

Messages & Communications Doc. No. 38GL-26-2007 through 2010.

From 38th Committee On Rules <committeonrules@guamlegislature.gov>
Date Wed 3/4/2026 4:09 PM
To Guam Legislature Clerks <clerks@guamlegislature.gov>
Cc Frank Blas Jr. <speakerblas@guamlegislature.gov>

4 attachments (12 MB)
3426COMM Doc. No. 38GL-26-2007.pdf; 3426COMM Doc. No. 38GL-26-2008.pdf; 3426COMM Doc. No. 38GL-26-2009.pdf; 3426COMM Doc. No. 38GL-26-2010.pdf;

Håfa Adai Clerks Office,

Please see attached, Messages & Communications Doc. No. 38GL-26-2007 through 2010 for processing:

✓	38GL-26-2007	Guam Board of Accountancy	Board Meeting Packet for February 19, 2026.
✓	38GL-26-2008	Guam Board of Accountancy	FY2026 Financial Statement for the month of January 2026.
✓	38GL-26-2009	Guam Waterworks Authority	Revenues and Expenditures Report (Unaudited) for the period ending January 2026*
✓	38GL-26-2010	Department of Administration	Prior Years Obligation to pay Diagnostic Laboratory Services in the total amount of \$1,864.12*

Kindly reply to this email



Si Yu'os ma'åse',

Marie Crisostomo

Committee on Rules Assistant

COMMITTEE ON RULES

Vice Speaker V. Anthony Ada, Chairperson

I Mina'trentai Ocho Na Liheslaturan Guåhan

38th Guam Legislature

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Messages and Communications 38GL-26-2010*

2 messages

Speaker Frank Blas Jr. <speakerblas@guamlegislature.gov>

Tue, Mar 3, 2026 at 11:18 AM

To: 38th Committee On Rules <committeeonrules@guamlegislature.gov>, Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Håfa Adai,

Please see attached M&C Doc, No. 38GL-26-2010

38GL-26-2010	Department of Administration	Prior Years Obligation to pay Diagnostic Laboratory Services in the total amount of \$1,864.12*
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Si Yu'os Ma'åse'

Bernice Rivera

Administrative Assistant



Office of Speaker Frank F. Blas, Jr.

I Mina'trentai Ocho na Liheslaturan Guåhan 38th Guam Legislature

Guam Congress Building, 163 Chalan Santo Papa, Hagatña

(671)969-6456

speakerblas@guamlegislature.gov

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----- Forwarded message -----

From: **Florence Salas** <Florence.Salas@doa.guam.gov>

Date: Fri, Feb 27, 2026 at 3:04 PM

Subject: Authorization for Payment of Prior Year Obligations

To: speakerblas@guamlegislature.gov <speakerblas@guamlegislature.gov>

Hafa Adai Speaker Blas:

Attached is a written notification in compliance with Chapter XIII, Part II, Section 20, P.L. 38-60, "Authorization for Payment of Prior Years' Obligations".

Si Yu'os Ma'åse.

Florence Salas
Department of Administration
Director's Office
Telephone: 475-1221
email: florence.salas@doa.guam.gov

2 attachments

Speaker Blas - Prior Year Obligation.pdf
362K

38GL-26-2010.pdf
1113K

38th Committee On Rules <committeeonrules@guamlegislature.gov>

Wed, Mar 4, 2026 at 9:40 AM

To: "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>

Håfa Adai,

Received, and thank you.



Si Yu'os ma'åse',

Marie Crisostomo

Committee on Rules Assistant

COMMITTEE ON RULES

Vice Speaker V. Anthony Ada, Chairperson

I Mina'trentai Ocho Na Liheslaturan Guåhan

38th Guam Legislature

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Speaker Frank Blas Jr. <speakerblas@guamlegislature.gov>

Authorization for Payment of Prior Year Obligations

2 messages

Florence Salas <Florence.Salas@doa.guam.gov>
To: "speakerblas@guamlegislature.gov" <speakerblas@guamlegislature.gov>

Fri, Feb 27, 2026 at 3:04 PM

Hafa Adai Speaker Blas:

Attached is a written notification in compliance with Chapter XIII, Part II, Section 20, P.L. 38-60, "Authorization for Payment of Prior Years' Obligations".

Si Yu'os Ma'ase.

Florence Salas
Department of Administration
Director's Office
Telephone: 475-1221
email: florence.salas@doa.guam.gov

Doc Type: 38GL-26-2010
OFFICE OF THE SPEAKER
FRANK F. BLAS, JR.
February 27, 2026
Time: 3:04 PM
Received: *FR*

 Speaker Blas - Prior Year Obligation.pdf
362K

Speaker Frank Blas Jr. <speakerblas@guamlegislature.gov>
To: Florence Salas <Florence.Salas@doa.guam.gov>

Fri, Feb 27, 2026 at 3:09 PM

Hafa Adai Florence,

Confirming receipt of your email.

Si Yu'os Ma'ase'

Bernice Rivera

Administrative Assistant



Office of Speaker Frank F. Blas, Jr.

I Mina'trentai Ocho na Liheslaturan Guahan 38th Guam Legislature

Guam Congress Building, 163 Chalan Santo Papa, Hagatña

(671)969 6456
speakerblas@guamlegislature.gov

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3/3/26, 11:09 AM Note that the Legislature has taken steps to ensure that any protected personal identifying information has been redacted or excluded in whole or in part in order to protect the privacy of any individual(s) whose information has been included as part of this transmittal. Utah Legislature Mail Authorization for Payment of Prior Year Obligations

information in this e-mail or any attachment in any manner. Instead, please reply to the sender that you have received this communication in error, and then immediately delete it. Thank you in advance for your cooperation.

[Quoted text hidden]



EDWARD M. BIRN
Director (Direktot)
RENA K. BORJA
Deputy Director (Sigundo Direktot)

**DEPARTMENT OF
ADMINISTRATION**
DIPATTAMENTON ATMENESTRASION
DIRECTOR'S OFFICE
(Ufisinan Direktot)
Telephone (Telifon): (671) 475-1101/1250



LOURDES A. LEON GUERRERO
Governor (Maga'nhaga)
JOSHUA F. TENORIO
Lt. Governor (Sigundo Maga'låhi)

February 26, 2026

MEMORANDUM

To: Honorable Frank Blas, Jr. Speaker 38th Guam Legislature
From: Director, Department of Administration
Re: Department of Administration Use of Current FY'26 funding for Outstanding FY'25 Obligation

Buenas yan Hafa Adail

The Department of Administration (DOA) in accordance with Section 20, Part II, of Chapter XIII of the FY2026 Budget Act (P.L.38-60), respectfully submits notification of a charge to our current budget to pay prior year obligations for Fiscal Year 2025 due to Diagnostic Laboratory Services.


The outstanding balance is as follows:

Total Amount to be paid	Fund Source of Payment	Prior Year Obligation
\$1,864.12		September 2025

Payment for this invoice does not negatively impact on the current operational needs of the Agency.

Should you have any questions or concerns, please contact my office at (671)475-1250.

Si Yu'os Ma'ase.


Edward M. Birn



38GL-26-2010
Messages and Communications

RECEIVED
COMMITTEE ON RULES
March 3, 2026

11:18 a.m.
Marie Crisostomo



GOVERNMENT OF GUAM
 DEPARTMENT OF ADMINISTRATION
 FINANCIAL MANAGEMENT INFORMATION SYSTEM

REQUEST FOR DIRECT PAYMENT

JUSTIFICATION for Non-Procurement -

VENDOR / PAYEE INFORMATION: V0000528 <small>payee number</small> Diagnostic Laboratory Services, <small>payee name</small> <small>email address</small>	DEPARTMENT DOCUMENT NUMBER: D 25 0610-007 DEPARTMENT DOCUMENT DATE: 11/13/2025
<small>650 LWILEI ROAD, SUITE 300</small> <small>mailing address 1</small> HONOLULU, HI 96817 <small>mailing address 2</small>	

DEPARTMENT / DIVISION: DOA-HR (DRUG TESTING)	POINT OF CONTACT AND PHONE NUMBER
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PURPOSE:
 LABORATORY DRUG SCREENING SERVICES FROM: 08-29-2025 -09-25-2025
 REQUEST DRUG TESTING PAYMENT SEPERATE FROM PUBLIC HEALTH LAB SERVICES
 PLEASE SEE SUPPORTING DOCUMENTS ATTACHED.

ACCOUNT NUMBER <small>(Expense - Fund - Origin Year - Dept/Div+sequence)</small>	AMOUNT	INVOICE	
		NUMBER / MONTH	DATE
[REDACTED]	1,864.12	7658093025	09/30/2025
TOTAL:	1,864.12		

CHECK APPROPRIATE BOX BELOW.

<input checked="" type="checkbox"/> REFERENCE NUMBER IS CORRECT	<input checked="" type="checkbox"/> ACCOUNT NUMBER IS CORRECT	<input type="checkbox"/> INSUFFICIENT FUNDS
<input type="checkbox"/> OVERRIDE IS AUTHORIZED	<input checked="" type="checkbox"/> VENDOR NUMBER IS CORRECT	

I CERTIFY THAT GOODS/SERVICES SPECIFIED HAVE BEEN RECEIVED AND THAT PAYMENT IS PROPER AS PER THE ATTACHED DOCUMENTS.

AMBER R. PANGELINAN <small>PREPARED BY:</small>	 <small>Signature</small>	11/13/2025 <small>Date</small>
EDWARD M. BIRN <small>AGENCY HEAD / APPROVING AUTHORITY</small>	 <small>Signature</small>	 <small>Date</small>
FLORENCE SALAS <small>CERTIFICATION OF FUNDS AVAILABLE:</small>	 <small>Signature</small>	11-19-2025 <small>Date</small>



DIAGNOSTIC LABORATORY SERVICES, INC
99-859 IWAIWA ST
AIEA, HI 96701-3267
(808) 589-5102

Account DEPT OF ADMINISTRATION
 Number ATTN: AMBER R PANGELINAN
 PO BOX 884
 HAGATNA, GU 96932

Date Billed	09/30/2025
Invoice #	7658093025
Amount Due	\$12,648.17
Amount Enclosed	\$1,364.12

Page 1 of 4

Please Make Checks Payable to DIAGNOSTIC LABORATORY SERVICES, INC

PLEASE DETACH HERE RETURN TOP PORTION WITH YOUR PAYMENT ALL CHARGES ARE DUE AND PAYABLE UPON RECEIPT OF THIS INVOICE

Account # [REDACTED]

DATE REC	PATIENT NAME	ACCN #	TEST CODE	PROC CODE	DESCRIPTION	CHARGE	CREDIT
Previous Balances							
Previous Balance Due 06/30/2025 Invoice 7658083025						1,603.90	Paid
Previous Balance Due 07/31/2025 Invoice 7658073125						3,967.80	
Previous Balance Due 08/31/2025 Invoice 7658083125						7,716.25	
Total Previous Balance Due						\$12,387.95	
Please refer to the original invoice on the date listed for further patient detail, or contact the billing department to provide you with an additional copy of the original invoice.							
09/24/2025	Payment ck#EFT 39100		Inv 06/30/2025				1,603.90
Current Invoice Activity							
I certify that this is an Original. _____ Date _____							
08/29/2025	ID: [REDACTED] <i>DPWR-36078-6449</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
Toxid: 0210865226							
Subtotal by DOS for 2025-08-29						\$43.35	
09/02/2025	ID: [REDACTED] <i>GBHWC-36056-5494</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
Toxid: 0210865218							
Subtotal by DOS for 2025-09-02						\$43.35	
09/03/2025	ID: [REDACTED] <i>DOA-HR-278087</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
Toxid: 0210865267							
Subtotal by DOS for 2025-09-03						\$43.35	
09/04/2025	ID: [REDACTED] <i>DOA-HR-704038A</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
Toxid: 0210865325							
09/04/2025	ID: [REDACTED] <i>DOA-HR-917937</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	

AMOUNT DUE \$12,648.17

Continued next page	CURRENT DAYS \$1,864.12	OVER 30 DAYS \$7,716.25	OVER 60 DAYS \$3,067.80	OVER 90 DAYS \$0.00	OVER 120 DAYS \$0.00
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TEL: (808) 589-5174 / 441-5440 * FAX (808) 589-5233 / 593-8357 TOLL FREE: 800-655-4176 (OUTER ISLAND) / 800-555-2357 (MAINLAND, GUAM, SAIPAN)

DATE REC	PATIENT NAME	ACCN #	TEST CODE	PROC CODE	DESCRIPTION	CHARGE	CREDIT
09/04/2025	Toxid: 0210865291 ID: [REDACTED] <i>DPW-36065-6174</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	ID: POST ACCIDENT						
09/04/2025	Toxid: 0210865259 ID: [REDACTED] <i>DOA-HR-290358</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/04/2025	Toxid: 0210865275 ID: [REDACTED] <i>DOA-HR-515373</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/04/2025	Toxid: 0210865242 ID: [REDACTED] <i>DOA-HR-517968</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210865283						
Subtotal by DOS for 2025-09-04						\$260.10	
09/05/2025	ID: [REDACTED] <i>DOA-HR-812654</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/05/2025	Toxid: 0210865309 ID: [REDACTED] <i>DOA-HR-356417</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/05/2025	Toxid: 0210865010 ID: [REDACTED] <i>DOA-HR-503908</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/05/2025	Toxid: 0210865028 ID: [REDACTED] <i>DOA-HR-138225</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/05/2025	Toxid: 0210864997 ID: [REDACTED] <i>DOA-HR-917166</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210864989						
Subtotal by DOS for 2025-09-05						\$216.75	
09/10/2025	ID: [REDACTED] <i>DPW-36092-1918</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	ID: POST ACCIDENT						
09/10/2025	Toxid: 0210864948 ID: [REDACTED] <i>DOA-HR-295391</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/10/2025	Toxid: 0210864963 ID: [REDACTED] <i>DOA-HR-472462</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/10/2025	Toxid: 0210864930 ID: [REDACTED] <i>DOA-HR-518247</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210864971						
Subtotal by DOS for 2025-09-10						\$173.40	
09/11/2025	ID: [REDACTED] <i>DOA-HR-517540</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/11/2025	Toxid: 0210865002 ID: [REDACTED] <i>DOA-HR-516502</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
09/11/2025	Toxid: 0210863007 ID: [REDACTED] <i>DOA-HR-144641</i>	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	

AMOUNT DUE \$12,848.17

Continued next page	CURRENT DAYS	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS
	\$1,864.12	\$7,116.25	\$3,067.80	\$0.00	\$0.00

TEL (808) 589-5174 / 441-5440 * FAX (808) 589-5233 / 593-8357 TOLL FREE: 800-655-4176 (OUTER ISLAND) / 800-555-2357 (MAINLAND, GUAM, SAIPAN)

DATE REC	PATIENT NAME	ACCN #	TEST CODE	PROC CODE	DESCRIPTION	CHARGE	CREDIT
	Toxid: 0210864955						
Subtotal by DOS for 2025-09-11						\$130.05	
09/16/2025	ID, [REDACTED] DOA-HR-927167	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862587						
09/16/2025	ID, [REDACTED] DOA-HR-137293	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862595						
Subtotal by DOS for 2025-09-16						\$86.70	
09/17/2025	ID, [REDACTED] GIAA-36113-8559	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862611						
09/17/2025	ID, [REDACTED] DOA-HR-767482	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862629						
09/17/2025	ID, [REDACTED] DOA-HR-905365	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862645						
09/17/2025	ID, [REDACTED] DOA-HR-268236	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862637						
09/17/2025	ID, [REDACTED] DOA-HR-980718	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862603						
Subtotal by DOS for 2025-09-17						\$216.75	
09/18/2025	ID, [REDACTED] DOA-HR-213140	[REDACTED]	54847	80307	TOX - SAP 4 (W/O THC) W/ CONFIRMATIO	43.36	
	Toxid: 0210862678						
09/18/2025	ID, [REDACTED] DOA-HR-158057	[REDACTED]	54847	80307	TOX - SAP 4 (W/O THC) W/ CONFIRMATIO	43.36	
	Toxid: 0210862652						
09/18/2025	ID, [REDACTED] DOA-HR-672387	[REDACTED]	54847	80307	TOX - SAP 4 (W/O THC) W/ CONFIRMATIO	43.36	
	Toxid: 0210862660						
Subtotal by DOS for 2025-09-18						\$130.08	
09/19/2025	ID, [REDACTED] DOA-HR-933030	[REDACTED]	54847	80307	TOX - SAP 4 (W/O THC) W/ CONFIRMATIO	43.36	
	Toxid: 0210862785						
Subtotal by DOS for 2025-09-19						\$43.36	
09/22/2025	ID, [REDACTED] DOA-HR-647967	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862751						
09/22/2025	ID, [REDACTED] DOA-HR-652468	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862777						
09/22/2025	ID, [REDACTED] DOA-HR-757415	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862769						
Subtotal by DOS for 2025-09-22						\$130.05	
09/23/2025	ID, [REDACTED] DOA-HR-999138	[REDACTED]	54847	80307	TOX - SAP 4 (W/O THC) W/ CONFIRMATIO	43.36	
	Toxid: 0210862736						

AMOUNT DUE **\$12,648.1**

Continued next page	CURRENT DAYS \$1,864.12	OVER 30 DAYS \$7,716.25	OVER 60 DAYS \$3,067.80	OVER 90 DAYS \$0.00	OVER 120 DAYS \$0.00
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TEL: (808) 589-5174 / 441-5440 * FAX (808) 589-5233 / 593-8357 TOLL FREE: 800-655-4176 (OUTER ISLAND) / 800-555-2357 (MAINLAND, GUAM, SAIPAN)

DATE REC	PATIENT NAME	ACCN #	TEST CODE	PROC CODE	DESCRIPTION	CHARGE	CREDIT
09/23/2025	ID [REDACTED] DOA-HR-277896	[REDACTED]	54847	80307	TOX - SAP 4 (W/O THC) W/ CONFIRMATIO	43.36	
	Toxid: 0210862744						
Subtotal by DOS for 2025-09-23						\$86.72	
09/24/2025	ID [REDACTED] DOA-HR-105518	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862884						
09/24/2025	ID [REDACTED] OA-HR-110590	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862702						
09/24/2025	ID [REDACTED] DOA-HR-289353	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862710						
09/24/2025	ID [REDACTED] DOA-HR-032329	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862686						
09/24/2025	ID [REDACTED] DOA-HR-729579	[REDACTED]	47287	80307	TOX - SAP 5 W/ CONFIRMATION	43.35	
	Toxid: 0210862694						
Subtotal by DOS for 2025-09-24						\$216.75	
09/25/2025	ID [REDACTED] DOA-HR-740087	[REDACTED]	54847	80307	TOX - SAP 4 (W/O THC) W/ CONFIRMATIO	43.36	
	Toxid: 0210862876						
Subtotal by DOS for 2025-09-25						\$43.36	

Unresulted tests within the current month will appear on next month's invoice. TEL: (808) 589-5174 / 441-5440 * FAX (808) 589-5233 / 593-8357 * TOLL FREE: 800-655-4176 (OUTER ISLAND) / 800-555-2357 (MAINLAND, GUAM, SAIPAN)

Total Current Invoice 7658093025 Activity **\$1,864.12**

AMOUNT DUE **\$12,648.1**

CURRENT DAYS \$1,864.12	OVER 30 DAYS \$7,716.25	OVER 60 DAYS \$3,067.80	OVER 90 DAYS \$0.00	OVER 120 DAYS \$0.00
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