCTIONS.

K. L

ESIGN-005-D10202025

1. Fuliname BIELING, FRIEDRICH C		2. Date of Birth XX XXX XXXX		3.Employee ID 8019	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF TH	E FOLLOWIN	G ACTION A	FFECTING	C YOUR EMPLOYMEN	IT
5.Nature of Action CONTRACTUAL APPOINTMENT	6.Effectiv 29 Se	e Date o 2025	27	7.Legal Authority UNASSIGNED	
FROM	Descr	iption		то	
Pay Grade Salary Per Annum 9. P Salary Per Annum 0 Salary Per Annum 10. I		rtment DEPAI		on—SICIAN SPEC (BOARD CERTIFIED) rade—Salary—315926 Rate—157.13 tment—ARTMENT OF PUBLIC HEALTH & SOCIAL SE on/Division—S-BUREAU OF PRIMARY CARE SERVICES	
Next Increment: Exp/Se	paration Date	e: 09-28-		Bdgt Accn No.:	5111/6113001-105-23-
2027 Action No.: A-325193 PMIS A	Action Date:	10-13-2025		1716005 JON: 171623005	5111/6113001-103-23-
Retirement Type: DC - DEFINED CONTRIBUT	ION DEDUCTION	ON		Personnel Jacket No	3825

14.REMARKS (continue in item 21, if necessary)

EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. PER EMPLOYMENT CONTRACT, WILL BE ON A PART-TIME BASIS NOT TO EXCEED 30 HOURS PER WEEK. EMPLOYEE IS ENTITLED TO RETIREMENT AND MEDICARE. THIS CONTRACTUAL APPOINTMENT IS NOT TO EXCEED 24 MONTHS FROM THE EFFECTIVE DATE ABOVE.

K.L

ESIGN-005-D10202025

1. Fullname TOM, MALIA L		2. Date of Birth		3.Employee ID 60362	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF TH	IE FOLLOWIN	IG ACTION	AFFECTING	G YOUR EMPLOYMEN	IT	
5.Nature of Action LIMITED TERM APPOINTMENT	6.Effectiv 27 Se	e Date p 2025		7.Legal Authority RULE 4.603(B)		
FROM	Desci	ription		то		
Pay Grade Salary Per Annum	8. Positio		Position COMP	PUTER TECHNICIAN I		
0	1 1 -	9. Pay Grade/Step Salary Rate		32355		
Step————————————————————————————————————			Step	1 ' 1		
	10. Depar	rtment [tment M ENVIRONMENTAL PROTECTION AGENCY		
Section/Division	11. Div./Se			Section/Division— GEPA - ADMINISTRATION		
FTE	12. FTE		FTE—GEPA-	-AR1		
Action No.: A-326042 2026 Work Schedule: FULL-TIME PMIS A	paration Date:	10-14-202	25	Bdgt Accn No.: 6 2295107 & 6113001-10 JON: 2295107	5111001-101-24- 1-24-2295107	
Retirement Type: DC - DEFINED CONTRIBUTION	ON DEDUCTION	ON		Personnel Jacket No	o.: 195008	

14.REMARKS (continue in item 21, if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS FROM LAST APPOINTMENT. PURSUANT TO RULE 4.603 (A), OF THE PERSONNEL RULES AND REGULATIONS, THIS APPOINTMENT IS NOT TO EXCEED ONE (I) YEAR FROM THE EFFECTIVE DATE ABOVE.

K.L

ESIGN-005-D10202025

1. Fullname MANALOTO, MA.CRISTINA Q		2. Date of Birth		3.Employee ID 10192	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF THE	HE FOLLOWIN	IG ACTION	AFFECTING	G YOUR EMPLOYMEN	IT
5.Nature of Action CONTRACTUAL APPOINTMENT	6.Effectiv 26 Se	e Date p 2025		7.Legal Authority UNASSIGNED	
FROM	Desci	ription		то	
Position Pay Grade Salary Per Annum 9. Pay Salary Salary Pay Grade 0 Pay Grade 0		tment	Pay Gr. BC Step— 26 Depart DEPAI	Salary 233755.71 Rate 112.38 artment PARTMENT OF PUBLIC HEALTH & SOCIAL SE Sion/Division SS - BUREAU OF PRIMARY CARE SERVICES	
Next Increment: Exp/Se	eparation Date	e: 09-25	5-2027	Bdgt Accn No.: 6	5111/6113001-105-23-
Action No.: A-326094 PMIS Action Request ID: Work Schedule: PART-TIME		10-16-202	25	1716005 JON: 171623005	
Retirement Type: SOCIAL SECURITY/MEDICA	RE DEDUCTIO	N	-	Personnel Jacket No	5844

14.REMARKS (continue in item 21, if necessary)

EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. PER EMPLOYMENT CONTRACT, WILL BE ON A PART-TIME BASIS - NOT TO EXCEED 16 HOURS(2 DAYS) PER WEEK. EMPLOYEE IS ONLY ENTITLED TO MEDICARE, RETIREMENT BENEFITS AND PENSION CREDITS DUE UNCLASSIFIED EPLOYEES IF APPLICABLE. THIS CONTRACTUAL APPOINTMENT IS NOT TO EXCEED 24 MONTHS FROM THE EFFECTIVE DATE ABOVE.

K.L

ESIGN-005-D10202025

1. Fullname SILVERIO, ALEXIS Q			2. Date of Birth		3.Employee ID 8855	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YO	U OF THE	FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action REGULAR RETIREMENT - DEFINED CONTRIBUTION		6.Effectiv 26 Sep	e Date o 2025		7.Legal Authority 4 GCA8211	
FROM	e	Descr	iption	-	то	
Position HEALTH SERVICES ADMINISTRATOR Pay Grade Salary Per Annum 83095 Step Rate per Hour 39.95 Department DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division PHSS - BUREAU OF COMMUNITY HEALTH SER\		10. Department		ion		
Next Increment:	Exp/Sepa	ration Date	e:		Bdgt Accn No.:	SXXX001-100-25-
Action No.: A-325913 Request ID: Work Schedule: FULL-TIME		DOA			1714001 JON: 1714-25-001	
Retirement Type: DC - DEFINED CON	TRIBUTION	DEDUCTION	NC		Personnel Jacket No	5.: 4529

14.REMARKS (continue in item 21, if necessary)

LUMP SUM PAYMENT IS AUTHORIZED AND WILL BE MADE FOR ANNUAL LEAVE UP TO 320 HOURS AND 50% OF ANY UNUSED SICK LEAVE. PURSUANT TO 4 GCA, 2108 AND RULE 4.502, CHAPTER 4 OF THE PERSONNEL RULES AND REGULATIONS, YOU MAY BE CONSIDERED FOR RE-EMPLOYMENT FOR THE CLASS OF POSITION IN WHICH YOU LAST HAD A PERMANENT APPOINTMENT. WITHIN FOUR (4) YEARS FROM THE EFFECTIVE DATE OF SEPARATION, YOU MAY CONTACT THE APPOINTING AUTHORITY OF YOUR FORMER DEPARTMENT FOR CONSIDERATION. EMPLOYEES MUST PASS DRUG TESTING PRIOR TO RE-EMPLOYMENT. YOU MAY ALSO APPLY FOR THE POSITION IF IT SHOULD BE ANNOUNCED.

K-

ESIGN-005-D10202025

1. Fullname LIZAMA, CARL J		2. Date of Birth XX XXX XXXX		3.Employee ID 5143	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION				G YOUR EMPLOYMEN	IT
la contraction of the contractio		re Date p 2025		7.Legal Authority RULE 10.008	
FROM	Desc	ription	-	то	
Position POLICE OFFICER III Pay Grade KL25 Step 17 Rate per Hour 46.94 Department GUAM POLICE DEPARTMENT Section/Division GPD - NEIGHBORHOOD PATROL FTE 3505	8. Positio 9. Pay Gra Salary Ra 10. Depar 11. Div./Se 12. FTE	ade/Step te tment	POLICE Pay Gr KL25 Step— 18 Depart GUAM	101042 Rate 48.58	
Next Increment: Exp/Separation				Bdgt Accn No.:	
Action No.: A-326182 Work Schedule: FULL-TIME PMIS Action Date: Request ID: DOA		10-17-202 4-HR-8 703 4	-	JON: 1220-24-00	1
Retirement Type: DB 1.75 - DEFINED B	BENEFIT 1.75			Personnel Jacket No	o.: 19909710

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: 09/25/2023 TO 09/24/2025. (S)

K. W

ESIGN-005-D10202025

1. Fuliname MANALOTO, MA.CRISTINA Q			2. Date of		3.Employee ID	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YO	FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	<u> </u>		
5.Nature of Action TERMINATION - EXP OF APPT / CONTRACT		6.Effectiv	e Date 0 2025		7.Legal Authority RULE13.101		
FROM		Descr	iption		то		
Position—PHYSICIAN SPEC (BOARD CERTIFIED) Pay Grade—Salary Per Annum—225851 Step—Rate per Hour—108.58 Department—DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division—PHSS - BUREAU OF PRIMARY CARE SERVICES FTE—6469		8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		—Pay Gr —Step—	Pay Grade Salary 0 Step Rate 0 Department Section/Division		
Next Increment: Action No.: A-326092 Work Schedule: PART-TIME	PMIS Acti	ion Date:	9: 09-25 10-15-202 A-HR-67285	25	Bdgt Accn No.: 6 1716005 JON: 1716-23-005		
Retirement Type: SOCIAL SECURITY/N	DEDUCTIO	N		Personnel Jacket No	o.: 5844		
1/ DEMARKS (continue in item 21 if access	a						

14.REMARKS (continue in item 21, if necessary)

EXPIRATION OF CONTRACTUAL APPOINTMENT.

K. w

ESIGN-005-D10202025

1. Fullname PANGILINAN, ANNMARIE C		2. Date of Birth		3.Employee ID 60185	4.Date Requested 20 Oct 2025			
THIS IS TO NOTIFY YOU O	THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT							
5.Nature of Action TERMINATION	-	6.Effective Date 24 Sep 2025		7.Legal Authority RULE13.101				
FROM	Descr	iption		то				
Position—CARECOORDINATOR Pay Grade—Salary Per Annum—9. Pay Grade—NX 54918 Step—Rate per Hour—26.4 Department—GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division—GBHWC - DIRECTOR'S OFFICE FTE—WGH.003 8. Position 9. Pay Grade Salary Reserved Salar		de/Step te	Position Pay Grade Salary O Step Rate O Department Section/Division					
Next Increment: Exp/Separation Date 2025		9: 09-24-		Bdgt Accn No.: 602	5111001-602-25-			
Action No.: A-325931 PM	PMIS Action Date: 10-13-2025 Request ID: DOA-HR-338714			JON: 2300 25 024				
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION Personnel Jacket No.: 173911					o.: 173911			

14.REMARKS (continue in item 21, if necessary)

NO LUMP SUM AUTHORIZED.

KIL

ESIGN-005-D10202025

1. Fullname TAINATONGO, DONNY J		2. Date of Birth XX XXX XXXX	3.Employee ID	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YO	U OF THE FOLLOWIN	G ACTION AFFECT	NG YOUR EMPLOYM	ENT	
5.Nature of Action SALARY INCREMENT	6.Effective 23 Sep	1 7 7	7.Legal Authority RULE 10.008		
FROM	Descr	iption	ТО	5	
Position ENVIRONMENTAL TECHNICIAN II Pay Grade IX 34886 Step Rate per Hour 16.77 Department DEPARTMENT OF PUBLIC HEALTH & SOC Section/Division PHSS - ENVIRONMENTAL HEALTH FTE 6136	9. Pay Gra Salary Rad 10. Depart 11. Div./Se	n Title Inde/Step Ite Inde/Inde/Step Ite Inde/Inde/Inde/Inde/Inde/Inde/Inde/Inde/	Grade Salary 36209 Rate 17.41 PARTMENT OF PUBLIC HEALTH & SOCIAL SE Stion/Division SS - ENVIRONMENTAL HEALTH		
Next Increment:	Exp/Sampretion Bate		Dalan Assan No.	511202/5117001 500	
Action No.: A-326090 Work Schedule: FULL-TIME	Exp/Separation Date: PMIS Action Date: Request ID: DOA	10-15-2025	Bdgt Accn No.: 26-1740201 JON: 1740-24-2	6111001/6113001-600-	
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION Personnel Jacket No.: 199					

14.REMARKS (continue in item 21,if necessary)

WAITING PERIOD FROM 09/23/24 TO 09/22/2025. (S)

K. w

ESIGN-005-D10202025

1. Fullname MURPHY, CAMERON C	2. Date of Birth	3.Employee ID 37874	4.Date Requested 20 Oct 2025						
THIS IS TO NOTIFY YOU	THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT								
5.Nature of Action TERMINATION - EXP OF APPT / CONTRAC	6.Effectiv	e Date 2025	7.Legal Authority RULE13.101						
FROM	Descr	iption	ТО						
Position—CUSTOMER SERVICE REP Pay Grade—Salary Per Annum—32355 Step—Rate per Hour—15.56 Department—DEPARTMENT OF PUBLIC HEALTH & SOCIAL Section/Division—PHSS - BUREAU OF FAMILY HEALTH AND NUMBER 15.50	11. Div./Se	n Title ide/Step te St tment Se	y Grade Salary 0 ep Rate 0 ep Ction/Division						
· ·	xp/Separation Date:			6111/113001-101-23-					
	10-14-2025 A-HR-085564	1719103 JON: 1719-23-103	3						
Retirement Type: DC - DEFINED CONTR	Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION Personnel Jacket No.: 52955								
1/ DEMARKS (continue in item 21 if necessary)									

14.REMARKS (continue in item 21, if necessary)

EXPIRATION OF LIMITED TERM APPOINTMENT. NO LUMP SUM REQUESTED.

K. W

ESIGN-005-D10202025

1. Fuliname IIJIMA, ANTHONY PORTKA		2. Date of		3.Employee ID 6465	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	U OF THE FOLLOV	VING ACTION	AFFECTIN	IG YOUR EMPLOYM	ENT
5.Nature of Action NAME CHANGE		6.Effective Date 20 Sep 2025		7.Legal Authority PR&R	
FROM	De	scription		ТО	
Position—SCHOOL BUS DRIVER SUPERVISOR Pay Grade—Salary Per Annum—9. Pay Salary Step—Rate per Hour—22.78 Department—DEPARTMENT OF PUBLIC WORKS Section/Division		partment /Section	SCHO Pay G JX Step- 07 Depar DEPA Section DPW	Position—SCHOOL BUS DRIVER SUPERVISOR Pay Grade—Salary—47391 Step—Rate—Rate—Rate—Rate—Rate—Rate—Rate—Rate	
Next Increment: Exp/Separation Date: PMIS Action Date: 10-14-2025		25	Bdgt Accn No.: 25-1030216	6111001/6113001-205-	
Action No.: A-325914 Work Schedule: FULL-TIME	Request ID: DOA-HR-514663			JON: 1030216	
Retirement Type: DB 1.75 - DEFINED BENEFIT 1.75				Personnel Jacket	No.: 2424

14.REMARKS (continue in item 21,if necessary)

NAME CHANGE FROM ANTHONY K. PORTKA TO ANTHONY PORTKA IIJIMA, BY VIRTUE OF MARRIAGE.

K.L

ESIGN-005-D10202025

1. Fuliname MACASERO, MARY ANN A		2. Date of Birth		3.Employee ID 9234	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF THE	FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action RETIREMENT SERVICE	-	6.Effective Date 19 Sep 2025		7.Legal Authority 4GCA CH8	
FROM	Desci	iption		то	
Position—SOCIAL WORKER II Pay Grade—Salary Per Annum—68269 Step—Rate per Hour—32.82 Department—GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division—GBHWC - COMMUNITY SUPPORT	8. Positio 9. Pay Gra Salary Ra 10. Depar	nde/Step te tment	—Pay Gr —Step— —Depart	Pay Grade Salary 0	
FTE—FMT.0068	12. FTE	_	FTE		
PMIS Ac	Exp/Separation Date: 09-19-202 PMIS Action Date: 10-13-2025 Request ID: DOA-HR-492340			Bdgt Accn No.: 6 2300003/6113001-602 JON: 230024003	2-24-2300003
Retirement Type: DB 1.75 - DEFINED BENEFIT 1.75 Personnel Jacket No.: 4931					

14.REMARKS (continue in item 21,if necessary)

LUMP SUM PAYMENT IS AUTHORIZED AND WILL BE MADE FOR ANNUAL LEAVE UP TO 320 HOURS. PURSUANT TO 4 GCA, 2108 AND RULE 4.502, CHAPTER 4 OF THE PERSONNEL RULES AND REGULATIONS, YOU MAY BE CONSIDERED FOR RE-EMPLOYMENT FOR THE CLASS OF POSITION IN WHICH YOU LAST HAD A PERMANENT APPOINTMENT. WITHIN FOUR (4) YEARS FROM THE EFFECTIVE DATE OF SEPARATION, YOU MAY CONTACT THE APPOINTING AUTHORITY OF YOUR FORMER DEPARTMENT FOR CONSIDERATION. EMPLOYEES MUST PASS DRUG TESTING PRIOR TO RE-EMPLOYMENT. YOU MAY ALSO APPLY FOR THE POSITION IF IT SHOULD BE ANNOUNCED.

K. W

ESIGN-005-D10202025

1. Fullname DIEGO, ROBERT M	2. Date of Birth		3.Employee ID 9720	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION	AFFECTING	G YOUR EMPLOYMEN	Т
		6.Effective Date 16 Sep 2025		7.Legal Authority PR&R	
FROM	Descr	iption		то	
Pay Grade Salary Per Annum 0 Step Rate per Hour 0 Department Section/Division FTE	8. Position 9. Pay Gra Salary Rat 10. Depart 11. Div./Se	nde/Step te tment	Pay Gr. DX Step 05 Depart MAYO	Rate————————————————————————————————————	N MAYOR'S OFFICE
PMIS	Exp/Separation Date: PMIS Action Date: 10-13-202 Request ID: DOA-HR-273055			Bdgt Accn No.: 5100A252880SE001/1 JON:	11/113
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION Personnel Jacket No.: 5389					

14.REMARKS (continue in item 21,if necessary)

THIS ACTION AMENDS PA# A-324999 (EXEMPTED APPOINTMENT) GRADE, STEP AND SALARY SHOULD READ: DX-05 \$12.96 P/H (\$26955.00 P/A)

K.L

ESIGN-005-D10202025

1. Fuliname IMANIL, ORLY L	2. Date of Birth		3.Employee ID 3809	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	U OF THE FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	(T
l l		5.Effective Date 15 Sep 2025		7.Legal Authority RULE 10.008	
FROM	Descr	iption		то	
Position—POLICE SERGEANT I Pay Grade—Salary Per Annum—91506 Step—Rate per Hour—43.99 Department—GUAM POLICE DEPARTMENT Section/Division—GPD - NEIGHBORHOOD PATROL FTE—3302	8. Positio 9. Pay Gra Salary Ra 10. Depar 11. Div./Se 12. FTE	nde/Step te tment	POLICE Pay Gr LL25 Step 14 Depart GUAN	94707 Rate 45.53 M POLICE DEPARTMENT n/Division NEIGHBORHOOD PATR	
Next Increment: Exp/Separation Date				Bdgt Accn No.:	
Action No.: A-326186 Work Schedule: FULL-TIME PMIS Action Date: 10-17-202: Request ID: DOA-HR-191852				JON: 1220-24-00	1
Retirement Type: DB 1.75 - DEFINED B		Personnel Jacket No	o.: 2000-717		

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: 09/15/2023 TO 09/14/2025. (S)

K.L

ESIGN-005-D10202025

1. Fullname LIZAMA, JOHN PATRICK G		2. Date of Birth		3.Employee ID 4492	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	U OF THE FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYME	NT	
		6.Effective Date		7.Legal Authority RULE 10.008		
FROM	Descr	iption		то		
Position—POLICE SERGEANT I Pay Grade—Salary Per Annum—98023 Step—Rate per Hour—47.13 Department—GUAM POLICE DEPARTMENT Section/Division—GPD - NEIGHBORHOOD PATROL FTE—3417	9. Pay Gra Salary Rad 10. Depart 11. Div./Se	nde/Step te tment	POLICE Pay Gr LL25 Step— 16 Depart GUAN Section	101455 —Rate———————————————————————————————————		
Next Increment: Exp/Separation Date: PMIS Action Date:		10-17-202	05	Bdgt Accn No.: JON: 1220-24-00	.1	
Action No.: A-326146 Work Schedule: FULL-TIME	Request ID: DOA-HR-254777			JUN: 1220-24-00	=	
Retirement Type: DB 1.75 - DEFINED BENEFIT 1.75				Personnel Jacket N	o.: 19909591	

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: FROM 09/15/2023 TO 09/14/2025 (S)

K.L

ESIGN-005-D10202025

1. Fullname ESTAMPADOR, MA RODELIA C	2. Date of Birth		3.Employee ID 8817	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	IG ACTION A	AFFECTING	G YOUR EMPLOYMEN	iT -	
5.Nature of Action AMENDMENT		6.Effective Date 15 Sep 2025		7.Legal Authority PR&R		
FROM	Desci	ription		то		
Pay Grade—Salary Per Annum—0 Step—Rate per Hour—0 Department—Section/Division—Section		Description Position Title Pay Grade/Step ary Rate Department Department Div./Section Description Position ACCO Pay Gr MX Step— 01 Department DEPA Section DOA - FTE		Salary 49731 Rate 23.91 ARTMENT OF ADMINISTRATION On/Division - DIVISION OF ACCOUNTS		
1	Exp/Separation Date:	e: 06-10-		Bdgt Accn No.: 6	5111001/6113001-100-	
Action No.: A-326044 Request ID: DOA-HR-23443 Work Schedule: FULL-TIME			_	JON: 0660-25-00	07	
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION Personnel Jacket No.: 4492					o.: 4492	
1/ DEMARKS (continue in item 2) if pages	and and					

14.REMARKS (continue in item 21, if necessary)

THIS ACTION AMENDS PA#324721 (PROBATIONAL APPOINTMENT) NAME SHOULD READ MA RODELIA C ESTAMPADOR INSTEAD OF RODELIA C ESTAMPADOR.

K. W

ESIGN-005-D10202025

1. Fullname MENO, ROSALINE B		2. Date of Birth		3.Employee ID 60736	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	OF THE FOLLOWIN	IG ACTION AF	FECTING	S YOUR EMPLOYMEN	Т	
5.Nature of Action	6.Effectiv	e Date		7.Legal Authority		
REGULAR RETIREMENT - DEFINED	12 Sep	2025		4 GCA8211		
CONTRIBUTION	=					
FROM	Descr	ription		ТО		
Position—CLERK TYPIST II Pay Grade—Salary Per Annum—34244 Step—Rate per Hour—16.46 Department—Department—	9. Pay Gra	Salary Rate Step-		Grade————————————————————————————————————		
DEPARTMENT OF PUBLIC HEALTH & SOCIA	L SE	tment	Depart			
Section/Division———————————————————————————————————	11. Div./Se	ection	Section/Division———————————————————————————————————			
6708	12. FTE		FTE			
Action No.: A-326123	PMIS Action Date: 10-17-			Bdgt Accn No.: 67 1729101 JON: 1729-25-101	11*001-101-25-	
Work Schedule: FULL-TIME						
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION				Personnel Jacket No	264969	

14.REMARKS (continue in item 21,if necessary)

NO LUMP SUM PURSUANT TO 4 GCA, 2108 AND RULE 4.502, CHAPTER 4 OF THE PERSONNEL RULES AND REGULATIONS, YOU MAY BE CONSIDERED FOR RE-EMPLOYMENT FOR THE CLASS OF POSITION IN WHICH YOU LAST HAD A PERMANENT APPOINTMENT. WITHIN FOUR (4) YEARS FROM THE EFFECTIVE DATE OF SEPARATION, YOU MAY CONTACT THE APPOINTING AUTHORITY OF YOUR FORMER DEPARTMENT FOR CONSIDERATION. YOU MAY ALSO APPLY FOR THE POSITION IF IT SHOULD BE ANNOUNCED. I certify that this GG1 submission is true and correct. All pertinent documents are attached. The Division Chief has reviewed and concurred with the accurateness of the documents. All information contained in the GG1 have been verified. Subject to the availability of federal funds. 10/08/2025 HR Technical Review Completed HR26-027 / GQ

K. W

ESIGN-005-D10202025

1. Fullname LIMO, MELVA C		2. Date of Birth		3.Employee ID 3850	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	J OF THE FOLLOWIN	NG ACTION AFFI	ECTINO	YOUR EMPLOYMEN	Т
5.Nature of Action CONVERSION TO PERMANENT STATUS		6.Effective Date 10 Sep 2025		7.Legal Authority RULE 4.602 (D)(1)	
FROM	Desc	ription		то	
Position ADMINISTRATIVE SERVICES OFFICER Pay Grade NX Step Rate per Hour 26.4 Department DEPARTMENT OF PARKS AND RECREATION Section/Division 8. Position 9. Pay Salary 10. Design of the section of		en Title ade/Step ate	Position ADMINISTRATIVE SERVICES OFFICER Pay Grade NX Step 01 Department DEPARTMENT OF PARKS AND RECREATION Section/Division DPR - DIRECTOR'S OFFICE FTE 603		
Next Increment: Exp/Separation Date: PMIS Action Date:		:e: 10-14-2025		Bdgt Accn No.: 6 2500002 - 111/113	51110001-100-25-
Action No.: A-325997 Work Schedule: FULL-TIME Request ID: DOA-HR-332689				JON: 2500-25-00	2
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION Personnel Jacket No.: 19904781					

14.REMARKS (continue in item 21, if necessary)

SELECTED FROM CERTIFICATION OF ELIGIBLES. CERTIFICATE NUMBER CI25-247 DATED 5/28/25. CONTINUE ALL BENEFITS AND DEDUCTIONS.

K.L

ESIGN-005-D10202025

1. Fullname CRUZ, JAMES P		2. Date of E	XX	3.Employee ID 10053	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT							
5.Nature of Action PROMOTION		6.Effective Date 08 Sep 2025		7.Legal Authority RULE 4.506			
FROM	Descr	ription		то			
Pay Grade LX 60225 Step Rate per Hour 28.95 Department GUAM ENVIRONMENTAL PROTECTION AGENC) Section/Division		n Title ide/Step te tment	Pay Gr. MX Step 08 Depart GUAN Section	Rate 30.83 Department GUAM ENVIRONMENTAL PROTECTION AGENCY Section/Division GEPA - AIR & LAND PROGRAMS FTE			
Next Increment: Exp/Separation Da		e: 10-13-202		Bdgt Accn No.: 6 2295107 & 6113001-10	5111001-101-24-		
Action No.: A-325959 Work Schedule: FULL-TIME PMIS Action Date: Request ID: DOA				JON: 2295107	I-24-2295IU/		
Retirement Type: DB 1.75 - DEFINED E	Retirement Type: DB 1.75 - DEFINED BENEFIT 1.75				5704		

14.REMARKS (continue in item 21, if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS. SELECTED FROM CERTIFICATION OF ELIGIBLES CI25-296 DATED 08/04/2025.

K. L

ESIGN-005-D10202025

1. Fullname HERNANDEZ, MARY ELIZABETH C		2. Date of Birth XX XXX XXXX		3.Employee ID 9488	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE	FOLLOWIN	IG ACTION	AFFECTING	G YOUR EMPLOYMEN	IT	
5.Nature of Action CONTRACTUAL APPOINTMENT	6.Effectiv 07 Se	e Date p 2025		7.Legal Authority UNASSIGNED		
FROM	Descr	ription		то		
Pay Grade————————————————————————————————————	9. Pay Gra Salary Ra	Crade/Step Pay Gi		SICIAN SPEC (BOARD CERTIFIED) Srade 126508.59		
—Section/Division—	11. Div./Se			DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division		
-FTE-	12. FTE		PHSS FTE 6514			
2027 Action No.: A-325754 PMIS Ac	earation Date:	10-14-202	25	Bdgt Accn No.: 6 1716005 JON: 1716-23-005	5111/6113001-105-23-	
Retirement Type: SOCIAL SECURITY/MEDICARE DEDUCTION				Personnel Jacket No	5169	

14.REMARKS (continue in item 21, if necessary)

EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION AND MANDATORY DRUG TEST. PER EMPLOYMENT CONTRACT, WILL BE ON A PART-TIME BASIS - 16 HOURS(2 DAYS) PER WEEK. EMPLOYEE IS ENTITLED TO RETIREMENT AND MEDICARE. THIS CONTRACTUAL APPOINTMENT IS NOT TO EXCEED 24 MONTHS FROM THE EFFECTIVE DATE ABOVE.

K.L

ESIGN-005-D10202025

1. Fullname SALAS, JULIE L	2. Date of Birth XX XXX XXXX		3.Employee ID 8844	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION A	AFFECTIN	G YOUR EMPLOYME	NT_	
5.Nature of Action SALARY INCREMENT	6.Effectiv 07 Sep	e Date p 2025		7.Legal Authority RULE 10.008		
FROM	Descr	Description		то		
Position———————————————————————————————————	9. Pay Gra	8. Position Title 9. Pay Grade/Step		Position REVENUE OFFICER III Pay Grade Salary KX 56795		
Step————————————————————————————————————	Salary Rat	te	Step—	Rate 27.31		
DEPARTMENT OF REVENUE & TAXATION	10. Depart	tment	('	DEPARTMENT OF REVENUE & TAXATION		
Section/Division———————————————————————————————————	11. Div./Se	ection	Section/Division———————————————————————————————————			
FTE	12. FTE	12. FTE		FTE—2279		
PMI	o/Separation Date IS Action Date: quest ID: DOA	10-13-202	_	Bdgt Accn No.: 111/113 JON: 0810 22 00	5100A260810CE007- 07-111/113	
Retirement Type: NON BASE - DEFINED B	ENEFIT		L.	Personnel Jacket I	No.: 4519	

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: FROM 03/07/2024 TO 09/06/2025. (S)

KL

ESIGN-005-D10202025

1. Fullname LUJAN, JAMES R	2. Date of Birth XX XXX XXXX		3.Employee ID 9830	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE	FOLLOWIN	G ACTION A	FFECTING	G YOUR EMPLOYMEN	T
5.Nature of Action RESIGNATION	6.Effectiv 05 Sep	e Date p 2025		7.Legal Authority RULE 13.002	
FROM	Description			то	
Position— CUSTOMS & QUARANTINE OFFICER II Pay Grade— JL21 Salary Per Annum— 54955 Rate per Hour— 26.42 Department— CUSTOMS AND QUARANTINE AGENCY Section/Division— C & Q - DRUG DETECTOR DOG UNIT FTE— C-431	8. Position Title 9. Pay Grade/Step Salary Rate Step Depart		Depart	rade————————————————————————————————————	
Next Increment: Exp/Sepa 2025	aration Date	e: 09-05-		Bdgt Accn No.: 6 25-3230211	5111001/6113001-209-
Action No.: A-326125 PMIS Act Work Schedule: FULL-TIME Request	i on Date: ID: DOA	10-17-2025 A-HR-749175	5	JON: 3230-25-211	-111/113
Retirement Type: DB 1.75 - DEFINED BENEFIT 1.	75			Personnel Jacket No	5497

14.REMARKS (continue in item 21, if necessary)

LUMP SUM PAYMENT IS AUTHORIZED AND WILL BE MADE FOR ANNUAL LEAVE UP TO 320 HOURS. PURSUANT TO 4 GCA, 2108 AND RULE 4.502, CHAPTER 4 OF THE PERSONNEL RULES AND REGULATIONS, YOU MAY BE CONSIDERED FOR RE-EMPLOYMENT FOR THE CLASS OF POSITION IN WHICH YOU LAST HAD A PERMANENT APPOINTMENT. WITHIN FOUR (4) YEARS FROM THE EFFECTIVE DATE OF SEPARATION, YOU MAY CONTACT THE APPOINTING AUTHORITY OF YOUR FORMER DEPARTMENT FOR CONSIDERATION. YOU MAY ALSO APPLY FOR THE POSITION IF IT SHOULD BE ANNOUNCED.

KL

ESIGN-005-D10202025

1. Fuliname PILANTE, EDGAR DC		2. Date of Birth XX XXX XXXX		3.Employee ID 10994	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT							
5.Nature of Action PROMOTION		6.Effective Date 27 Aug 2025		7.Legal Authority RULE 4.506			
FROM		Descr	iption		то		
Position BUSINESS TAX SERVICE SPEC I Pay Grade HX 37545 Step Rate per Hour 18.05 Department DEPARTMENT OF REVENUE & TAXATION Section/Division		8. Position 9. Pay Gra Salary Rad 10. Depart	nde/Step te tment	Pay Gr IX Step— 05 Depart DEPA	40483 —Rate———————————————————————————————————		
FTE		12. FTE		2437			
Next Increment: Action No.: A-325826 Work Schedule: FULL-TIME Exp/Separa PMIS Actio Request ID		on Date:	10-14-202		Bdgt Accn No.: 5 111/113 JON: 083025014-	5100A250830SE014- -111/113	
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION Personnel Jacket No.: 6660							

14.REMARKS (continue in item 21,if necessary)

SELECTED FROM CERTIFICATION OF ELIGIBLES. CERTIFICATE NUMBER CI25-302 DATED 8/7/25 CONTINUE ALL BENEFITS AND DEDUCTIONS

K.w.

ESIGN-005-D10202025

1. Fullname PASION, JAMES		2. Date of XX XXX XX		3.Employee ID 60445	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU	THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTI						
5.Nature of Action PAY ADJUSTMENT		6.Effective Date 19 Aug 2025		7.Legal Authority UNASSIGNED			
FROM		Description		то			
Position—SYSTEMS PROGRAMMER Pay Grade—Salary Per Annum— NX 54918 Step—Rate per Hour— 26.4 Department—DEPARTMENT OF ADMINISTRATION Section/Division—DOA - PERSONNEL MANAGEMENT FTE—FTE—FTE—FTE—FTE—FTE—FTE—FTE—FTE—FTE—		8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		Position SYSTEMS PROGRAMMER Pay Grade NX Step Rate 09 35.13 Department DEPARTMENT OF ADMINISTRATION Section/Division DOA - PERSONNEL MANAGEMENT FTE 61085			
PMIS Acti		aration Date: Lion Date: 10-14-2025 ID: DOA-HR-498614		Bdgt Accn No.: 6 25-0610002 JON: 0610-25-00	5111001/6113001-100-		
Retirement Type: DC - DEFINED CONT	RIBUTION DEC	DUCTION		Personnel Jacket No	o.: 223486		

14.REMARKS (continue in item 21, if necessary)

SALARY OF NX-09 IS IN ACCORDANCE WITH MEMO HRD NO.:25-169 (DTD 08/14/2025). ABOVE-STEP RECRUITMENT AUTHORIZATION. NEXT INCREMENT SHOULD READ: 02/19/2027

KL

ESIGN-005-D10202025

1. Fuliname CASTRO, CAMILLE E	2	2. Date of Birth XX XXX XXXX		3.Employee ID 10002343	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION A	FFECTIN	G YOUR EMPLOYMEN	NT
5.Nature of Action TERMINATION	6.Effectiv	e Date g 2025		7.Legal Authority RULE13.101	
FROM	Descr	Description		то	
Position— CASHIER TRAINEE Pay Grade————————————————————————————————————	9. Pay Gra Salary Rad	8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section		ade Salary 0 Rate 0	
				b	
PMI	/Separation Date: S Action Date: uest ID: DOA	10-13-202	5	Bdgt Accn No.: 2415117 JON: 241524117	6111/113001-101-24-
Retirement Type: SOCIAL SECURITY/MEDIC	CARE DEDUCTIO)N		Personnel Jacket N	o.: 19920196

14.REMARKS (continue in item 21, if necessary)

This position is 100% federally funded and is contingent on the availability of federal funds.

K. L

ESIGN-005-D10202025

1. Fullname		2. Date of Birth		3.Employee ID	4.Date Requested
MARQUEZ, SUSANA E		XX XXX XXXX		4876	20 Oct 2025
THIS IS TO NOTIFY YO	U OF THE FOLLOWIN	IG ACTION AF	FECTING	G YOUR EMPLOYME	ENT
5.Nature of Action PROMOTION	6.Effectiv	e Date		7.Legal Authority RULE 4.506	
FROM	Desci	Description		то	
Position ENGINEER III Pay Grade OX 86219 Step 11 A1.45 Department GUAM ENVIRONMENTAL PROTECTION A Section/Division GEPA - WATER PROGRAM FTE 2461	8. Positio 9. Pay Gra Salary Ra 10. Depar 11. Div./Se 12. FTE	ade/Step te tment	Position ENGINEER SUPERVISOR Pay Grade PX 92933 Step Rate 44.68 Department GUAM ENVIRONMENTAL PROTECTION AGENCY Section/Division GEPA - WATER DIV FTE 2483		
Next Increment: Action No.: A-325961	Exp/Separation Date: PMIS Action Date: Request ID: DO/			Bdgt Accn No.: and 6113001 101 24 3 JON: 2295107	
Work Schedule: FULL-TIME					
Retirement Type: DB 1.75 - DEFINED B	BENEFIT 1.75			Personnel Jacket	No.: 2000-796
	<u>-</u>				

14.REMARKS (continue in item 21,if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS. SELECTED FROM CERTIFICATION OF ELIGIBLES CI25-284 DATED 7/17/2025.

KL

ESIGN-005-D10202025

1. Fuliname SAN NICOLAS, KALEENA LC	ä	2. Date of Birth		3.Employee ID 60903	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action TERMINATION	6.Effectiv 09 Au	e Date g 2025		7.Legal Authority RULE13.101	
FROM	Descr	iption		то	
HOUSEKEEPER TRAINEE Pay Grade Salary Per Annum	9. Pay Gra	Salary Rate Step Rate O Department		adeSalary	
AX 19240	Salary Ra				
DEPARTMENT OF LABOR Section/Division DOL - WIOA PROGRAM PARTICPANTS	11. Div./Se		Section/Division		
·	12. FTE		FTE		
Action No.: A-325991 PM	IS Action Date:	10-13-202	25	Bdgt Accn No.: 6 2414113 JON: 2414-23-113	5111/113001-101-23-
Work Schedule: PART-TIME Rec Retirement Type: SOCIAL SECURITY/MED	ICARE DEDUCTION		8	Personnel Jacket No	o.: 298415

14.REMARKS (continue in item 21, if necessary)

This position is 100% federally funded and is contingent on the availability of federal funds.

K.L

ESIGN-005-D10202025

1. Fullname MARTINEZ JR., JULITO G			2. Date of Birth XX XXX XXXX		3.Employee ID 4760	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFE					G YOUR EMPLOYMEN	IT	
5.Nature of Action DETAIL APPOINTMENT		6.Effective Date 08 Aug 2025		7.Legal Authority RULE 4.506			
FROM		Descr	iption		то		
Position CLAIMS PROC. & UTIL. REV OFFCR Pay Grade MX 68269 Step Rate per Hour 32.82 Department DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division PHSS - PUBLIC WELFARE FTE 6582		8. Position Title 9. Pay Grade/Step Salary Rate NX Step 09 10. Department Depa Depa Depa Depa Depa Depa Depa Dep		Pay Gr NX Step 09 Depart DEPA	Salary 73072 Rate 35.13 ARTMENT OF PUBLIC HEALTH & SOCIAL SE ion/Division S - BUREAU OF HEALTH CARE FINANCING		
Next Increment: Exp/Separat PMIS Action Action No.: A-325417 Work Schedule: FULL-TIME		ion Date:	10-14-20		Bdgt Accn No.: 6 1723101 JON: 1723-25-101	511*001-101-25-	
Retirement Type: DB - DEFINED BENE	CTION			Personnel Jacket No	o.: 19907147		

14.REMARKS (continue in item 21, if necessary)

COMPENSATION WHILE BEING DETAILED AS QUALITY IMPROVEMENT COORDINATOR, PURSUANT TO SECTION 6.008, CHAPTER 6 OF THE PERSONNEL RULES AND REGULATIONS. THIS PAY ADJUSTMENT IS EQUIVALENT TO STEP 09 OF PAY GRADE NX. THIS DETAIL IS NOT TO EXCEED 90 CALENDAR DAYS FROM THE EFFECTIVE DATE ABOVE. |

K-

ESIGN-005-D10202025

1. Fuliname CHACO, THOMAS SA		2. Date of Birth		3.Employee ID 2930	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	G YOUR EMPLOYMEN	IT				
5.Nature of Action AMENDMENT	-	6.Effective Date 01 Aug 2025		7.Legal Authority PR&R		
FROM	Desc	ription		ТО		
Position PSYCHIATRIC TECHNICIAN I Pay Grade GX Salary Per Annum 32498 Step Rate per Hour 15.62 Department GUAM BEHAVIORAL HEALTH AND WELLNES Section/Division GBHWC - CLINICAL SERVICES FTE SUDD.018	9. Pay Gr Salary Ra	9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section		Position PSYCHIATRIC TECHNICIAN I Pay Grade GX 33731 Step Rate 16.22 Department GUAM BEHAVIORAL HEALTH AND WELLNESS C Section/Division GBHWC - CLINICAL SERVICES FTE SUDD.018		
Pi	xp/Separation Date: MIS Action Date: equest ID: DO	10-17-202		Bdgt Accn No.: JON:		
Retirement Type: DC - DEFINED CONTR	IBUTION DEDUCT	ION		Personnel Jacket No	o.: 19906624	

14.REMARKS (continue in item 21, if necessary)

THIS ACTION AMENDS A-325240 (SALARY INCREMENT). TO SIDE RATE & SALARY SHOULD \$16.22P/H (\$33,731.00P/A)

K.L

ESIGN-005-D10202025

1. Fullname TOVES, ROBERT C		2. Date of Birth		3.Employee ID 6466	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU	OF THE FOLLOWII	NG ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action SALARY INCREMENT	6.Effecti 01 Au	ve Date 1g 2025	ă O	7.Legal Authority RULE 10.008	
FROM	Desc	ription		то	
Pay Grade HX 44417 Step 10 21.35 Department DEPARTMENT OF PUBLIC WORKS Section/Division DPW - BUS OPERATIONS		8. Position Title 9. Pay Grade/Step Salary Rate Pay Grade/Step HX Step— 11 10. Department DEPAR 11. Div./Section DPW -		OnOOL BUS DRIVER radeSalary45826 Rate22.03 tment	
Next Increment: Exp/Separation PMIS Action Date			25	Bdgt Accn No.: 6	5111001-205-25-
Action No.: A-326066 Request ID Work Schedule: FULL-TIME		A-HR-47755	66	JON:	
Retirement Type: DC - DEFINED CONT	RIBUTION DEDUCT	ION		Personnel Jacket No	o.: 2425

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: 8/01/2023 to 7/31/2025. (O).

K.L

ESIGN-005-D10202025

1. Fuliname UNPINGCO, VINESSA M	i i	2. Date of		3.Employee ID 7038	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT							
5.Nature of Action CHANGE OF BUDGET ACCT NO. / JON		6.Effective Date 01 Jul 2025		7.Legal Authority PR&R			
FROM	De	Description		ТО			
Position PROGRAM COORDINATOR I Pay Grade Salary Per Annum 41372 Step Rate per Hour 19.89 Department DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division		tion Title Grade/Step Rate partment	PROG Pay Gr KX Step 01 Depart DEPA	Step————————————————————————————————————			
FTE 6348	12. FTE	12. F E [PTEDPH25-027			
PMIS Action		Pate: 10-20 a: 10-15-20 OOA-HR-37925	25	Bdgt Accn No.: (1713123 JON: 1713-25-123	6111/113001-101-25-		
Retirement Type: DC - DEFINED CONTRI	BUTION DEDU	CTION		Personnel Jacket N	o.: 2989		

14.REMARKS (continue in item 21, if necessary)

CHANGE OF BUDGET ACCOUNT NO. TO: 6111/1113001-101-25-1713123 JON TO: 1713-25-123 CONTINUE ALL BENEFITS AND DEDUCTIONS.

K-

ESIGN-005-D10202025

1. Fuliname		2. Date of Birth		3.Employee ID	4.Date Requested	
BUNNENBERG, LENA G.		XX XXX XXXX		10000915	20 Oct 2025	
THIS IS TO NOTIFY YOU OF	G YOUR EMPLOYMEN	IT				
5.Nature of Action TRANSFER - LATERAL		6.Effective Date 30 Jun 2025		7.Legal Authority PL30-024		
FROM	Descr	iption		то	12	
Position MANAGEMENT ANALYST II Pay Grade MX 49731 Step Rate per Hour 23.91 Department DEPARTMENT OF PUBLIC HEALTH & SOCIAL S Section/Division PHSS - CPHO FTE 6736	9. Pay Gra Salary Ra	8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		Position MANAGEMENT ANALYST II Pay Grade MX 49731 Step Rate 23.91 Department DEPARTMENT OF PUBLIC HEALTH & SOCIAL SE Section/Division PHSS - BUREAU OF HEALTH CARE FINANCING FTE 7022		
Next Increment: Exp/Separation PMIS Action Date		e: 10-15-202	5	Bdgt Accn No.: 6	511*001-101-25-	
Action No.: A-326093 Request ID: E		A-HR-512634	•	JON: 1723-25-101		
Retirement Type: DC - DEFINED CONTRIBU	UTION DEDUCTION	ON		Personnel Jacket No	o.: 19920148	

14.REMARKS (continue in item 21,if necessary)

CONTINUE ALL BENEFITS AND DEDUCTIONS.

K.L

ESIGN-005-D10202025

1. Fullname BAYONA, MAE LINDA		2. Date of Birth	3.Employee ID 6950	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT						
5.Nature of Action DISMISSAL	6.Effectiv 28 Jur	e Date n 2025	7.Legal Authority RULE 11.302			
FROM	Descr	iption	то			
Pay Grade—Salary Per Annum—S3356 Step—Rate per Hour—S5.65 Department—DEPARTMENT OF REVENUE & TAXATION Section/Division—R&T - GENERAL LICENSING FTE—2652	9. Pay Gra Salary Rat 10. Depart 11. Div./Se	ride/Step Pay Grant Pay Gr	Salary 0 Rate 0			
Next Increment:	Exp/Separation Date:	e: 10-14-2025	Bdgt Accn No.: 5	5100A260840CE021-		
Action No.: A-326047 Work Schedule: FULL-TIME	Request ID: DOA		JON: 084026021	111/113		
Retirement Type: DC - DEFINED CON	TRIBUTION DEDUCTION	ON	Personnel Jacket Ne	p.: 2916		
	_					

14.REMARKS (continue in item 21, if necessary)

THIS ACTION IS PURSUANT TO NOTICE OF FINAL ADVERSE ACTION ISSUED ON 06/01/2025. LUMP SUM PAYMENT IS AUTHORIZED AND WILL BE MADE FOR ANY UNUSED ANNUAL LEAVE UP TO 320 HOURS.

K. L

ESIGN-005-D10202025

1. Fuliname BARIS, ROSEANNE SANCHEZ		2. Date of Birth XX XXX XXXX		3.Employee ID 10000393	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT						IT .
5.Nature of Action SALARY INCREMENT		6.Effective Date 24 Jun 2025		7.Legal Authority RULE 10.008		
FROM		Descr	iption		то	
Position BUYER II Pay Grade IX Step Rate per Hour 16.77 Department DEPARTMENT OF ADMINISTRATION		8. Position 9. Pay Gra Salary Rad	rade/Step ate Pay Gi IX Step 02 Depar		Grade————————————————————————————————————	
DOA - GENERAL SERVICES AGENCY		11. Div./Se	ction		on/Division———————————————————————————————————	
FTE) IZ. FIE			FTE—65015		
Next Increment: Exp/Separation Date: Action No.: A-326097 Request ID: DO		ion Date:	10-15-202		Bdgt Accn No.: 5100A240650SE006 JON: 065024006	
Work Schedule:						
Retirement Type: DC - DEFINED CON	DEDUCTION	NC		Personnel Jacket No	o.: 19910789	

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: FROM 06/24/2024 TO 06/23/2025 (S)

K.L

ESIGN-005-D10202025

1. Fuliname LUJAN, CHARLEEN AE		2. Date of Birth XX XXX XXXX		3.Employee ID 9866	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT						
5.Nature of Action SALARY INCREMENT		6.Effective Date 03 Jun 2025		7.Legal Authority RULE 10.008		
FROM	Descr	Description		то		
Pay Grade—Salary Per Annum—37545 Step—Rate per Hour—18.05 Department—DEPARTMENT OF ADMINISTRATION Section/Division—DOA - GENERAL SERVICES AGENCY FTE—65041-P	9. Pay Gra Salary Rad	Position Title BUYER BUYER Pay Grade/Step ry Rate Control of the part of t		Salary 38967 Rate 18.73 tment RTMENT OF ADMINISTRATION on/Division GENERAL SERVICES AGENCY		
Next Increment: Exp/Separation Date: PMIS Action Date:		10-16-202		Bdgt Accn No.: 6 26-0650006 JON: 065023006	6111001/6113001-100-	
Retirement Type: DB 1.75 - DEFINED BENEF	FIT 1.75			Personnel Jacket No	o.: 5528	

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: FROM 06/03/2024 TO 06/02/2025 (S)

K. W

ESIGN-005-D10202025

1. Fullname SAMSON, CHERYL TANIA B.		2. Date of Birth		3.Employee ID 10000224	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT
5.Nature of Action SALARY INCREMENT		6.Effective Date 13 May 2025		7.Legal Authority RULE 10.008	
FROM	Descr	Description		то	
Position ADMINISTRATIVE ASSISTANT Pay Grade JX 37913 Step Rate per Hour 18.23 Department DEPARTMENT OF AGRICULTURE Section/Division AGR - FORESTRY AND SOIL RESOURCES-ADM FTE 842	8. Position 9. Pay Gra Salary Ra 10. Depart 11. Div./Se 12. FTE	nde/Step te tment	Pay Gr JX Step 02 Depart DEPAI	ASSISTAN Salary 39349 Rate 18.92	JRE
Next Increment: Exp/Separation PMIS Action Exp Action No.: A-326034 Work Schedule: Exp/Separation PMIS Action Exp Request ID:		10-14-202		Bdgt Accn No.: 5 111/113 JON: 1613-24-003	5100A241613SE003- 3-111/113
Retirement Type: DC - DEFINED CONTRIB	UTION DEDUCTION	ON		Personnel Jacket No	o.: 19910746

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: 05/13/2024 TO 05/12/2025. (S)

K.L

ESIGN-005-D10202025

1. Fullname		2. Date of Birth		3.Employee ID	4.Date Requested
CARANDANG, RUBEN C		XX XXX XXXX		9453	20 Oct 2025
THIS IS TO NOTIFY YO	U OF THE FOLLOWIN	G ACTION	AFFECTING	G YOUR EMPLOYME	NT
5.Nature of Action	6.Effectiv	6.Effective Date		7.Legal Authority	
EXTENSION OF DETAIL		r 2025		RULE 4.506	
FROM	Descr	ription		то	
Position—PUBLIC WELFARE INVESTIGATOR II Pay Grade—LX Salary Per Annum—46978 Step—Rate per Hour—22.59 Department—DEPARTMENT OF PUBLIC HEALTH & SOC—Section/Division—PHSS - PUBLIC WELFARE FTE—6906	9. Pay Gra Salary Ra	Pay Gr MX Step 02 Pepart DEPAI Section PHSS		Salary 51615 Rate 24.81 ARTMENT OF PUBLIC HEALTH & SOCIAL SE DIVIDIVISION S - PUBLIC WELFARE	
Next Increment: Exp/Separa		e: 06-05	i-	Bdgt Accn No.: 1729117	611*001-101-25-
Action No.: A-326124 Work Schedule: FULL-TIME	PMIS Action Date: Request ID: DOA	10-17-202 A-HR-06406	_	JON: 1729-25-117	,
Retirement Type: DC - DEFINED CON	TRIBUTION DEDUCTION	ON		Personnel Jacket N	lo.: 5135

14.REMARKS (continue in item 21,if necessary)

COMPENSATION WHILE BEING DETAILED AS A PUBLIC WELFARE INVESTIGATION SUPERVISOR, PURSUANT TO SECTION 6.008, CHAPTER 6 OF THE PERSONNEL RULES AND REGULATIONS. THIS PAY ADJUSTMENT IS EQUIVALENT TO STEP 02 OF PAY GRADE MX. THIS DETAIL IS NOT TO EXCEED 90 CALENDAR DAYS FROM THE EFFECTIVE DATE 04/06/2025. EXTENSION OF DETAIL APPOINTMENT IS IN ACCORDANCE WITH DOA DIRECTOR APPROVAL (HRD NO.: 25-159 DATED 05/23/2025). DETAIL TERM DATE: 07/04/2025

K.L

ESIGN-005-D10202025

1. Fuliname SABLAN, REBECCA J			2. Date of		3.Employee ID 10000751	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YO	OU OF THE I	FOLLOWING	S ACTION A	AFFECTIN	G YOUR EMPLOYME	ENT	
5.Nature of Action RESIGNATION		6.Effective 21 Mar			7.Legal Authority RULE 13.002		
FROM		Description		ТО			
Position—Police Records Clerk I Pay Grade—Salary Per Annum— HX 32355 Step—Rate per Hour— 15.56 Department—GUAM POLICE DEPARTMENT Section/Division—GPD - RECORD & I.D. FTE—3421		8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		Position Pay Grade Salary 0 Step Rate 0 Department Section/Division FTE			
lext Increment: Exp/Separation D PMIS Action Date		ration Date: 03-21-2025			Bdgt Accn No.: 1220263 / 6113001-10		
Action No.: A-326132 Work Schedule:	Request I	DOA	-HR-413278	3	JON: 1220-25-2	63	
Retirement Type: DC - DEFINED CON	NTRIBUTION	DEDUCTIO	N		Personnel Jacket	No.: 19911114	
14.REMARKS (continue in item 21.if nece	essarv)						

LUMP SUM PAYMENT IS AUTHORIZED AND WILL BE MADE FOR ANNUAL LEAVE UP TO 320 HOURS. EMPLOYEE RESIGNED BEFORE COMPLETION OF PROBATIONARY PERIOD.

K.L

ESIGN-005-D10202025

1. Fullname SAN NICOLAS, JOHN E		2. Date of I		3.Employee ID 3986	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YO	U OF THE FOLLOW	NG ACTION A	AFFECTIN	G YOUR EMPLOYMEN	NT	
5.Nature of Action AMENDMENT		6.Effective Date 02 Feb 2025		7.Legal Authority PR&R		
FROM	Des	Description		то		
Position—POLICE OFFICER I Pay Grade—Salary Per Annum—100582 Step—Rate per Hour—48.36 Department—GUAM POLICE DEPARTMENT Section/Division—GPD - NEIGHBORHOOD PATROL FTE—3472		8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section 12. FTE		Position POLICE OFFICER I Pay Grade IL25 Step 23 Step 23 Department GUAM POLICE DEPARTMENT Section/Division GPD - NEIGHBORHOOD PATROL FTE 3472		
Next Increment: Exp/Separation PMIS Action D			5	Bdgt Acen No.: JON: 1220-24-00	ח	
Action No.: A-326136 Work Schedule: FULL-TIME	Request ID: DO	DA-HR-914016				
Retirement Type: NON BASE - DEFINI	ED BENEFIT	- 45		Personnel Jacket N	o.: 19903912	
	-					

14.REMARKS (continue in item 21, if necessary)

THIS ACTION AMENDS PA#A-323753 (SALARY INCREMENT) - TO SIDE: GRADE IL25, STEP 23. THE RATE & SALARY SHOULD READ: \$50.04 P/H (\$104,102.00 P/A).

KL

ESIGN-005-D10202025

1. Fuliname TAITANO, ERICA A		2. Date of Birth		3.Employee ID 60150	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT						
5.Nature of Action SALARY INCREMENT		6.Effective Date 06 Dec 2024		7.Legal Authority RULE 10.008		
FROM	Descr	iption		то		
Position MANAGEMENT ANALYST IV Pay Grade OX 65575 Step Rate per Hour 31.53 Department DEPARTMENT OF PUBLIC WORKS Section/Division DPW - CAPITAL IMPROVEMENTS		Pay Grade/Step OX Step— 04 Department Div./Section Pay Gr OX Step— 04 Section		Ition—NAGEMENT ANALYST IV Grade—Salary—68059 Rate—32.72 artment—PARTMENT OF PUBLIC WORKS Ition/Division—W - CAPITAL IMPROVEMENTS		
Next Increment: Exp/Separation Date: PMIS Action Date:		10-13-2025	-	Bdgt Accn No.: 98 24-1010202 Fringe 61 1010202		
Action No.: A-325868 Re Work Schedule: FULL-TIME	quest ID: DOA	1-FIK-043/22		JON: 1010202		
Retirement Type: DC - DEFINED CONTRIB	BUTION DEDUCTION	ON		Personnel Jacket No	5.: 168392	

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: FROM 12/6/2023 to 12/5/2024 (S)

K.L

ESIGN-005-D10202025

1. Fuliname GATAN, ROSALIA SN		2. Date of Birth		3.Employee ID 8004	4.Date Requested 20 Oct 2025
THIS IS TO NOTIFY YOU OF	THE FOLLOWIN	G ACTION A	AFFECTING	G YOUR EMPLOYMEN	IT
5.Nature of Action SALARY INCREMENT		6.Effective Date 20 Aug 2024		7.Legal Authority RULE 10.008	
FROM	Descr	Description		то	2
Pay Grade—Salary Per Annum—38967 Step—Rate per Hour—18.73 Department—DEPARTMENT OF REVENUE & TAXATION Section/Division—R&T - TAX ENFORCEMENT FTE—2259	9. Pay Gra Salary Rad	8. Position Title 9. Pay Grade/Step Salary Rate Pay Gr HX Step 07 10. Department DEPA 11. Div./Section Position Pay Gr Compartment Step 07 Department DEPA Section R&T -		Srade—Salary—40443 Rate—19.44 rtment—ARTMENT OF REVENUE & TAXATION ion/Division—TAX ENFORCEMENT	
PMIS	/Separation Date: S Action Date: uest ID: DOA	10-13-202	_	Bdgt Accn No.: 5 111/113 JON:	5100A260810CE007-
Retirement Type: DB 1.75 - DEFINED BENE	FIT 1.75		s ⁷²	Personnel Jacket No	o.: 2697

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: 08/20/2023 TO 08/19/2024. (S)

K. W

ESIGN-005-D10202025

Fullname AYUYU, ARTHUR F		2. Date of Birth		3.Employee ID 4046	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE	FOLLOWIN	G ACTION A	AFFECTING	G YOUR EMPLOYME	NT	
5.Nature of Action SALARY INCREMENT DENIAL	1	6.Effective Date 22 Jun 2024		7.Legal Authority RULE 10.008		
FROM	Descr	iption		то		
Position LABORER Pay Grade FX 31606 Step 04 15.2 Department DEPARTMENT OF PUBLIC WORKS Section/Division DPW - HIGHWAY FTE 4673	8. Position 9. Pay Grasalary Ra 10. Depar	ription on Title ade/Step ate Pay FX Ste 04 rtment DE cection Pos LA Pay FX Ste Dep Dep Dep Dep Dep Dep Dep Dep Dep De		Position LABORER Pay Grade FX 31606 Step Rate		
Next Increment: Exp/Separation I PMIS Action Date		e: 10-14-202	25	Bdgt Accn No.:	5208A241060SE208-	
Action No.: A-325202 Request ID: DO Work Schedule: FULL-TIME		4-HR-50993	8	JON:		
Retirement Type: DC - DEFINED CONTRIBUTIO	N DEDUCTI	ON		Personnel Jacket	lo.: 19909639	

14.REMARKS (continue in item 21, if necessary)

RATING PERIOD: 06/22/2023 TO 06/21/2024 (UNABLE TO RATE)

K-

ESIGN-005-D10202025

1. Fuilname TILIMWAR, ENDINA		of Birth	3.Employee ID 60800	4.Date Requested 20 Oct 2025		
THIS IS TO NOTIFY YOU OF THE	HE FOLLOWING ACTIO	N AFFECTIN	G YOUR EMPLOYM	ENT		
5.Nature of Action TERMINATION	6.Effective Date			7.Legal Authority RULE13.101		
FROM	Description	Description		то		
Position ADMINISTRATIVE ASST. TRAINEE Pay Grade Salary Per Annum 19240 Step Rate per Hour 9.25 Department DEPARTMENT OF LABOR Section/Division DOL - WIOA RAPID RESPONSE	8. Position Title 9. Pay Grade/Step Salary Rate 10. Department 11. Div./Section	Step	Grade————————————————————————————————————			
FTE .	12. FTE	FTE-				
PMIS	eparation Date: 07 Action Date: 10-14- est ID: DOA-HR-261	2025	Bdgt Accn No.: 111/113 JON: 2416-21-11	5101H212416ST113- 3-111/113		
Retirement Type: SOCIAL SECURITY/MEDICA	RE DEDUCTION		Personnel Jacket	No.: 272228		

14.REMARKS (continue in item 21, if necessary)

THIS POSITION IS 100% FEDERALLY FUNDED AND IS CONTINGENT ON THE AVAILABILITY OF FEDERAL FUNDS. TERMINATION OF UNCLASSIFIED APPOINTMENT.

K.L

ESIGN-005-D10202025

1. Fuliname MEDINA, SUZANNE J		2. Date of Birth		3.Employee ID	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT						
5.Nature of Action SALARY INCREMENT		6.Effective Date 23 Jun 2023		7.Legal Authority RULE 10.008		
FROM	Descr	Description		то		
Position—BIOLOGIST III Pay Grade—Salary Per Annum—75392 Step—Rate per Hour—36.25 Department—DEPARTMENT OF AGRICULTURE Section/Division—AGR - AQUATIC AND WILDLIFE RESOURCES - A	8. Position 9. Pay Gra Salary Ra 10. Depart 11. Div./Se 12. FTE	Position Title BIOLC Pay Grante NX Step— 11 Depar DEPA Section AGR		on		
953			953			
PMIS	Exp/Separation Date: PMIS Action Date: 10-17-2025 Request ID: DOA-HR-766993			Bdgt Accn No.: 5100A241620SE011 JON: 1620-24-011		
Retirement Type: DC - DEFINED CONTRIBUTION DEDUCTION P				Personnel Jacket No	o.: 19909234	

14.REMARKS (continue in item 21,if necessary)

RATING PERIOD: FROM 06.23.21 TO 06.22.23 (O)

K.L

ESIGN-005-D10202025

1. Fullname SANTOS, PAUL L		2. Date of		3.Employee ID 1910	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU	J OF THE FOLLO	WING ACTION	AFFECTIN	G YOUR EMPLOYMEN	IT	
5.Nature of Action SALARY INCREMENT		6.Effective Date 30 Apr 2023		7.Legal Authority RULE 10.008		
FROM		Description		то		
Position CHIEF OF CADASTRE Pay Grade QX 104510 Step Rate per Hour 50.25 Department DEPARTMENT OF LAND MANAGEMENT Section/Division DLM - LAND SURVEY FTE 1020	9. Pay Salar	sition Title y Grade/Step y Rate epartment v./Section	Pay Gr QX Step— 12 Depart DEPAI	Rate 51.84 ment RTMENT OF LAND MAN n/Division LAND SURVEY	AGEMENT	
Next Increment: Exp/Separation PMIS Action I Request ID:				Bdgt Accn No.: 6111001-222-25-2940203 JON: 2940-23-203		
Work Schedule: FULL-TIME						
Retirement Type: DB 1.75 - DEFINED BENEFIT 1.75			Personnel Jacket N	o.: 2000-317		

14.REMARKS (continue in item 21,if necessary)

Rating Period: FROM 04/30/2021 TO 04/29/2023 (O)

K.L

ESIGN-005-D10202025

1. Fullname STO DOMINGO, JAEDINE K		2. Date of Birth		3.Employee ID 60282	4.Date Requested 20 Oct 2025	
THIS IS TO NOTIFY YOU OF THE	FOLLOWIN	G ACTION A	FFECTING	G YOUR EMPLOYMEN	IT	
5.Nature of Action TERMINATION	6.Effective Date 12 Aug 2022		7.Legal Authority RULE13.101			
FROM	Description		то			
Position BARISTA TRAINEE Pay Grade Salary Per Annum 19240 Step Rate per Hour 9.25 Department DEPARTMENT OF LABOR Section/Division DOL - WIOA PROGRAM FTE .	8. Position 9. Pay Grasalary Rad 10. Depart 11. Div./Se	Position— Grade/Step Rate Pay Grade— Step— Department Section/Division Section/Division		Salary 0 Rate 0	Salary O Rate O	
Next Increment: Action No.: A-325988 Work Schedule: FULL-TIME Exp/Separation Date: PMIS Action Date: Request ID: DOA			5	Bdgt Accn No.: 5 111/113 JON: 2415-20-113	5101H202415ST113 111/113	
Retirement Type: SOCIAL SECURITY/MEDICARE	DEDUCTIO	N ,		Personnel Jacket N	o.: 187598	

14.REMARKS (continue in item 21, if necessary)

THIS POSITION IS 100% FEDERALLY FUNDED AND IS CONTINGENT ON THE AVAILABILITY OF FEDERAL FUNDS. TERMINATION OF UNCLASSIFIED APPOINTMENT.

KL

ESIGN-005-D10202025