



# BUREAU OF BUDGET & MANAGEMENT RESEARCH

OFFICE OF THE GOVERNOR

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BBMR Circular No: 03-01

OCT 07 2002

## MEMORANDUM

To: All Department and Agencies

From: Director, Bureau of Budget and Management Research

Subject: Contract Renewals and Re-Certification of Funds

The Bureau, in its efforts to facilitate the review and clearance process of all Multi-year Contracts, and other continuing documents requiring the re-certification of funds, has established the following procedure. Effective immediately all departments and agencies shall submit the Certification of Funds Form (Attachment A) for all contractual agreement(s) requiring the certification of funds. Below is an outline of the process:

- A) Prepare a departmental memorandum addressed to BBMR briefly stating the purpose and need for the certification of funds of the contractual agreement(s).
- B) Identify the fund source, contract amount required and the appropriate account number to which the contract agreement(s) are to be charged.
- C) Complete the Certification of Fund Form (BBMR-CFF) (attached) and submit it along with the department's memorandum contract overview to the Bureau.

Be apprised all terms and conditions (with the exception of the certification period) of the agreement will remain in effect. Once the document has obtained the Bureau's clearance, it shall be retrieved by the administering department and routed to the Department of Administration for their action.

  
PAUL D. LEON GUERRERO.

Attachment)

CERTIFICATION OF FUNDS

Contract Title: \_\_\_\_\_

Contractor/Vendor Title:  
Authorize Representative  
Name and Title

Government of Guam  
Authorize Representative  
Name, Title and Department

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certification of Funds Available

Approved:

\_\_\_\_\_  
(Name) Certifying Officer

\_\_\_\_\_  
PAUL D. LEON GUERRERO,  
Director  
Bureau of Budget and  
Management Research

\_\_\_\_\_  
Date:  
Account No.: \_\_\_\_\_  
Document No.: \_\_\_\_\_  
Vendor No.: \_\_\_\_\_  
Amount: \_\_\_\_\_  
Certification Period: \_\_\_\_\_