Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
NOV 29 2006
FILED

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:

Name of Department or Office: Iowa Juvenile Home
Mailing Address: 701 S. Church St.
City, State, Zip Code: Toledo, IA 52342
Area Code & Telephone No.: 641/484-2560

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Name: Deb Hanus
Mailing Address (if different from above):
City, State, Zip (if different from above):
Email Address: DHanus@dhs.state.ia.us
Area Code & Telephone Number (if different from above):

DONOR OF GIFT, BEQUEST, OR GRANT:

Name: American Legion Auxiliary Dept. of Iowa
Mailing Address: 720 Lyon St.
City, State, Zip Code: Des Moines, IA 50309
Area Code & Telephone Number: 515.282.7981
Email Address (optional): N/A

Date of Gift, Bequest, or Grant: 11/21/06
Amount/Value*: $ 95.66

*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:

Activities for youth

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, Deb Hanus 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.

Deb Hanus
Signature

11/29/06
Date

Revised 06/05

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

Mental Health Institute
Name of Department or Office

1200 E. Washington — Mt. Pleasant, Ia 52641
Mailing Address — City, State, Zip Code

(319) 385-7231
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Nathan Beattie
Name

Mailing Address (if different from above) — City, State, Zip (if different from above)

nathan.beattie@iowa.gov
Email Address — Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Wapello Co VFW Aux #5166
Name

715 N. Pine St. Wapello, Ia. 52653
Mailing Address — City, State, Zip Code

Area Code & Telephone Number

Email Address (optional)

11/15/06 — $ 15.00
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:

Cash for purchase of Thanksgiving dinner turkeys

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, nathan Beattie 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.

Nathan Beattie ATI
Signature

11/22/06
Date

Revised 06/05

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

Mental Health Institute
Name of Department or Office
1700 E. Washington — Mt. Pleasant, Iowa 52641
Mailing Address — City, State, Zip Code
(319) 385-7231
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Nathan Beattie
Name
Mailing Address (if different from above) — City, State, Zip (if different from above)
nathan.beattie@iowa.gov
Email Address — Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Henry Co VFW aux
Name
806 E. Monroe Mt. Pleasant Ia. 52641
Mailing Address — City, State, Zip Code
Area Code & Telephone Number
Email Address (optional)

11/15/06 — $ 25.00
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:

Cash for purchase of Thanksgiving turkeys.

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, Nathan Beattie 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.

Nathan Beattie III — 11/22/06
Signature — Date