

*I Mina'trentai Singko Na Liheslaturan Guåhan*  
**BILL STATUS**

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	FISCAL NOTES	NOTES
326-35 (COR)	Telena Cruz Nelson Amanda L. Shelton	AN ACT TO ADD A NEW SECTION 32120.1 DIVISION 2 CHAPTER 32 OF TITLE 10, GUAM CODE ANNOTATED, and ADD A NEW SECTION 63507 ARTICLE 5 CHAPTER 63 OF TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO SPECIFYING HAZARD PAY RECIPIENTS IN LIGHT OF THE COVID-19 PANDEMIC.	3/30/20 2:43 p.m.			4/9/20 Waiver of Public Hearing Requirement			



Office of the Speaker  
**TINA ROSE MUÑA BARNES**  
*I Mina'Trentai Singko Na Liheslaturan Guahan*



April 9, 2020

To: All Senators

From: Speaker Tina Rose Muña Barnes

RE: Waiver of Public Hearing Requirement – Bill no. 326-35

Dear Colleagues:

*Buenas yan Hafa Adai!* Pursuant to Section 1.02(b)(1)(ii) of our Standing Rules I hereby certify that emergency conditions exist involving danger to the public health or safety.

Furthermore, the public hearing requirement for Bill no. 326-35 (LS) is waived in accordance with 2 GCA § 2103(a).

*Sinseru Yan Magahit,*

Tina Rose Muña Barnes  
Speaker, 35<sup>th</sup> Guam Legislature



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**REQUEST FOR PUBLIC HEARING WAIVER**

**Bill No: 326-35**

**Authored By: Telena Cruz Nelson**

**Bill Title AN ACT TO ADD A NEW SECTION 32120.1 DIVISION 2 CHAPTER 32 OF TITLE 10, GUAM CODE ANNOTATED, and ADD A NEW SECTION 63507 ARTICLE 5 CHAPTER 63 OF TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO SPECIFYING HAZARD PAY RECIPIENTS IN LIGHT OF COVID-19 PANDEMIC.**

**Does this Bill directly benefit the response efforts of the Government of Guam in its effort to protect the Health and Safety of the People of Guam from COVID-19?**

Yes  X

No

**Does this Bill directly benefit residents of Guam during this economic crisis due to COVID-19?**

Yes  X

No

**Does the enactment of this measure have a cost associated with it?**

Yes  X

No

**If so, please provide the following:**

**Anticipated Cost: Unknown/TBA**

**Funding Source: Unknown/TBA**

**Based on PL 35-36 will current government revenues/operations be impacted by the reduction of the anticipated funding source?**

Depending on where the governor decides to transfer funds from, yes the revenues will be impacted as well as operations to provide and process hazardous pay during the pandemic. Operations are already impacted, the pay will need to follow.

**Speaker Tina Rose Muña Barnes**

**APR 08 2020**

Time 5:00 ( ) AM (X) PM

Received By: [Signature]



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If so, please identify the estimated dollar amount reduction in revenues and a corresponding aggregate amount in appropriation reductions in PL35-36. Such reductions shall be specifically identified by fund source, by department/agency, and/or by program or miscellaneous appropriation. Is there consent or support from its respective Directors on this measure?

Unknown.

Should we need to assemble in the Committee of the Whole, have the respective directors and stakeholders been contacted? (Please list each individual party separately):

Name/Title	Agency	Yes/No
David Dell'Isola	Dept. of Labor	no
Edward Burn	Dept. of Administration	no
		no

**OFB/BBMR:**

1) Does the Office of Finance and Budget **OR** the Bureau of Budget Management and Research concur that the statements made regarding the fiscal impact of this proposed measure are accurate?

Yes \_\_\_\_\_ No X \_\_\_\_\_

2) Are funds available in the specified funding source to support this measure?

UNKNOWN\*

Yes \_\_\_\_\_ No \_\_\_\_\_ ? Unknown \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name & Signature of Certifying individual from BBMR or OFB:

Name	Agency & Title	Signature & Date

*Should this section be unattainable, please submit documentation that demonstrates an effort was made.*





Office of the Speaker  
**TINA ROSE MUÑA BARNES**  
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The above information is true and correct. This bill addresses an immediate emergency and I am requesting that the public hearing be waived.

Name of Main Author/Senator Making a request to waive Public Hearing\_: Telena Cruz Nelson

Signature 

Date \_\_\_\_\_

*Note: Public concerns/comments that have been received with regards to this measure, or any other pertinent document/information can be attached to this document.*

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*Attachments:*

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_

