

1 VANESSA L. WILLIAMS, ESQ.  
 2 LAW OFFICE OF VANESSA L. WILLIAMS, P.C.  
 3 414 WEST SOLEDAD AVENUE  
 4 GCIC BLDG., SUITE 500  
 5 HAGATÑA, GUAM 96910  
 6 TELEPHONE: 477-1389  
 7 EMAIL: VLW@VLWILLIAMSLAW.COM

8 *Attorney for Interested Party*  
 9 *SH Enterprises, Inc.*

**RECEIVED**  
 OFFICE OF PUBLIC ACCOUNTABILITY  
 PROCUREMENT APPEALS

DATE: 7-31-2020  
 TIME: 4:10  AM  PM BY: JMY  
 FILE NO OPA-PA: 19-011 / 20-003

**BEFORE THE PUBLIC AUDITOR**  
**PROCUREMENT APPEALS**

10 IN THE APPEAL OF:

11 BASIL FOOD INDUSTRIAL SERVICES  
 12 CORPORATION,

Appellant.

DOCKET NO. OPA-PA-19-011  
 OPA-PA-20-003

**SH ENTERPRISES, INC.'S  
 EXHIBIT LIST**

13 COMES NOW, Interested Party SH Enterprises, Inc. ("SH Enterprise"), by and through  
 14 their counsel of record, hereby submits their Exhibit List in the above captioned matter, as  
 15 follows:

EXHIBIT NO.	DATE	DESCRIPTION
a.	October 09, 2019	Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion
b.	October 18, 2019	Amendment No. 2 Received by Basil (Betty Dela Cruz) (p.730)
c.	October 24, 2019	Amendment No. 3 Received by Basil (Leeann Sanchez) (p.758)
d.	October 25, 2019	Bid Analysis (p.808-811)
e.	November 8, 2019	Purchase Order No. P206A00841 – Contract to SH Enterprise
f.	March 28, 2019	Emergency Procurement to SH Enterprise
g.	April 3, 2019	Food Establishment Inspection Report
h.	April 5, 2019	Purchase Orders addressed to Appellant for April 8, 2019 through April 30, 2019
i.	April 5, 2019	SH Enterprises' Withdrawal of Purchase Order for Home of Elderly Food Services under the Department of Public Health and Social Services
j.	January 22, 2020	Letter to Governor Leon Guerrero Re: Donation

1 SH Enterprises reserves the right to introduce additional rebuttal and impeachment  
2 exhibits should the need arise.

3 Respectfully submitted this 31<sup>st</sup> day of July 2020.


4  
5 **LAW OFFICE OF VANESSA L. WILLIAMS, P.C.**  
*Attorney for SH Enterprises, Inc.*

6  
7 

8 \_\_\_\_\_  
9 VANESSA L. WILLIAMS, ESQ.

**EXHIBIT "a"**

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY  
AND VOLUNTARY EXCLUSION**

<b>Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion</b>	
<b>PROJECT INFORMATION:</b>	
Project Name:	<u>Elderly Nutrition Program-Congregate &amp; Home Delivered Meals.</u>
Project Number:	<u>GSA-056-19</u>
Data Universal Numbering System (DUNS) Number:	_____
Principal Contact:	<u>SH Ent., Inc. / Hui Sook Min - Program Supervisor</u>
	<small><i>Firm Name / Contact Name / Title</i></small>
	<u>P.O. Box 9730 Tamuning, Guam 96931 / 649-0521</u>
	<small><i>Firm Address/ Phone Number/ Email Address</i></small> <u>californiamart@yahoo.com</u>
<b>Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion</b>	
<b>Contractor-</b>	
(1) The undersigned certifies, by submission of this proposal, that it and its principals:	
(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal agencies;	
(b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;	
(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and	
(d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.	
(2) Where the undersigned is unable to certify to any of the statements in this certification, such Subrecipient/ Sub Grantee offeror shall attach an explanation to this proposal*.	
*Exceptions will not necessarily result in denial of award, but will be considered in determining bidder responsibility. For any exception noted, indicate to whom it applies, initiating agency, dates of action, and the type of violation.	
I, the official named below, hereby swear that I am duly authorized to legally bind the prospective contractor to the above described certification. I am fully aware that this certification is made under penalty of perjury under the laws of Guam.	
	<u>Hui Sook Min / Vice-President</u>
Signature/Authorized Certifying Official	Typed Name and Title
<u>SH Enterprises, Inc.</u>	<u>10-9-19</u>
Prospective Contractor/Organization	Date Signed
Contractor License No. (if any) _____	

**Instructions: Bidders need to sign and submit this form with the Bid.**

**EXHIBIT "b"**



EDWARD M. BIRN  
Director (Direktor)

EDITH C. PANGELINAN  
Deputy Director (Sigundo Direktor)

**DEPARTMENT OF  
ADMINISTRATION**  
DIPATTAMENTON ATMENESTRASION  
GENERAL SERVICES AGENCY  
(Ahensian Setblasion Hinirat)

Telephone (Telifon): (671) 475-1707/1729 • Fax (Faks): (671) 472-4217/1727  
Email: gsaprourement@gsadoa.guam.gov



LOURDES A. LEON GUERRERO  
Governor (Maga'héga)

JOSHUA F. TENORIO  
Lt. Governor (Sigundo Maga'héhi)

October 18, 2019

**Invitation or Bid: GSA-056-19**  
Nutrition Services for the Comprehensive Management,  
Operations, and Maintenance of the Elderly Nutrition Program,  
Congregate Meals and Home Delivered Meals Components.

**AMENDMENT #2**

1. Amend Bid Opening Date

From: October 10, 2019 at 3:00 p.m

To Now Read: October 24, 2019 at 2:00 p.m

\*All Others Remain the Same.

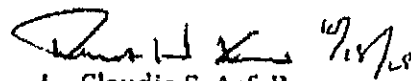
Please Print  
Acknowledgement Copy (Re-Fax to GSA)

Received by: BETTY ANN DELA CRUZ

Date: 10/19/2019

Company Name: BASIL FOOD INDUSTRIAL SERVICES

Fax To: 475-1727 or 472-4217  
Email To: gsaprourement@gsadoa.guam.gov

  
Claudia S. Acfalle  
Chief Procurement Officer

**EXHIBIT "c"**



EDWARD M. BIRN  
Director (Direktor)

EDITH C. PANGELINAN  
Deputy Director (Sigundo Direktor)

**DEPARTMENT OF  
ADMINISTRATION**  
DIPATTAMENTON ATMENESTRASION

GENERAL SERVICES AGENCY  
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Telephone (Telifon): (671) 475-1707/1729 • Fax (Faks): (671) 472-4217/1727



LOURDES A. LEON GUERRERO  
Governor (Maga'hågo)

JOSHUA F. TENORIO  
Lt. Governor (Sigundo Maga'håhi)

**AMENDMENT No 3**

GSA Bid No. 056-19 (Nutritional Services for the Comprehensive Management, Operations and Maintenance of the Elderly Nutrition Program, Congregate Meals and Home Delivery Components).

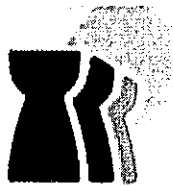
Amendment No 2 issued on October 24, 2019 is changed to Amendment 3. All other statements stated in Amendment No 2 issued on October 24, 2019 remains the same.

CLAUDIA S. ACFALLE  
Chief Procurement Officer

Base Print	
ACKNOWLEDGEMENT COPY (Re-fax to GSA)	
Received By:	<i>VerAnn Sanchez</i>
Date:	<i>10/24/19</i>
Company Name:	<i>Basil Food Service</i>
Fax to: 475-1727 or 472-4217	
E-mail to: <a href="mailto:gsaprocurament@gsados.guam.gov">gsaprocurament@gsados.guam.gov</a>	



**EXHIBIT "d"**



EDWARD M. BIRN  
Director (Direktot)

EDITH C. PANGELINAN

Deputy Director (Sigundo Direktot)

**DEPARTMENT OF  
ADMINISTRATION**  
DIPATTAMENTON ATMENESTRASION

GENERAL SERVICES AGENCY  
(Ahenslan Setbision Hinirat)

Telephone (Telifon): (671) 475-1707/1729 • Fax (Faks): (671) 472-4217/1727



LOURDES A. LEON GUERRERO  
Governor (Maga'håga)

JOSHUA F. TENORIO  
Lt. Governor (Sigundo Maga'låhi)

Inter-Departmental Memorandum

October 25, 2019

To: Chief Procurement Officer

From: Buyer II

Subject: Analysis on Invitation for **Bid No. GSA-056-19** Nutrition Services for the Comprehensive Management, Operations and Maintenance of the Elderly Nutrition Program, Congregate Meals and Home-Delivered Components.

The Invitation for Bid (IFB) GSA-056-19 was officially announced and advertised in the Guam Daily Post on September 25, 2019. The bid was officially opened and read on October 24, 2019 at 2:00pm. Three (3) prospective bidders expressed interest by acknowledging receipt of the bid package. Two (2) submitted the bid package namely:

**S.H. Enterprise, Inc. – Bid Package Submittal (Requirements Page 1 of 151)**

**Bid Guarantee (15% of Bid Amount)**

Cashier's Check #2266152 3	- 10/18/19 - \$125,000.00	(First Hawaiian Bank)
Cashier's Check #2276032 5	- 10/22/19 - \$50,000.00	(First Hawaiian Bank)
Cashier's Check #0000171734	- 10/23/19 - \$20,000.00	(Coast360 FCU)
Cashier's Check #0447785318	- 10/23/19 - \$30,000.00	(Navy Federal Credit Unit)
Cashier's Check #2276044 2	- 10/24/19 - \$150,000.00	(First Hawaiian Bank)
Cashier's Check #2266204 5	- 10/24/19 - \$48,500.00	(First Hawaiian Bank)
Cashier's Check #2266205 4	- 10/24/19 - \$145,000.00	(First Hawaiian Bank)
<b>Total Amount</b>	<b>----- \$568,500.00</b>	

**Statement of Qualifications**

Submitted by SH Enterprises

**Affidavits were submitted, notarized and sealed:**

- Affidavit Disclosing Ownership and Commissions – Page 5 of 151

**Other Requirements:**

- Affidavit Re Non-Collusion – Page 6 of 151
- Affidavit Re No Gratuities or Kickbacks – Page 7 of 151
- Affidavit Re Ethical Standards – Page 8 of 151
- Affidavit Re Contingent Fees – Page 9 of 151
- Declaration Re Compliance with U.S. DOL Wage Determination for Guam – Page 10 of 151
- Special Provisions: - Restriction against Sex Offenders – Page 22 of 151
- Current Business License/Sanitary Permit relating to this bid  
(Wholesale of Food Beverages Snacks Dry Goods Groceries & Related Items – Expires 2/29/2020)  
(Catering Services – Expires 3/31/2020)  
(Sanitary Permit #190003265 #190 Chan San Antonio Rd., Tamuning – Expiration: 6/30/2020)  
(Sanitary Permit #190003267 ET Calvo Mem. Industrial Park, Tamuning – Expiration: 6/30/2020)

**Mandatory Federal Program Forms – Page 34 of 151**

- Limited English Proficiency Certification – B1 (Signed & dated 10/8/19)
  - Certification of Non-Discrimination – B2 (Signed & dated 10/9/19)
  - Civil Rights Requirements – B3 (Signed & dated 10/9/19)
  - Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion – B4 (Signed & dated 10/9/19)
  - Compliance with Federal Laws and Regulations – B5 (Signed & dated 10/9/19)
  - Uniform Guidance – Contract Clauses – B6 – (Signed & dated 10/9/19)
- 

**II. Bid Items: - Page 53 of 151**

**Description:**

1.0 Nutrition Services for the Comprehensive Management, Operations, and Maintenance of the Elderly Nutrition Program, **Congregate Meals Components.**

**Term:**

Three (3) years with an option to renew for two (2) additional fiscal years

**Total Bid Amount:**

\$1,070,550.00

Congregate bid prices is to be determine by taking the estimated number of services days (250) multiplied by the estimated number of clients (780) multiplied by the proposed per meal unit price to obtain a total bid, e.g.,  
**250 service days x 780 x \$5.49 (unit price per meal) = \$1,070,550.00 total bid amount.**

---

**Description:**

2.0 Nutrition Services for the Comprehensive Management, Operations, and Maintenance of the Elderly Nutrition Program, **Home-Delivered Meals Components**

**Term:**

Three (3) years with an option to renew for two (2) additional fiscal years

**Total Bid Amount:**

\$2,718,661.00

Home delivery bid prices is to be determine by taking the estimated number of services days (355) multiplied by the estimated number of clients (1,180) x proposed unit price per meal to obtain a total bid amount (e.g.,  
**355 service days x 1180 estimated clients x \$6.49 (unit price per meal) = \$2,718.661.00 total bid amount.**

"All or None Award" Grand Total for 1.0 & 2.0 = **\$3,789,211.00** x 15% = \$568,381.65

## **Basil Food Industrial Services Corp. – Bid Package Submittal (Requirements Page 1 of 151)**

### **Bid Guarantee (15% of Bid Amount) – Page 23 of 151**

Bid Bond No. CKI-0013-GNBB-19

Issued by Chung Kuo Insurance Co., Ltd.

Amount of \$693,000.00

### **Statement of Qualifications**

Submitted by Basil Food Industrial Services Corp.

Submitted Introduction /Profile

### **Affidavits were submitted, notarized and sealed:**

- Affidavit Disclosing Ownership and Commissions – Page 5 of 151

### **Other Requirements:**

- Affidavit Re Non-Collusion – Page 6 of 151
  - Affidavit Re No Gratuities or Kickbacks – Page 7 of 151
  - Affidavit Re Ethical Standards – Page 8 of 151
  - Affidavit Re Contingent Fees – Page 9 of 151
  - Declaration Re Compliance with U.S. DOL Wage Determination for Guam – Page 10 of 151
  - Special Provisions: - Restriction against Sex Offenders – Page 22 of 151
  - Current Business License/Sanitary Permit relating to this bid  
(Catering Services – Expires 5/31/2020)  
(Sanitary Permit #190000896 #West O'Brien Drive Hagatna – Expiration: 6/30/2020)
- 

### **Mandatory Federal Program Forms – Page 34 of 151**

- Limited English Proficiency Certification – B1 (Signed & dated 10/10/19)
  - Certification of Non-Discrimination – B2 (Signed & dated 10/10/19)
  - Civil Rights Requirements – B3 (Signed)
  - Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion – B4  
(Signed & dated 10/10/19)
  - Compliance with Federal Laws and Regulations – B5 (Signed & dated 10/10/19)
  - Uniform Guidance – Contract Clauses – B6 – (Signed & dated 10/10/19)
- 

## **II. Bid Items: - Page 53 of 151**

### **Description:**

1.0 Nutrition Services for the Comprehensive Management, Operations, and Maintenance of the Elderly Nutrition Program, **Congregate Meals Components.**

### **Term:**

Three (3) years with an option to renew for two (2) additional fiscal years

**Total Bid Amount:**

\$1,014,000.00

Congregate bid prices is to be determine by taking the estimated number of services days (250) multiplied by the estimated number of clients (780) multiplied by the proposed per meal unit price to obtain a total bid, e.g.,  
**250 service days x 780 x \$5.20 (unit price per meal) = \$1,014,000.00 total bid amount.**

**Description:**

2.0 Nutrition Services for the Comprehensive Management, Operations, and Maintenance of the Elderly Nutrition Program, **Home-Delivered Meals Components**

**Term:**

Three (3) years with an option to renew for two (2) additional fiscal years

**Total Bid Amount:**

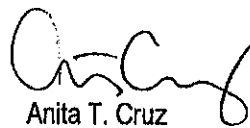
\$2,806,630.00

Home delivery bid prices is to be determine by taking the estimated number of services days (355) multiplied by the estimated number of clients (1,180) x proposed unit price per meal to obtain a total bid amount (e.g.,  
**355 service days x 1180 estimated clients x \$6.70 (unit price per meal) = \$2,806,630.00 total bid amount.**

"All or None Award" Grand Total for 1.0 & 2.0 = **\$3,820,630.00** x 15% = \$573,094.50

Therefore, it is hereby recommended with the approval from the Department of Health and Social Services, Ms. Linda Unpingco DeNorcey, MPH, Director that this bid be awarded to **SH Enterprise, Inc. in the total amount of \$3,789,211.00** for being the lowest most responsive and responsible bidder.

CERTIFICATION: Pursuant to 5 G.C.A. Section 5250, I hereby certify under penalty of perjury that I am the procurement office responsible for administering the solicitation of the attached contract, and that I have caused to be prepared and now maintain a full and complete record of the procurement as required by law.

  
Anita T. Cruz

Concurred by:

  
\_\_\_\_\_  
CLAUDIA S. ACFALLE  
Chief Procurement Officer



EDWARD M. BIRN  
Director (Direktat)

EDITH C. PANGELINAN

Deputy Director (Sigundo Direktat)

# DEPARTMENT OF ADMINISTRATION

DIPATTAMENTON ATMENESTRASION

GENERAL SERVICES AGENCY

(Ahensian Setblasion Hinirat)

Telephone (Telfon): (671) 475-1707/1729 • Fax (Faks): (671) 472-4217/1727



LOURDES A. LEON GUERRERO  
Governor (Maga'hága)

JOSHUA F. TENORIO

Lt. Governor (Sigundo Maga'láhi)

Memorandum

October 25, 2019

To: Department of Public Health & Social Services

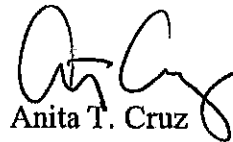
From: Buyer Supervisor II

Subject: Approval of Bid Specifications IFB No. GSA-056-19 "Nutrition Services for the Comprehensive Management, Operations and Maintenance of the Elderly Nutrition Program, Congregate Meals and Home Delivered Meals Components.

Attached is a copy of specifications submitted by S.H. Enterprises in regards to the above Invitation for Bid No. GSA-056-19.

Please review and evaluate the specifications provided by the bidder and concur below if all required specifications are met. We would appreciate your response no later than Monday, October 28, 2019 before close of business, 5:00pm in order for GSA to process accordingly.

If you have any questions regarding this matter, please call at 475-1713 or fax 475-1727.

  
Anita T. Cruz

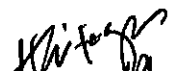
Meets Specifications

Non-Compliance of Specifications

Remarks: \_\_\_\_\_

Concurred By:

 10/30/19  
LINDA UNPINGCO DENORCEY, MPH  
DIRECTOR, DPHSS

  
10.30.19



EDWARD M. BIRN  
Director (Direktot)

EDITH C. PANGELINAN

Deputy Director (Sigundo Direktot)

# DEPARTMENT OF ADMINISTRATION

DIPATTAMENTON ATMENESTRASION

GENERAL SERVICES AGENCY

(Ahensian Setbision Hinirat)

Telephone (Telifon): (671) 475-1707/1729 • Fax (Faks): (671) 472-4217/1727



LOURDES A. LEON GUERRERO  
Governor (Maga'ååga)

JOSHUA F. TENORIO

Lt. Governor (Sigundo Maga'låhi)

Memorandum

October 25, 2019

To: Department of Public Health & Social Services

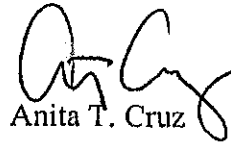
From: Buyer Supervisor II

Subject: Approval of Bid Specifications IFB No. GSA-056-19 "Nutrition Services for the Comprehensive Management, Operations and Maintenance of the Elderly Nutrition Program, Congregate Meals and Home Delivered Meals Components.

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If you have any questions regarding this matter, please call at 475-1713 or fax 475-1727.

  
Anita T. Cruz

Technical Specifications

Price-Compliance of Specifications

Remarks: \_\_\_\_\_  
\_\_\_\_\_

Approved By:

\_\_\_\_\_  
IDA UNPINGCO DENORCEY, MPH  
DIRECTOR, DPHSS

**ACKNOWLEDGEMENT COPY**  
RECEIVED BY Cherise S. V. S.  
DATE 10-25-19

**EXHIBIT "e"**





**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 P.O. Box 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

**No.** P206A00841

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS PACKAGES BY  
 CORRESPONDENCE ETC

FO.B.	BY AIR FREIGHT TEL CONTACT SHIP VIA	DATE 11/03/2019	JOB ORDER NO 173020004230	OBJCT 230
-------	-------------------------------------	--------------------	------------------------------	--------------

<b>RODZM</b>	<b>TO:</b> CALIFORNIA MART S.H. ENTERPRISES, INC. P.O. BOX 9730 TAMUNING, GU 96931 Telephone: 671 649-0521 Fax: 671 649-0527 Email:	<b>VENDOR</b> S0097959	<b>CONSIGNEE DESTINATION &amp; MARKING</b> DEPT OF PUBLIC HEALTH & SOCIAL SERVICES 123 CHALAN KARETA RTE. 10 MANGILAO, GU 96923-0000  TII-IIIC2 HOME DEL MEAL OVRMCH
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AUTHORITY 3109	** INVITATION NO GSA-356-19	** CONTRACT NO.	TIME FOR DELIVERY SEE BELOW	EXPIRES	DISCOUNT TERMS
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ITEM	ARTICLES OR SERVICES	CITY	UNIT	UNIT PRICE	AMOUNT	DOCUMENT NUMBER	PAGE
	<p>ISSUED TO COVER THE COST TO FRCVDE HOME-DELIVERED MEAL SERVICES. REF: IFB-GSA-056-19 ITEM NO. 2.0 NUTRITION SERVICES FOR THE COMPREHENSIVE MANAGEMENT, OPERATIONS, AND MAINTENANCE OF THE ELDERLY NUTRITION PROGRAM, HOME-DELIVERED MEALS COMPONENT.</p> <p>VENDOR MUST COMPLY WITH ALL REQUIREMENTS/SPECIFICATIONS INCLUSIVE OF ALL THE TERMS AND CONDITIONS WHICH ARE MADE A PART OF THIS PURCHASE ORDER.</p> <p>PERIOD: 12/01/19 - 11/30/20 MONDAY THROUGH SUNDAY.</p> <p>COVERS: 1 THRU 2 MOS. OF A NCTE:</p> <p>THE GOVERNMENT OF GUAM WILL NOT BE RESPONSIBLE FOR 'UNAUTHORIZED' PURCHASES OR SERVICES. Note: Amounts due this Purchase Order may be off set for monies due the of Guam inclusive of but not limited to taxes, fees, and returned checks other damages, penalties, and Attorney's fees, after failure to pay To be coordinated between the agency and vendor</p> <p>ALL LATE DELIVERIES AND ACCEPTANCES ARE SUBJECT TO THE LIQUIDATED DAMAGES CLAUSE IN SECTION 6101(9) (a) OF THE GAR.</p>				307731.80	Q201730022	

<p><b>SPECIAL INSTRUCTIONS TO VENDOR</b></p> <p>B. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 984, AGANA, GUAM 96910.</p> <p>C. PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION</p> <p>D. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE.</p> <p>E. * * THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID.</p> <p>F. * ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON APPROVAL OF GOODS IN GUAM.</p>	<p>XXXXXXXXXXXX</p> <p><b>↑ TOTAL ↑</b></p>	<p>A. <u>DUPLICATE ALL THIS ORDER</u> IF YOUR PO#A, CO#-1 EXCEPT THE TOTAL</p> <p>PREPARE AND RETURN TABLE FOR ASSIGNMENT</p>
--	---	---

<p>CONTRACTOR PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE. SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.</p>	<p>ADVANCE PAYMENT AUTHORIZATION</p> <p>PAYMENT ENCLOSED <input type="checkbox"/></p>	<p>SIGNATURE: <i>C. Acfalle</i></p> <p>NAME: Claudia S. Acfalle TITLE: Chief Procurement Officer</p>
--	---	--



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 P.H. Guam 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

No. P206A00841

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES OR  
 CORRESPONDENCE ETC

IF AIR FREIGHT DEL CONTACT SHIP VIA

DATE	JOB ORDER NO	OBJCT
11/03/2019	173020004230	230

TO:

CALIFORNIA MART  
 S.H. ENTERPRISES, INC.  
 P.O. BOX 9730  
 TAMUNING, GU 96931  
 Telephone: 671 649-0521 Fax: 671 649-0527  
 Email:

VENDOR  
 S0097959

**SHIP TO**

CONSIGNEE DESTINATION & MARKING

DEPT OF PUBLIC HEALTH  
 & SOCIAL SERVICES  
 123 CHALAN KARETA RTE. 10  
 MANGILAO, GU 96923-0000

TIT-IIIIC2 HOME DEL MEAL OVRMCH

CURRY	** INVITATION NO	** CONTRACT NO.	TIME FOR DELIVERY	EXPIRES	DISCOUNT TERMS
31B9	GSA-356-19		SEE BELOW		

ARTICLE OR SERVICES	QTY	UNIT	UNIT PRICE	AMOUNT	DOCUMENT NUMBER	TAX
---------------------	-----	------	------------	--------	-----------------	-----

THIS ORDER IS SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:

1. Acknowledgment copy of this order must be signed and returned advising approximate or definite shipping date.
2. No variation in any of the terms, conditions, deliveries, prices, quantity, quality, or specification on this order, irrespective of the wording of the seller's acceptance, will be effective without buyer's written consent.
3. Packing list must accompany each shipment, showing our order number, description and part serial number for each item.
4. Shipments must be identified as "PARTIAL" or "COMPLETE".
5. Material is subject to buyer's inspection and approval within a reasonable time after delivery; if specifications are not met, material shall be returned at seller's expense.
6. In connection with any prompt payment discount offered, time will be computed from date of delivery and acceptance at destination, or from the date the correct invoice or voucher is received in the office specified by the Government of Guam, if the latter is later than date of delivery and acceptance. Payment is deemed to be made, for the purpose of earning discount, on the date of the mailing of the check.
7. Overshipments, unless specifically authorized, will not be accepted.
8. In connection with bid awards and contracts, this purchase order shall be governed by the Special Provisions and Bid General Terms and Conditions as specified.

ALL INSTRUCTIONS TO VENDOR  
 SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION,  
 GOVERNMENT OF GUAM, P.O. BOX 984, AGADIA, GUAM 96910.  
 PAYMENT IS THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION  
 THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE.  
 \* THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID.  
 † ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS  
 IN GUAM.

307731.93

A. BEFORE THE CHECK  
 IS CASHED THE TOTAL  
 ENTERED ON THE CHECK

↑ TOTAL ↑

IF YOU HAVE ANY QUESTIONS,  
 PLEASE CALL THE DIVISION OF ACCOUNTS

SIGNATURE:

*C. Acalle*

RECTOR PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR  
 SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING  
 PACKAGES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE  
 ORDER NUMBER SHOWN ABOVE  
 REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.

ADVANCE PAYMENT  
 AUTHORIZATION  
 PAYMENT  
 ENCLOSED

Claudia S. Acalle Chief Procurement Officer



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 Piti, Guam 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

**No.** 2206A00841

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES OR  
 CORRESPONDENCE ETC

PO # \_\_\_\_\_ AIR FREIGHT TEL CONTACT / SHIP VIA \_\_\_\_\_

DATE: 11/03/2019  
 JOB ORDER NO: 173020004230  
 OBJCT: 230

<b>VENDOR</b>	<b>TO:</b> CALIFORNIA MART S.H. ENTERPRISES, INC. P.O. BOX 9730 TAMUNING, GU 96931 Telephone: 671 649-0521 Fax: 671 649-1527 Email:	<b>VENDOR</b> S0097959	<b>CONSIGNEE DESTINATION &amp; MARKING</b> DEPT OF PUBLIC HEALTH & SOCIAL SERVICES 123 CHALAN KARETA RTE. 10 MANGILAO, GU 96923-0000  FIT-111C2 HOME DEL MEAL OVRMCH		
	<b>AUTHORITY</b> 3109	<b>IF INVITATION NO</b> GSA-356-19	<b>IF CONTRACT NO</b> _____	<b>TIME FOR DELIVERY</b> SEE BELOW	<b>DISCOUNT TERMS</b> _____

ITEM	ARTICLE OF SERVICES	QTY	UNIT	UNIT PRICE	AMOUNT	DOCUMENT NUMBER	PAGE
	36 MOS. AGREEMENT  1180 CLIENTS X \$6.49 PER MEAL =\$7,658.20 X 59 SERVICE DAYS =\$307,731.80  HOLIDAYS ON: MON. DEC. 9, 2019 OUR LADY OF CAMARIN DAY; WED. DEC. 25, 2019 CHRISTMAS DAY; AND WED. JAN. 1, 2020 NEW YEARS.  EOC: CHARLENE SAN NICOLAS 9633-3999 DPHSS  ***NOTHING FOLLOWS***  NOTE: THE GOVERNMENT OF GUAM WILL NOT BE RESPONSIBLE FOR 'UNAUTHORIZED' PURCHASES OR SERVICES. Note: Amounts due this Purchase Order may be off set for monies due the Government of Guam inclusive of but not limited to taxes, fees, and returned checks, other damages, penalties, and Attorney's fees, after failure to pay. To be coordinated between the agency and vendor. ALL LATE DELIVERIES AND ACCEPTANCES ARE SUBJECT TO THE LIQUIDATED DAMAGES CLAUSE IN SECTION 610119) (a) OF THE GAR.						

<b>SPECIAL INSTRUCTIONS TO VENDOR</b> B. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 934, AGANA, GUAM 96910. C. PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION. D. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE. E. # THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID. F. # ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.		307731.80	<b>↑ TOTAL ↑</b>	A. DO NOT GET THIS ORDER IN YOUR POSSESSION UNTIL YOU HAVE RECEIVED THE PURCHASE ORDER.
CONTRACTOR, PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.		SIGNATURE: <i>C. Acfalle</i>		
ADVANCE PAYMENT AUTHORIZATION PAYMENT ENCLOSED <input type="checkbox"/>		NAME: Claudia S. Acfalle		TITLE: Chief Procurement Officer



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 P.O. Box 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

No. P206A00841

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES OR  
 CORRESPONDENCE ETC

IF AIR FREIGHT CONTACT SHIP VIA

DATE: 11/23/2019  
 JOB ORDER NO: 173020004230  
 OBJCT: 230

**TO:**

CALIFORNIA MART  
 S.H. ENTERPRISES, INC.  
 P.O. BOX 9730  
 TAMUNING, GU 96931  
 Telephone: 671 649-0521 Fax: 671 649-0527  
 Email:

**VENDOR**

50097959

**CONSIGNEE DESTINATION & MARKING**

DEPT OF PUBLIC HEALTH  
 & SOCIAL SERVICES  
 123 CHALAN KARETA RTE. 10  
 MANGILAO, GU 96923-0000

TIT-111C2 HOME DEL MEAL OVRMCH

**SHIP TO**

QUANTITY: 3109  
 INVITATION NO: SSA-356-19  
 CONTRACTING NO.:  
 TIME FOR DELIVERY: SEE BELOW  
 EXPONING:  
 DISCOUNT TERMS:

ARTICLE OF SERVICES	QTY	UNIT	UNIT PRICE	AMOUNT	DOCUMENT NUMBER	TAX
*****						
VENDOR ACKNOWLEDGMENT						
RETURN TO SUPPLY MANAGEMENT DIVISION						
DATE OF RECEIPT OF THIS ORDER 11-8-19						
SIGNATURE						
*****						
RECEIVING REPORT COPY						
I CERTIFY THE ABOVE ARTICLES AND/OR SERVICES HAVE/HAS BEEN RECEIVED AND/OR RENDERED AND THE SAME HAS BEEN INSPECTED AND ACCEPTED EXCEPT AS OTHERWISE NOTED HEREIN.						
DATE RECEIVED: _____ SIGNATURE: _____						
*****						

**ALL INSTRUCTIONS TO VENDOR**  
 SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 984, AGANA, GUAM 96910.  
 PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION.  
 THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE.  
 \* THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID.  
 ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.

307731.80

A. 307731.80 TOTAL  
 ENCLOSURE TOTAL  
 TOTAL AMOUNT DUE TO VENDOR

**↑ TOTAL ↑**

FACTORY PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PO NUMBER SHOWN ABOVE.  
 REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.

ADVANCE PAYMENT AUTHORIZATION  
 PAYMENT ENCLOSED

SIGNATURE:   
 Claudia S. Acalle Chief Procurement Officer

**EXHIBIT "f"**



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 Piti, Guam 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

No. P196E00314

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES, B/L,  
 CORRESPONDENCE ETC.

F.O.B.

\* AIR FREIGHT TEL CONTACT

SHIP VIA:

DATE

3/28/2019

JOB ORDER NO.

173019104230

OBJCL

230

PREPAID SHIPMENT CHARGES AS SEPARATE ITEM ON INVOICE

TO:

CALIFORNIA MART  
 S.H. ENTERPRISES, INC.  
 P.O. BOX 9730  
 TAMUNING, GU 96931  
 Telephone: 671 649-0521 Fax: 671 649-2957  
 Email:

VENDOR

S0097959

CONSIGNEE, DESTINATION & MARKING

DEPT OF PUBLIC HEALTH  
 & SOCIAL SERVICES  
 123 CHALAN KARETA RTE. 10  
 MANGILAO, GU 96923-0000

TITLE III-C-2 HOME DELIV MEALS

AUTHORITY  
 3113

\*\* INVITATION NO.

\*\* CONTRACT NO.

TIME FOR DELIVERY  
 SEE BELOW

EXPIRING

DISCOUNT TERMS:

1 PROVISION OF NUTRITION  
 SERVICES FOR THE COMPREHENSIVE  
 MANAGEMENT, OPERATIONS AND  
 MAINTENANCE FOR DPHSS ELDERLY  
 NUTRITION HOME-DELIVERED MEAL  
 PROGRAM. SPECIFICATIONS  
 ATTACHED.

\*SERVICES WILL BE ACQUIRED  
 THROUGH THE PROVISION OF SGCA  
 SUBSECTION 5150 EMERGENCY  
 PROCUREMENT.

PERIOD TO COVER:  
 SUNDAY THROUGH MONDAY  
 APRIL 1 THRU APRIL 30, 2019.

1,180 CLIENTS X \$6.95 PER MEAL  
 = \$8,211.00 PER DAY X 30  
 SERVICE DAYS= \$246,030.00.

NOTE:

THE GOVERNMENT OF GUAM WILL NOT BE RESPONSIBLE FOR 'UNAUTHORIZED' PURCHASES OR SERVICES.  
 Note: Amounts due this Purchase Order may be off set for monies due the Government of Guam inclusive of but not limited to taxes, fees, and returned checks plus for other damages, penalties, and Attorney's fees, after failure to pay accordingly ALL LATE DELIVERIES AND ACCEPTANCES ARE SUBJECT TO THE LIQUIDATED DAMAGES CLAUSE IN SECTION 6101(9) (a) OF THE GAR.

1 LOT

246030.000

246030.00

0191730046

SPECIAL INSTRUCTIONS TO VENDOR:

- H. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 834, AGANA, GUAM 96910.
- C. PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION.
- D. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE.
- E. \* THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID.
- F. \* ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.

XXXXXXXXXXXX

A. DO NOT FILL THIS ORDER  
 IF YOUR TOTAL COST  
 EXCEEDS THIS TOTAL.

↑ TOTAL ↑

INSERT CHANGES AND RETURN  
 THIS ORDER FOR AMENDMENT.

SIGNATURE:

*C. Acalle*

CONTRACTOR: PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE. SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.

ADVANCE PAYMENT  
 AUTHORIZATION

PAYMENT  
 ENCLOSED

Claudia S. Acalle Chief Procurement Officer



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marina Drive  
 P.O. Box 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

No. 196E00314

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES B/L,  
 CORRESPONDENCE ETC.

28	BY AIR FREIGHT CONTACT SUPPLIER VIA:	DATE	JOB ORDER NO.	OBJCT
	PREPAID SHOW SHIPPING CHARGES AS SEPARATE ITEM ON INVOICE	3/23/2019	173019104230	230

<b>TO:</b> CALIFORNIA MART S.H. ENTERPRISES, INC. P.O. BOX 9730 TAMUNING, GU 96931 Telephone: 671 649-0521 Fax: 671 649-2957 Email:	<b>VENDOR</b> 50097959	<b>CONSIGNEE, DESTINATION &amp; MARKING</b> DEPT OF PUBLIC HEALTH & SOCIAL SERVICES 123 CHALAN KARETA RTE. 10 MANGILAO, GU 96923-0000  TITLE III-C-2 HOME DELIV MEALS
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AUTHORITY 3113	** INVITATION NO.	** CONTRACT NO.	TIME FOR DELIVERY SEE BELOW	EXPIRING	DISCOUNT TERMS
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* AUTHORIZE PERSONNEL / POC * EREANNA SABLAN 735-7415 CHARLENE SAN NICOLAS 735-7421 * NOTHING FOLLOWS *					
NOTE: THE GOVERNMENT OF GUAM WILL NOT BE RESPONSIBLE FOR 'UNAUTHORIZED' PURCHASES OR SERVICES. Note: Amounts due this Purchase Order may be off set for monies due the Government of Guam inclusive of but not limited to taxes, fees, and returned checks other damages, penalties, and Attorney's fees, after failure to pay ALL LATE DELIVERIES AND ACCEPTANCES ARE SUBJECT TO THE LIQUIDATED DAMAGES CLAUSE IN SECTION 6101(9) (a) OF THE GAR.					

<b>SPECIAL INSTRUCTIONS TO VENDOR:</b> 1. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 104, AGANA, GUAM 96910. 2. PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION. 3. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE. 4. * THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID. 5. * ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.	246030.00	A. DO NOT FILL THIS ORDER IF YOUR TOTAL COST EXCEEDS THIS TOTAL.
	↑ TOTAL ↑	INSERT CHANGES AND RETURN THIS ORDER FOR AMENDMENT.

<b>CONTRACTOR: PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE. SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.</b>	ADVANCE PAYMENT AUTHORIZATION PAYMENT ENCLOSED <input type="checkbox"/>	SIGNATURE: <i>C. Acfalle</i> NAME: Claudia S. Acfalle TITLE: Chief Procurement Officer
--	--	---



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 P.H., Guam 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER  
**No. P196E00314**

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES, B/L,  
 CORRESPONDENCE ETC

F.O.P.	* AIR FREIGHT TEL. CONTACT	SHIP VIA:	DATE 3/28/2019	JOB ORDER NO. 173019104230	OBJCL 236
PREPAID SHOW SHIPPING CHARGES AS SEPARATE ITEM ON INVOICE					

**TO:**

CALIFORNIA MART  
 S.H. ENTERPRISES, INC.  
 P.O. BOX 9730  
 TAMUNING, GU 96931  
 Telephone: 671 649-0521 Fax: 671 649-2957  
 Email:

**VENDOR**  
 50097959

**CONSIGNEE, DESTINATION & MARKING**

DEPT OF PUBLIC HEALTH  
 & SOCIAL SERVICES  
 123 CHALAN KARETA RTE. 10  
 MANGILAO, GU 96923-0000

**TITLE III-C-2 HOME DELIV MEALS**

AUTHORITY 3113	** INVITATION NO.	** CONTRACT NO.	TIME FOR DELIVERY SEE BELOW	EXPIRING	DISCOUNT TERMS
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**THIS ORDER IS SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:**

1. Acknowledgment copy of this order must be signed and returned advising approximate or definite shipping date.
2. No variation in any of the terms, conditions, deliveries, prices, quantity, quality, or specification on this order, irrespective of the wording of the seller's acceptance, will be effective without buyer's written consent.
3. Packing list must accompany each shipment, showing our order number, description and part serial number for each item.
4. Shipments must be identified as "PARTIAL" or "COMPLETE".
5. Material is subject to buyer's inspection and approval within a reasonable time after delivery; if specifications are not met, material shall be returned at seller's expense.
6. In connection with any prompt payment discount offered, time will be computed from date of delivery and acceptance at destination, or from the date the correct invoice or voucher is received in the office specified by the Government of Guam, if the latter is later than date of delivery and acceptance. Payment is deemed to be made, for the purpose of earning discount, on the date of the mailing of the check.
7. Overshipments, unless specifically authorized, will not be accepted.
8. In connection with bid awards and contracts, this purchase order shall be governed by the Special Provisions and Bid General Terms and Conditions as specified.

**SPECIAL INSTRUCTIONS TO VENDOR:**

- A. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 134, AGANA, GUAM 96910.
- B. PAYMENT WITHIN (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION.
- C. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE.
- D. \*\* THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID.
- E. \*\* ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.

246030.00

**A. DO NOT FILL THIS ORDER IF YOUR TOTAL COST EXCEEDS THIS TOTAL.**

INSERT CHANGES AND RETURN THIS ORDER FOR AMENDMENT.

↑ **TOTAL** ↑

SIGNATURE:

*C. Acalle*

**Claudia S. Acalle** Chief Procurement Officer

**CONTRACTOR: PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE. SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.**

ADVANCE PAYMENT AUTHORIZATION  
 PAYMENT ENCLOSED

Control No.

ORIGINAL/VENDOR'S COPY





**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 P.H., Guam 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

No. 9196E00314

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES B/L  
 CORRESPONDENCE ETC.

3 B	* AIR FREIGHT TEL CONTACT	SHIP VIA:	DATE 3/29/2019	JOB ORDER NO. 173019104230	QBJCL 23C
PREPAID SHOW SHIPPING CHARGES AS SEPARATE ITEM ON INVOICE					

<b>TO:</b> CALIFORNIA MART S.H. ENTERPRISES, INC. P.O. BOX 9730 TAMUNING, GU 96931 Telephone: 671 649-0521 Fax: 671 649-2957 Email:	<b>VENDOR</b> S0097959	<b>CONSIGNEE DESTINATION &amp; MARKING</b> DEPT OF PUBLIC HEALTH & SOCIAL SERVICES 123 CHALAN KARETA RTE. 10 MANGILAO, GU 96923-0000  TITLE III-C-2 HOME DELIV MEALS
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AUTHORITY 3113	** INVITATION NO.	** CONTRACT NO.	TIME FOR DELIVERY SEE BELOW	EXPIRING	DISCOUNT TERMS:
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<p>VENDOR ACKNOWLEDGMENT</p> <p>RETURN TO SUPPLY MANAGEMENT DIVISION</p> <p>DATE OF RECEIPT OF THIS ORDER <u>3-29-19</u></p> <p>SIGNATURE <u>[Signature]</u></p>	
<p>RECEIVING REPORT COPY</p> <p>I CERTIFY THE ABOVE ARTICLES AND/OR SERVICES HAVE/HAS BEEN RECEIVED AND/OR RENDERED AND THE SAME HAS BEEN INSPECTED AND ACCEPTED EXCEPT AS OTHERWISE NOTED HEREIN.</p> <p>DATE RECEIVED: _____ SIGNATURE: _____</p>	

<p><b>SPECIAL INSTRUCTIONS TO VENDOR:</b></p> <ul style="list-style-type: none"> <li>SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 824, AGANA, GUAM 96910.</li> <li>PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION.</li> <li>THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE.</li> <li>THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID.</li> <li>ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.</li> </ul>	<p>246930.00</p> <p><b>↑ TOTAL ↑</b></p>	<p>A. DO NOT FILL THIS ORDER IF YOUR TOTAL COST EXCEEDS THIS TOTAL.</p> <p>INSERT CHANGES AND RETURN THIS ORDER FOR AMENDMENT.</p>
---	--	--

<p><b>CONTRACTOR: PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE INVOICE ORDER NUMBER SHOWN ABOVE.</b></p> <p>REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.</p>	<p>ADVANCE PAYMENT AUTHORIZATION</p> <p>PAYMENT ENCLOSED <input type="checkbox"/></p>	<p>SIGNATURE: <u>[Signature]</u></p> <p>NAME: <u>Claudia S. Achille</u> TITLE: <u>Chief Procurement Officer</u></p>
---	---	---

**EXHIBIT "g"**

**Department of Public Health and Social Services  
Division of Environmental Health  
Food Establishment Inspection Report**

Page 1 of 6

INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE		ESTABLISHMENT NAME	
Regular		<input checked="" type="checkbox"/>	38	04 / 03 / 2019		S.H. Enterprises	
Follow-up				TIME IN	TIME OUT	PERMIT HOLDER	
Complaint	<input checked="" type="checkbox"/>		RATING	7:40 AM	3:30 PM	S.H. Enterprises	
Investigation			C	SANITARY PERMIT NO.		LOCATION (Address)	
Other				180002606		Lot 4 Blk 2 Tract 259 ET Galvo Mem. Industrial Park, Tamuning	
ESTABLISHMENT TYPE			AREA	TELEPHONE	No. of Risk Factor/Intervention Violations		RISK CATEGORY
Catering			7	649-0521	4		4
					No. of Repeat Risk Factor/Intervention Violations		
					0		

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Circle or mark "X" designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status	COS	R	PTS	Description	
<b>Supervision</b>					
1	IN	<input checked="" type="checkbox"/>	6	Person in charge present, demonstrates knowledge, and performs duties	
<b>Employee Health</b>					
2	IN	OUT	6	Management awareness; policy present	
3	<input checked="" type="checkbox"/>	OUT	6	Proper use of reporting, restriction & exclusion	
<b>Good Hygienic Practices</b>					
4	<input checked="" type="checkbox"/>	OUT	N/A	N/O	Proper eating, testing, drinking, betelnut, or tobacco use
5	<input checked="" type="checkbox"/>	OUT	N/A	N/O	No discharge from eyes, nose, and mouth
<b>Preventing Contamination by Hands</b>					
6	<input checked="" type="checkbox"/>	OUT	N/A	N/O	Hands clean and properly washed
7	<input checked="" type="checkbox"/>	OUT	N/A	N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed
8	IN	<input checked="" type="checkbox"/>	6	Adequate handwashing facilities supplied & accessible	
<b>Approved Source</b>					
9	<input checked="" type="checkbox"/>	OUT	6	Food obtained from approved source	
10	IN	OUT	N/A	<input checked="" type="checkbox"/>	Food received at proper temperature
11	<input checked="" type="checkbox"/>	OUT	6	Food in good condition, safe, and unadulterated	
12	IN	OUT	<input checked="" type="checkbox"/>	N/O	Required records available; shellstock tags; parasite destruction
<b>Protection from Contamination</b>					
13	<input checked="" type="checkbox"/>	OUT	N/A	Food separated and protected	
14	IN	<input checked="" type="checkbox"/>	N/A	Food contact surfaces, cleaned & sanitized	
15	<input checked="" type="checkbox"/>	OUT	6	Proper disposition of returned, previously served, reconditioned, and unsafe food	

Compliance Status	COS	R	PTS	Description	
<b>Potentially Hazardous Food (TCS Food)</b>					
16	<input checked="" type="checkbox"/>	OUT	N/A	N/O	Proper cooking time and temperature
17	IN	OUT	N/A	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding
18	IN	OUT	N/A	<input checked="" type="checkbox"/>	Proper cooling time and temperature
19	<input checked="" type="checkbox"/>	OUT	N/A	N/O	Proper hot holding temperatures
20	IN	<input checked="" type="checkbox"/>	N/A	Proper cold holding temperatures	
21	IN	OUT	<input checked="" type="checkbox"/>	N/O	Proper date marking and disposition
<b>Consumer Advisory</b>					
22	IN	OUT	<input checked="" type="checkbox"/>	Consumer Advisory provided for raw or undercooked foods	
<b>Highly Susceptible Populations</b>					
23	<input checked="" type="checkbox"/>	OUT	N/A	Pasteurized Foods used, prohibited foods not offered	
<b>Chemical</b>					
24	IN	OUT	<input checked="" type="checkbox"/>	Food additives approved and properly used	
25	<input checked="" type="checkbox"/>	OUT	6	Toxic substances properly identified, stored, used	
<b>Conformance with Approved Procedures</b>					
26	IN	<input checked="" type="checkbox"/>	N/A	Compliance with variance, specialized process, and HACCP plan	

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury.

**GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status	COS	R	PTS	Description
<b>Safe Food and Water</b>				
27			1	Pasteurized eggs used where required
28			2	Water and ice from approved source
29			1	Variance obtained for specialized processing methods
<b>Food Temperature Control</b>				
30	<input checked="" type="checkbox"/>		1	Proper cooling methods used; adequate equipment for temperature control
31			1	Plant food properly cooked for hot holding
32			1	Approved thawing methods used
33	<input checked="" type="checkbox"/>		1	Thermometer provided and accurate
<b>Food Identification</b>				
34			1	Food properly labeled; original container
<b>Prevention of Food Contamination</b>				
35	<input checked="" type="checkbox"/>		2	Insects, rodents, and animals not present
36			1	Contamination prevented during food preparation, storage & display
37			1	Personal cleanliness
38	<input checked="" type="checkbox"/>		1	Wiping cloths; properly used and stored
39			1	Washing fruits and vegetables

Compliance Status	COS	R	PTS	Description
<b>Proper Use of Utensils</b>				
40			1	In-use utensils; properly stored
41			1	Utensils, equipment and linens; properly stored, dried, handled
42			1	Single-use/single-service articles; properly stored, used
43			1	Gloves used properly
<b>Utensils, Equipment and Vending</b>				
44	<input checked="" type="checkbox"/>		1	Food and nonfood contact surfaces cleanable, properly designed, constructed, and used
45	<input checked="" type="checkbox"/>		1	Warewashing facilities; installed, maintained, used, test strips
46	<input checked="" type="checkbox"/>		1	Nonfood-contact surfaces clear
<b>Physical Facilities</b>				
47			2	Hot & cold water available, adequate pressure
48			2	Plumbing installed; proper backflow devices
49	<input checked="" type="checkbox"/>		2	Sewage and wastewater properly disposed
50	<input checked="" type="checkbox"/>		2	Toilet facilities; properly constructed, supplied, & cleaned
51	<input checked="" type="checkbox"/>		2	Garbage/refuse properly disposed; facilities maintained
52	<input checked="" type="checkbox"/>		1	Physical facilities installed, maintained, and clean
53	<input checked="" type="checkbox"/>		1	Adequate ventilation and lighting; designated areas use
<b>Documents and Placards</b>				
54			NA	Sanitary Permit, Health Certificates valid and posted

I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.

Person in Charge (Print and Sign) Tae Heng Min  
DEH Inspector (Print and Sign) K. BUENAS

Date: 04/03/2019

Follow-up (Mark one):  YES  NO Follow-up Date 4/13/2019

**Department of Public Health and Social Services  
Division of Environmental Health  
Food Establishment Inspection Report**

ESTABLISHMENT NAME S.H. Enterprises		LOCATION (Address) Lot 4 Blk 2 Tract 259 ET Calvo Mem. Industrial Park, Tamuning
INSPECTION DATE 04 / 03 / 2019	SANITARY PERMIT NO. 180002806	PERMIT HOLDER S.H. Enterprises

**TEMPERATURE OBSERVATIONS**

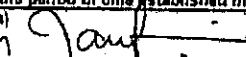
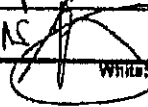

Item/Location	Temperature (° F)	Item/Location	Temperature (° F)
Cooked Rice/Rice Cooker	185.5		
Chicken Adobo/Stove Top	189.0		
Cooked Brown Rice/Stove Top	151.5		
Cooked Mixed Vegetables/Counter Top	165.0		
Cooked Beef/Stove Top	198.0		
Raw Fish Fille/Counter Top (discarded)	78.5		

ITEM NO.	<b>OBSERVATIONS AND CORRECTIVE ACTIONS</b>	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	A regular inspection was conducted today in response to complaint no. 19-059B regarding food not properly sealed and packaged prior to delivery, and hand soap and paper towel dispensers were not provided at the establishment. Person-in-charge (PIC) was able to demonstrate proper sealing and packaging procedures during the inspection. Evidence to verify the complaints regarding the hand soap and the paper towel dispensers were observed.	
	Previous assessment was conducted on 7/11/2018 in response to complaint no. 18-129 regarding delivery vans being dirty with flies and roaches and had other items not involving with the food being delivered, and no temperature conducted for food being delivered. The complaint was not observed during the assessment.	
	The following violations were observed today:	
1	PIC did not demonstrate knowledge of the Guam Food Code (GFC) or perform the necessary duties to ensure compliance with the GFC. PIC shall demonstrate knowledge of the GFC and perform their duties to ensure food safety practices are being followed and implemented in compliance with the GFC.	4/13/19
2	No employee health policy in place. An employee health policy shall be in place, comply with the GFC requirements, and all employees trained on the policy to ensure proper restriction and/or exclusion of sick employees	4/13/19

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) Tae Hong Min 	Date: 04/03/2019
DEH Inspector (Print and Sign) K. DUENAS  / R. ORIONDO 	Date: 04/03/2019

**Department of Public Health and Social Services  
Division of Environmental Health  
Food Establishment Inspection Report**

Page 3 of 6

ESTABLISHMENT NAME S.H. Enterprises		LOCATION (Address) Lot 4 Blk 2 Tract 259 ET Calvo Mem. Industrial Park, Tamuning
INSPECTION DATE 04 / 03 / 2019	SANITARY PERMIT NO. 180002606	PERMIT HOLDER S.H. Enterprises

ITEM NO.	<b>OBSERVATIONS AND CORRECTIVE ACTIONS</b>	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	are understood and implemented.	
8	Handwashing sinks in the men's restroom not provided with signage, soap and paper towel; paper towels not properly stored and protected at the handwashing sinks in the kitchen and the women's restroom.  Adequate handwashing sinks shall be provided and properly supplied with hand soap, clean paper towels/hand-dryer, and signage and be accessible to all employees to encourage food handlers to properly wash their hands regularly.  *COS: PIC provided signage, hand soap, paper towel in the men's restroom, and stored the paper towels in dispensers at the handwashing sinks in the kitchen and the women's restroom.	COS
13	Employee drinks found stored with food for the clients in the upright chiller; warewashing sink was being used for soiled pans and uncooked rice.  Food shall be properly separated and protected to prevent cross-contamination from occurring  *COS: PIC removed employees drinks from upright chiller and placed uncooked rice at the preparation sink.	COS
14	Employee observed washing pans but did not perform sanitizing and air-drying procedures; cutting boards not in-use was observed with deep cut marks and dark stains.  All food-contact surfaces shall be properly washed, rinsed, sanitized, and air-dried to prevent cross-contamination from occurring and shall be clean to sight and touch prior to use.	4/13/19
20	Raw fish fillet did not meet proper cold holding temperature.  COS: PIC discarded the raw fish fillet. (3 pieces)  All Potentially Hazardous Food (PHF)/Time/Temperature Control for Safety (TCS) Food shall meet an internal cold holding temperature of 41F and below to prevent the growth of pathogens or toxin formation.	COS
26	Employee practices and procedures were not in compliance with the establishment's Hazard Analysis and Critical Control Points (HACCP) plan; records and logs were not completed or maintained.  The establishment shall comply with the approved HACCP plans and procedures, and maintain	4/13/19

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) <u>Tae Hong Min</u>	Date: <u>04/03/2019</u>
DEH Inspector (Print and Sign) <u>K. DUENAS</u>	Date: <u>04/03/2019</u>

Department of Public Health and Social Services  
Division of Environmental Health  
**Food Establishment Inspection Report**

Page 4 of 6

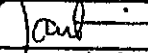
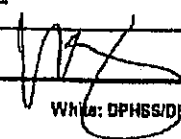
ESTABLISHMENT NAME S.H. Enterprises		LOCATION (Address) Lot 4 Blk 2 Tract 259 ET Calvo Mem. Industrial Park, Tamuning
INSPECTION DATE 04 / 03 / 2019	SANITARY PERMIT NO. 180002606	PERMIT HOLDER S.H. Enterprises

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	records to demonstrate that the establishment is actively practicing and monitoring a system of controls to ensure food safety.	
30	Walk-in chiller unable to maintain proper cold holding temperature, environmental meter reading was 69.6 degrees Fahrenheit (F); non-PHF/TCS food were observed being stored in the walk-in chiller.  Adequate equipment for temperature control shall be maintained in good repair to facilitate proper storage of PHF/TCS food.	5/3/19
33	Thermometer in walk-in chiller was inoperable; food thermometers were not being used during operation.  Thermometers shall be properly calibrated and used to ensure temperatures are actively being monitored and proper temperature are maintained.	5/3/19
35	One live cockroach and frass were observed inside the mechanical warewashing equipment that is not being utilized by the establishment; PIC was not able to provide pest control service receipts during the inspection; no other signs of pest activity were observed.  The presence of pests shall be controlled, and openings shall be sealed to prevent the accessibility of pests and the contamination of food and clean equipment/utensils.	5/3/19
38	Wiping cloths stored on the counter, the food cart, and in empty buckets.  Wiping cloths shall be stored in a properly diluted sanitizing solution after each use to prevent cross-contamination from occurring.	5/3/19
44	Shelves in walk-in chiller were found with rust.  Non-food contact surfaces shall be smooth, easily cleanable, non-absorbent, properly designed and maintained to ensure surfaces can be properly cleaned, sanitized, and cross-contamination is prevented.	5/3/19
45	Chemical test strips and sanitizing solution were not provided and used.  Chemical test strips and approved sanitizers shall be provided and used to ensure proper	5/3/19

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) Ige Hong Min 	Date: 04/03/2019
DEH Inspector (Print and Sign) K. DUENAS  / R. ORIONDO	Date: 04/03/2019

Department of Public Health and Social Services  
Division of Environmental Health  
**Food Establishment Inspection Report**

Page 5 of 6

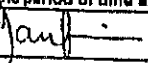
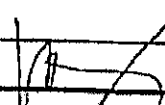

ESTABLISHMENT NAME S.H. Enterprises		LOCATION (Address) Lot 4 Blk 2 Tract 259 ET Calvo Mem. Industrial Park, Tamuning
INSPECTION DATE 04 / 03 / 2019	SANITARY PERMIT NO. 180002608	PERMIT HOLDER S.H. Enterprises

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	sanitizing of food-contact surfaces and equipment.	
46	Inside and outside surfaces of the walk-in chiller with dark stains; surfaces of the stove area observed with grease and food build-up; inside surfaces of several coolers observed with food particles and stains. Non-food contact surfaces shall be cleaned and maintained as often as necessary to prevent cross-contamination from occurring.	5/3/19
49	Grease trap located outside the establishment was observed overflowing with grease and food particles during the inspection; wastewater from the handwashing sink and the preparation sink was observed leaking onto the kitchen floor; PIC did not provide service receipt for the grease trap. Wastewater shall be properly disposed of in an approved plumbing system, and grease traps shall be maintained as often as necessary to prevent sewage back-up or overflow.	5/3/19
50	Women's restroom not provided with a covered trash receptacle and toilet tissue. A toilet room used by females shall be provided with a covered receptacle for sanitary napkins, and a supply of toilet tissue shall be available at each toilet to promote good hygiene practices. *COS: PIC provided the women's restroom with a covered trash receptacle and toilet tissue.	COS
51	Outside garbage refuse was uncovered and overflowing with garbage bags and cardboard boxes; several garbage bags and cardboard boxes were stored directly on the ground. Outside trash receptacles shall be kept covered with light-fitting lids, refuse and recyclables shall be removed from the premises at a frequency that will minimize the development of objectionable odors and other conditions that attract or harbor insects and rodents.	5/3/19
52	Missing ceiling tiles observed in the kitchen hallway and in the dry storage area; stained ceiling tiles observed in the kitchen, the hallway and in the men's restroom; accumulation of food particles and grease were observed under preparation tables, on the kitchen walls and floor; floor drains in the kitchen were not provided with covers; soiled upright chillers,	5/3/19

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) Tae Hong Min 	Date: 04/03/2019
DEH Inspector (Print and Sign) K. DUENAS  R. ORLANDO 	Date: 04/03/2019







GOVERNMENT OF GUAM  
 DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES  
 DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



GEORGE A. LEON GUERRERO  
 DIRECTOR, MAGALACA

J. JIMENA F. TENORIO  
 SUPERVISOR, SIGUNDO MAGALACA

LINDA UNPINGCO DENORCEY, MPH  
 DIRECTOR

LAURENT SF. DUENAS, MPH, BSNI  
 DEPUTY DIRECTOR

Date: 4/3/2019

S.H. Enterprises  
 Name of Establishment

As a result of this inspection your establishment received a:

LETTER OF WARNING

38/C

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. If we do not receive a written re-inspection request from you, we will conduct a follow-up inspection after ten (10) calendar days from the official receipt of this notice to ensure that corrective measures have been taken.

Failure to correct violations may result in the closure of your establishment pursuant to section 21109(h) of 10GCA Chapter 21.

NOTICE OF CLOSURE

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. Unlike an establishment who has received a letter of warning, an establishment shall remain closed unless a written request for re-inspection is made. Under 10 GCA Ch. 21 §21109(h), suspension without prior hearing may be imposed until the violation is corrected. You may also request a hearing to the Division of Environmental Health within five (5) calendar days of the date of this notice. When a hearing is requested following a suspension without prior hearing, it shall be discretionary with the Director as to whether the suspension shall be continued pending the hearing.

We look forward to working closely with you as partners in promoting health and sanitary practices on Guam. If you need further assistance, you can reach us at 735-7321 or (fax) 734-5556. Si Yu'us Ma'ase.

Sincerely,  
  
 LINDA UNPINGCO DENORCEY, MPH  
 Director

Inspected By:   
 K. Duenas, EPHO III, R. Ordoño, EPHO I  
 Name of EPHO

Received By:   
 Tae Hong Min  
 Establishment Representative

123 CHALAN KARETA, MANGILAO GUAM 96913-6304  
 www.dphss.guam.gov • Ph 1 671 735 7102 • Fax 1 671 473 5910

**EXHIBIT "h"**



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 P.H. Guam 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

No. P196E00431

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES, B/L  
 CORRESPONDENCE ETC.

F.O.B.	BY AIR FREIGHT TEL. CONTACT	SHIP VIA	DATE 4/05/2019	JOB ORDER NO. 173019104230	OBJCT 236
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<b>ROUTING</b>	<b>TO:</b> BASIL FOOD INDUSTRIAL SERVICES CORPORATION 482 PALE SAN VITORES ROAD TAMUNING, GU 96910 Telephone: 671 475-8888 Fax: 671 475-0088 Email: ERRONGZHOU@HOTMAIL.COM	<b>VENDOR</b> B0012200	<b>SHIP TO</b>	<b>CONSIGNEE DESTINATION &amp; MARKING</b> DEPT OF PUBLIC HEALTH & SOCIAL SERVICES 123 CHALAN KARETA RTE. 10 MANGILAO, GU 96923-0000  TITLE III-C-2 HOME DELIV MEALS	
	<b>AUTHORITY</b> 3113	** INVITATION NO		** CONTRACT NO.	<b>TIME FOR DELIVERY</b> SEE BELOW

ITEM	ARTICLE OR SERVICE	QTY	UNIT	UNIT PRICE	AMOUNT	ACCOUNT NUMBER	REMARKS
1	PROVISION OF NUTRITION SERVICES FOR THE COMPREHENSIVE MANAGEMENT, OPERATIONS AND MAINTENANCE FOR THE DPHSS ELDERLY NUTRITION HOME-DELIVERED MEALS PROGRAM. SPECIFICATIONS ATTACHED. *SERVICES WILL BE ACQUIRED THROUGH THE PROVISION OF SGCA SUBSECTION 5150 EMERGENCY PROCUREMENT.  PERIOD TO COVER: SUNDAY THROUGH MONDAY EFFECTIVE: APRIL 8 THROUGH APRIL 30, 2019 1,180 CLIENTS X \$7.00 PER MEAL = \$8,260.00 PER DAY X 23 MEAL SERVICE DAYS = \$189,930.00  NOTE: THE GOVERNMENT OF GUAM WILL NOT BE RESPONSIBLE FOR 'UNAUTHORIZED' PURCHASES OR SERVICES. Note: Amounts due this Purchase Order may be off set for monies due the of Guam inclusive of but not limited to taxes, fees, and returned checks other damages, penalties, and Attorney's fees, after failure to pay To be coordinated between the agency and vendor. ALL LATE DELIVERIES AND ACCEPTANCES ARE SUBJECT TO THE LIQUIDATED DAMAGES CLAUSE IN SECTION 6101(9) (a) OF THE GAR.	1	LOT	189980.000	189980.00	0191730053	

<b>SPECIAL INSTRUCTIONS TO VENDOR:</b> B. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 884, AGANA, GUAM 96910. C. PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION. D. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE. E. * THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID. F. * ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.	XXXXXXXXXXXX	<b>A. DO NOT FILL THIS ORDER IF YOUR TOTAL COST EXCEEDS THIS TOTAL</b>
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CONTRACTOR, PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE. SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.	ADVANCE PAYMENT AUTHORIZATION PAYMENT ENCLOSED <input type="checkbox"/>	SIGNATURE: 
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NAME: Claudia S. Acfalle TITLE: Chief Procurement Officer

Control No.

ORIGINAL/VENDOR'S COPY

Digitally Approved on: 4/5/2019



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Maina Drive  
 PHL, Guam 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

**No.** P196E00431

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES & L  
 CORRESPONDENCE ETC.

FOUR	AIR FREIGHT (EL CONTACT) BY VIA	DATE 4/05/2019	JOB ORDER NO 173019104230	OBJC 230
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<b>VENDOR</b>	<b>TO:</b> BASIL FOOD INDUSTRIAL SERVICES CORPORATION 482 PALE SAN VITORES ROAD TAMUNING, GU 96910 Telephone: 671 475-9888 Fax: 671 475-0088 Email: ERHONGZHOU@HOTMAIL.COM	<b>VENDOR</b> B0012200	<b>SHIP TO</b>	<b>CONSIGNEE DESTINATION &amp; MARKING</b> DEPT OF PUBLIC HEALTH & SOCIAL SERVICES 123 CHALAN KARETA RTE. 10 MANGILAO, GU 96923-0000	
				TITLE III-C-2 HOME DELIV MEALS	
AUTHORITY 3113	** INVITATION NO.	** CONTRACT NO.	TIME FOR DELIVERY SEE BELOW	EXPIRING	DISCOUNT TERMS:

QUANTITY	DESCRIPTION OF SERVICES	UNIT	PRICE	TOTAL	REMARKS
	FOC: BREANNA SABLAN/ CHARLENE SAN NICOLAS 735-7415  ** NOTHING FOLLOWS **				
<b>NOTE:</b> THE GOVERNMENT OF GUAM WILL NOT BE RESPONSIBLE FOR 'UNAUTHORIZED' PURCHASES OR SERVICES. Note: Amounts due this Purchase Order may be off set for monies due the Government plus for accordingly of Guam inclusive of but not limited to taxes, fees, and returned checks other damages, penalties, and Attorney's fees, after failure to pay To be coordinated between the agency and vendor ALL LATE DELIVERIES AND ACCEPTANCES ARE SUBJECT TO THE LIQUIDATED DAMAGES CLAUSE IN SECTION 6101(9)(a) OF THE GAR.					

<b>SPECIAL INSTRUCTIONS TO VENDOR:</b> B. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 884, AGANA, GUAM 96910. C. PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION. D. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE. E. * * THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID. F. * ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.	18993.00  <b>↑ TOTAL ↑</b>	<b>A. DO NOT FILL THIS ORDER IF YOUR TOTAL COST EXCEEDS THIS TOTAL.</b> * * * * * * * * * *
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CONTRACTOR PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE. SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.	ADVANCE PAYMENT AUTHORIZATION PAYMENT ENCLOSED <input type="checkbox"/>	SIGNATURE: <i>C. Acalle</i> NAME: Claudia S. Acalle TITLE: Chief Procurement Officer
---	--	---

Control No.

ORIGINAL/VENDOR'S COPY



**PURCHASE ORDER**  
 GENERAL SERVICES AGENCY  
 DEPARTMENT OF ADMINISTRATION  
 GOVERNMENT OF GUAM

148 Route 1  
 Marine Drive  
 P.O. Box 96925

**TRAN CODE**

THIS PURCHASE ORDER NUMBER

**No.** P196E00431

MUST APPEAR ON ALL INVOICES  
 PACKING SLIPS, PACKAGES, B/L  
 CORRESPONDENCE ETC.

FOB	BY AIR FREIGHT TEL. CONTACT SHIP VIA	DATE 4/05/2019	JOB ORDER NO 173019104230	OBJCT 230
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<b>VENDOR</b>	<b>TO:</b> BASIL FOOD INDUSTRIAL SERVICES CORPORATION 482 PALE SAN VITORES ROAD TAMUNING, GU 96910 Telephone: 671 475-8888 Fax: 671 475-0088 Email: ERHONGZHOU@HOTMAIL.COM	<b>VENDOR</b> E0012200	<b>SHIP TO</b>	<b>CONSIGNEE DESTINATION &amp; MARKING</b> DEPT OF PUBLIC HEALTH & SOCIAL SERVICES 123 CHALAN KARETA RTE. 10 MANGILAO, GU 96923-0000	
				TITLE III-C-2 HOME DELIV MEALS	
<b>AUTHORITY</b> 3113	** INVITATION NO.	** CONTRACT NO.	<b>TIME FOR DELIVERY</b> SEE BELOW	<b>EXPIRING</b>	<b>DISCOUNT TERMS:</b>

LINE	DESCRIPTION	QTY	UNIT	PRICE	AMOUNT	EXTENSION NUMBER	REMARKS
<p>THIS ORDER IS SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:</p> <ol style="list-style-type: none"> <li>Acknowledgment copy of this order must be signed and returned advising approximate or definite shipping date.</li> <li>No variation in any of the terms, conditions, deliveries, prices, quantity, quality, or specification on this order, irrespective of the wording of the seller's acceptance, will be effective without buyer's written consent.</li> <li>Packing list must accompany each shipment, showing our order number, description and part/serial number for each item.</li> <li>Shipments must be identified as "PARTIAL" or "COMPLETE".</li> <li>Material is subject to buyer's inspection and approval within a reasonable time after delivery; if specifications are not met, material shall be returned at seller's expense.</li> <li>In connection with any prompt payment discount offered, time will be computed from date of delivery and acceptance at destination, or from the date the correct invoice or voucher is received in the office specified by the Government of Guam, if the latter is later than date of delivery and acceptance. Payment is deemed to be made, for the purpose of earning discount, on the date of the mailing of the check.</li> <li>Overshipments, unless specifically authorized, will not be accepted.</li> <li>In connection with bid awards and contracts, this purchase order shall be governed by the Special Provisions and Bid General Terms and Conditions as specified.</li> </ol>							

<b>SPECIAL INSTRUCTIONS TO VENDOR:</b> B. SEND CERTIFIED ORIGINAL AND THREE (3) COPIES OF INVOICE TO DIVISION OF ACCOUNTS, DEPARTMENT OF ADMINISTRATION, GOVERNMENT OF GUAM, P.O. BOX 388, AGANA, GUAM 96910. C. PAYMENT IN THIRTY (30) DAYS UPON RECEIPT OF MERCHANDISE IN GUAM IN GOOD CONDITION. D. THIS ORDER SUBJECT TO CONDITIONS ON REVERSE SIDE. E. * THIS ORDER IS SUBJECT TO THE SPECIAL PROVISIONS, AND BID GENERAL TERMS AND CONDITIONS SPECIFIED ON THIS BID. F. * ON ALL AIR SHIPMENTS HAVE AIR FREIGHT COMPANY CALL THIS NUMBER UPON ARRIVAL OF GOODS IN GUAM.	18990.00 <b>↑ TOTAL ↑</b>	A. DO NOT FULFILL THIS ORDER IF YOUR TOTAL COST EXCEEDS THIS TOTAL. B. THIS CHECK IS A RECEIPT FOR THE ORDER.
--	------------------------------	--

CONTRACTOR, PLEASE SUPPLY PROMPTLY THE ABOVE ARTICLES OR SERVICES. ALL CORRESPONDENCE PERTAINING TO THIS ORDER INCLUDING INVOICES, SHIPPING DOCUMENTS AND PACKAGES MUST BEAR THE PURCHASE ORDER NUMBER SHOWN ABOVE. SEE REVERSE SIDE FOR PURCHASE ORDER TERMS AND CONDITIONS.	<b>ADVANCE PAYMENT AUTHORIZATION</b> PAYMENT ENCLOSED <input type="checkbox"/>	<b>SIGNATURE:</b>  NAME: Claudia S. Acfalle TITLE: Chief Procurement Officer
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Control No.

ORIGINAL/VENDOR'S COPY

Digitally Approved on: 4/5/2019



ASSIGNED BUYER: GSATEDTC

REQUISITION EMERGENCY

REQUISITION #: Q191730053  
APPROPRIATION: 5101G191730MA104230

TO: PROCUREMENT FACILITIES MGMT. DIVISION ADMINISTRATOR | ENCUMBERED DATE  
4/05/2019

SUBMITTED BY:

San Nicolas, Charlene D. - DPHSS  
AUTHORIZED DEPARTMENT REPRESENTATIVE

SIGNATURE

DATE

DEPARTMENT/DIVISION: SENIOR CITIZEN STATE AGENCY AD REQUEST DATE: 4/05/2019

ITEM NO.	DESCRIPTION OF ITEM	UOM	QTY	UNIT PRICE	AMOUNT
1	PROVISION OF NUTRITION SERVICES FOR THE COMPREHENSIVE MANAGEMENT, OPERATIONS AND MAINTENANCE FOR THE DPHSS ELDERLY NUTRITION HOME-DELIVERED MEALS PROGRAM. SPECIFICATIONS ATTACHED. *SERVICES WILL BE ACQUIRED THROUGH THE PROVISION OF 5GCA SUBSECTION 5150 EMERGENCY PROCUREMENT.  PERIOD TO COVER: SUNDAY THROUGH MONDAY APRIL 8 THROUGH APRIL 30, 2019.  1,180 CLIENTS X \$7.00 PER MEAL =\$8,260.00 PER DAY X 23 MEAL	LOT	1	189980.00	189980.00
TOTAL ----->					189980.00

JUSTIFICATION:  
5GCA 5150 EMERGENCY PROCUREMENT

\*\* PRINT NAME & SIGN

( ) APPROVAL

( ) DISAPPROVAL

RECEIVED BY DATE  
(CERTIFYING OFFICER)

APPROVING AUTHORITY (DIRECTOR)

CONTINUED ON NEXT PAGE

ASSIGNED BUYER: GSATEDTC

REQUISITION EMERGENCY

REQUISITION #: Q191730053  
APPROPRIATION: 5101G191730MA104230

TO: PROCUREMENT FACILITIES MGMT.DIVISION ADMINISTRATOR | ENCUMBERED DATE  
4/05/2019

SUBMITTED BY:  
San Nicolas, Charlene D. - DPSS  
AUTHORIZED DEPARTMENT REPRESENTATIVE | SIGNATURE | DATE  
DEPARTMENT/DIVISION: SENIOR CITIZEN STATE AGENCY AD | REQUEST DATE: 4/05/2019

ITEM NO.	DESCRIPTION OF ITEM	UOM	QTY	UNIT PRICE	AMOUNT
	SERVICE DAYS= \$189,980.00				
	*AUTHORIZED PERSONNEL/ POINT OF CONTACT: BREANNA SABLAN CHARLENE D. SAN NICOLAS TEL. 735-7415/ 735-7421 *NOTHING FOLLOWS				

TOTAL =====> 189980.00

JUSTIFICATION:  
5GCA 5150 EMERGENCY PROCUREMENT

** PRINT NAME & SIGN	( ) APPROVAL	( ) DISAPPROVAL
RECEIVED BY (CERTIFYING OFFICER)	DATE	APPROVING AUTHORITY (DIRECTOR)



**EXHIBIT "i"**

April 5, 2019

Memorandum

To: Claudia S. Acfalle  
Chief Procurement Officer  
General Services Agency

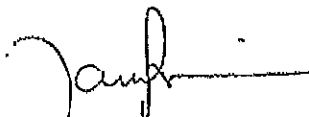
From: Mr. and Ms. Min  
California Mart d/b/a SH Enterprises

Subject: Withdrawal of Purchase Order for Home Delivery of Elderly Food Services under the  
Department of Public Health and Social Services


Dear Ms. Acfalle:

This is to inform you that we have decided to withdraw our current purchase order for home delivery of the elderly food services under the Department of Public Health and Social Services' Division of Senior Citizen's program. The reason for the withdrawal is the inability to provide enough drivers to ensure that the food is provided in a timely manner for the home bound citizens. We erroneously assumed that more drivers would come over from the previous vendor to allow us to continue the services uninterrupted. However, this was not the case, and the fact that we were not able to obtain other drivers in a timely manner, caused us to miss providing food services in a timely manner. As such, as we cannot guarantee timely, we would rather turn back the purchase order in order to allow the seniors to get their food timely.

As such, we will withdraw from the current purchase order and work to provide better quality services when the next round appears. Again, we apologize for the additional work that comes up.



Mr. Tae Hong Min

ACKNOWLEDGEMENT COPY  
RECEIVED BY   
DATE 4/5/19 11:35am

**EXHIBIT "j"**

**S.H. Enterprises, Inc.**

190 Chalan San Antonio Building  
Tamuning, Guam 96913

January 22, 2020

Ms. Lou A. Leon Guerrero  
Honorable Governor of Guam  
C/O Jon Calvo, Deputy Chief of Staff  
and Jesse Garcia, Deputy Director DPW  
Governor's Complex  
Hagatna, Guam 96910

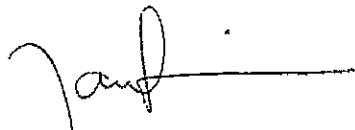
Dear Honorable Governor,

It was a pleasure meeting with your team on the availability of the former Hakubotan building and facility. After understanding the temporary need to setup a space for the Government of Guam's war claims program, it is our deepest honor to donate an unused section of the building for this purpose.

As longtime residents of Guam, we recognize how important this initiative is to our Manamko' and we are pleased to play a small role in this process for our island community.

The nature of this donation includes the temporary utilization of approximately +/- 5,000 square feet of commercial space located on the first floor, utilities, and access to the building's parking lot for the Guam War Claims Center. The space may be available until Saturday, February 8, 2020.

Thank you for your time and leadership.



TAE MIN  
President  
S.H. Enterprises, Inc.