

### IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12<sup>TH</sup>, SUITE 1A  
DES MOINES, IA 50319  
Fax: (515)281-3701  
www.iowa.gov/ethics

Reset Form

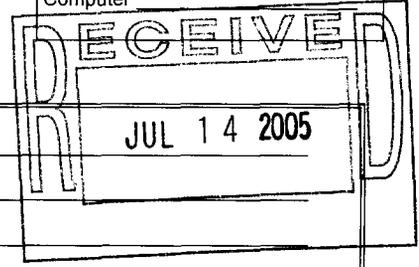
### FORM-GBG

Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

**For office use only**

Indexed \_\_\_\_\_  
Audited \_\_\_\_\_  
Checked \_\_\_\_\_  
Computer \_\_\_\_\_

Iowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.



**DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:**

Iowa Ethics and Campaign Disclosure Board	
Name of Department or Office 510 E. 12th Street, Suite 1A	Des Moines, Iowa 50319
Mailing Address (515) 281-4028	City, State, Zip Code
Area Code & Telephone No.	

**CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:**

Charlie Smithson	
Name SAME AS ABOVE	SAME AS ABOVE
Mailing Address charlie.smithson@iowa.gov	City, State, Zip (515) 281-3489
Email Address	Area Code & Telephone Number

**DONOR OF GIFT, BEQUEST, OR GRANT:**

IowAccess Council	
Name	
Hoover Building, Level B	Des Moines, Iowa 50319
Mailing Address	City, State, Zip Code
(515) 281-5703	
Area Code & Telephone Number	
Email Address (optional)	

July 13, 2005	\$ 15,000.00
Date of Gift, Bequest, or Grant	Amount/Value*
*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	

Provide a description of the gift, bequest, or grant and purpose thereof:

Technology grant for planning phase to create an electronic filing system for Personal Financial Disclosure forms

Criteria to use this form:

Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.

**Statement of Affirmation:**

I, Charlie Smithson affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

W Charles Smithson  
Signature

7-14-05  
Date

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JUL 14 2005

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Area Code & Telephone No. \_\_\_\_\_

#### CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Charlie Smithson

Name  
SAME AS ABOVE SAME AS ABOVE

Mailing Address  
charlie.smithson@iowa.gov City, State, Zip  
(515) 281-3489

Email Address  
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Hoover Building, Level B Des Moines, Iowa 50319

Mailing Address  
(515) 281-5703 City, State, Zip Code

Area Code & Telephone Number \_\_\_\_\_

Email Address (optional) \_\_\_\_\_

July 13, 2005 \$ 104,553.24

Date of Gift, Bequest, or Grant Amount/Value\*

\*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".

Provide a description of the gift, bequest, or grant and purpose thereof:  
Technology grant for implementation of VSR and DR-OTC electronic filing program

Criteria to use this form:  
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#### Statement of Affirmation:

I, Charlie Smithson affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

W. Charles Smithson  
Signature

7-14-05  
Date