EDDIE BAZA CALVO
Governor

RAY TENORIO
Lieutenant Governor

Office of the Governor Of Guam.

MAR 0 9 2017

GL# 34-17-282

Honorable Benjamin J.F. Cruz
Speaker
I Mina'trentai Kuåttro Na Liheslaturan Guåhan
155 Hesler Street
Hagåtña, Guam 96910

Speaker Benjamin J.F. Cruz

MAR 1 0 2017
Time: 1035 [X] AM [ ] PM File No.
Received By

2017 MAR 10 AM 10:55

RE: Board Appointment

Dear Mr. Speaker:

By virtue of the authority vested in me pursuant to the Organic Act of Guam and the local laws applicable to the following position, I am pleased to transmit the following appointment and supporting documents for:

APPOINTEE:	Gia B. Ramos
POSITION:	Member, Guam Economic Development Authority (GEDA), Board of Directors
TERM LENGTH:	**Four (4) years**
TERM SERVED:	From date of confirmation, plus four (4) years

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

Senseramente,

EDDIE BAZA CALVO

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Governor

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Lieutenant Governor

Office of the Governor Of Guam

MAR 0 9 2017

Ms. Gia B. Ramos
[redacted]

Dear Ms. Ramos:

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

Member, Guam Economic Development Authority (GEDA), Board of Directors
Length of term: Four (4) Years
Term served: From date of confirmation, plus four (4) years

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

Senseramente,

EDDIE BAZA CALVO

OFFICE OF THE GOVERNOR
GUAM

Nomination and Appointment Information

The following information is required for submission to the Speaker of *I Liheslaturan Guahan* in accordance with Title 4, Guam Code Annotated Section 2103:

NOMINEE INFORMATION								
Last Name	Ramos	First	Gia	M.I.	B	Date	2/28/17	
Address	[redacted]			Apartment/Unit #				
City	[redacted]	State	[redacted]	ZIP	[redacted]			
Phone	[redacted]	E-mail Address	[redacted]					
Position to which Appointment is Made	GUAM ECONOMIC DEVELOPMENT AUTHORITY (GEDA) BOARD OF DIRECTORS							
Are you a citizen of the United States?	YES ☑	NO ☐	If no, are you authorized to work in the U.S.?	YES ☐	NO ☐			

EDUCATION								
High School	Academy of our Lady of Guam			City/State	Agana			
From	1974	To	1977	Did you graduate?	YES ☑	NO ☐	Degree	
College	UOG			City/State	Mangilao			
From	8/1977	To	12/1979	Did you graduate?	YES ☑	NO ☐	Degree	ADN

EDUCATION

Graduate School					City/State			
From		To		Did you graduate?	YES ☐	NO ☐	Degree	
Other Degree	UOG				City/State	Mangilao		
From	8/1982	To	5/1985	Did you graduate?	YES ☑	NO ☐	Degree	BSN

EMPLOYMENT HISTORY

(1) Present Employer	Guam Visiting Nurses (GVN, INC)	Position	Executive Director/CEO
Address	396 Chalan San Antonio Rd. Tam, Gu. Ste. 102	Dates Held	2007 - Present
(2) Previous Employer	TRI Ent. (Healthcare Specialties)	Position	CEO
Address	396 Chalan San Antonio Rd., Gu. Ste101	Dates Held	1992 - Present
(3) Previous Employer	TRI Ent. (Marianas Visiting Nurses)	Position	Executive Director
Address	Kim's Bldg. Ste. 1, Gualo Rai, Saipan	Dates Held	2002 - Present
(4) Previous Employer	GMHA	Position	Staff Nurse/Acting Charge Nurse
Address	Tamuning, Guam	Dates Held	1983-85 & 1980-81
(5) Previous Employer	FHP HealthCare	Position	Quality Assurance/Utilization Mgr.
Address	Tamuning, Gu.	Dates Held	6/1985 - 2/1992

PRIOR GOVERNMENT OF GUAM SERVICE

Agency	GMHA	Phone	647-2330
Address			
Job Title	Registered Nurse/Staff Nurse	From: 5/1980	To 9/1985

PRIOR GOVERNMENT OF GUAM SERVICE

Agency	Guam Board of Nurse Examinazation	Phone	
Address	Public Health, Mangilao Guam		
Job Title	Member/Chairperson	From: 1987	To 1989

PRIOR GOVERNMENT SERVICE (EXCLUDING GOVERNMENT OF GUAM)

Agency		Phone	
Address			
Job Title	From:	To	
Agency		Phone	
Address			
Job Title	From:	To	

TRAINING

Institute/Seminars/On-the-Job Training:	Date
Home Health Care Conferences (numerous)	
Hospice Manager Training	2015 and 2017

AWARDS

List all educational, professional, civic awards, and recognition for public service:

Regent's Scholar, UOG

GNA House of Delegate Representative 1987 (ANA ANNUAL CONFERENCE, KANSAS)

PROFESSIONAL INVOLVEMENT

List involvement on a local/national/international level, list organization, activities participated in, offices held:

Guam Nursing Assoc. (GNA): Former Delegate to ANA

Guam Medical Assoc. (GMA) member

COMMUNITY / CIVIC INOVLEMENT

List organizations, activities, participated in, offices held

Guam Nursing Assoc.

American Cancer Society

PUBLICATIONS AND PRESENTATIONS

List any published articles, papers delivered at professional meetings, etc.:

MILITARY SERVICE (*PLEASE ATTACH FORM DD-214)*

Branch		From		To	
Rank at Discharge		Type of Discharge			

OTHER INFORMATION

(1) Have you ever been found guilty of a felony in any court, whether within or without the United States?	YES ☐	NO ☑

If so, please specify in detail:

Address of the court: _____

Date of Conviction: _____

Specific infraction committed: _____

(2) Have you ever been declared mentally incompetent by any court, whether within or without the United States?	YES ☐	NO ☑

If so, please specify in detail the reasons and facts related to such declaration:

_____

_____

_____

_____

_____

_____

(3) Have you ever been found not guilty or not punishable in any criminal proceedings by reason of insanity?	YES ☐	NO ☑
(4) Have you ever been confined to a mental institution for any reason?	YES ☐	NO ☑

If so, please specify in why the appointing authority believes you that you are not suffering from any mental illness or affliction:

_____

_____

_____

_____

_____

_____

Statement of Financial Interests

(Required by 4 G.C.A. § 13104.1)

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

FROM: Gia B. RAmos

☐ I have no financial interest in any business

☑ I do have interest(s) in the following business(es):

Name and address of business interest:	Type and amount of interest
Guam Visiting Nurses (GVN)	Nursing Services/owner/director
Healthcare Speciaties, Guam/Saipan)	Medical Equipment/owner/director
Pacific Sleep Center: Guam/Saipan	IDTF owner/director (Gu/Saipan)
Marianas Visiting Nurses, Saipan	Home healthcare: Owner/director
Pacific Drug Testing, Guam	Drug screening: Director/Owner
NRI, Corp. TAMUNING, GUAM	Real Estate Holdings: Director/Owner
BRI, Inc TAMUNING, GUAM	Commercial Building: Director/Owner
PTREHAB, SAIPAN MP	OUTPATIENT PT: DIRECTOR/OWNER
TENDER HOSPICE CARE, SAIPAN MP	HOSPICE CARE AGENCY: DIRECTOR/OWNER
NATIONAL HEALTH CARE, Fullerton, CA	HOME HEALTH CARE AGENCY: ~~Interim~~ DIRECTOR ~~Interim~~ OWNER

Signature

2/28/17
Date

AFFIDAVIT / DECLARATION UNDER PENALTY OF PERJURY

I, the undersigned, do hereby depose and say that: (1) I have read and reviewed the information contained in the attached Appointment/Nomination letter from the Governor of Guam; (2) that the matters contained in the Appointment/Nomination letter, together with all attachments thereto, are true and correct and that I am competent to testify to said matters; and (3) that this Declaration is made for the purpose of complying with the requirements of 4 G.C.A. Section 2103.5.

I declare under penalty of perjury under the laws of Guam (4 G.C.A. Section 4308) that the foregoing is true and
correct.

Signature  Date 2/28/17

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

February 15, 2017

SUBJECT: CRIMINAL HISTORY RECORD

NAME:	**Gia Stella B. RAMOS**		
DATE OF BIRTH:	[redacted]	**FINGERPRINT #:**	**NONE**
■	**The individual has no record of criminal conviction(s) in GPD files that are subject to Guam law and rules and regulations of the Department.**		

******************NOTHING FOLLOWS*******************

THIS INFORMATION MAY BE LIMITED TO A LOCAL CRIMINAL OFFENSE ONLY AND IS NOT INTENDED FOR USE FOR ANY LOCAL, STATE, OR FEDERAL LAW ENFORCEMENT AGENCY.

By Direction: katm

JOSEPH I. CRUZ
Chief of Police

The absence of an original GUAM POLICE seal invalidates this police clearance.
REVISED 08/03/16

Doc. No. 34GL-17-0282.

SUPERIOR COURT OF GUAM

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

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

DANIELLE T. ROSETE
Clerk of Court

Name: GIA STELLA B RAMOS

SS#: ID# [redacted] Date of Birth: [redacted]

CERTIFICATE OF SEARCH

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

Criminal Cases:

A. [X] No Case Found

B. 1. Criminal Case No.
2. Criminal Case No.
3. Criminal Case No.
4. Criminal Case No.
5. Criminal Case No.

Criminal Record: Page 1 of 1

Civil Cases:

A. [ ] No Case Found

B. 1. Civil Case No.
2. Civil Case No.
3. Civil Case No.
4. Civil Case No.
5. Civil Case No.

Civil Record: Page 1 of 1

Request for further information may be addressed at the Records Division of the Superior Court of Guam, Guam Judicial Center, 120 West O'Brien Drive, Hagatña, Guam. Hours of operation are Monday – Friday, 8:00 a.m. to 5:00 p.m. Closed Saturday, Sunday and local/federal holidays. Court Clearances are Non-Refundable.

Dated: 02/15/2017

DANIELLE T. ROSETE
Clerk of Court

BY: RODNEY-JOE P MANIBUSAN
Deputy Clerk

Prepared By: CJQC

The absence of an original Court Seal invalidates this document