Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
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 Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Kenneth Copeland Ministries
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

May 2007 — $ 585.48
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:

Printed materials, CDs, DVDs

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, Larry Brimeyer 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.

Larry Brimeyer
Signature

12-27-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
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FORM-GBG

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

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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 Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Kenneth Copeland Ministries
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

May - July 2007 — $ 1,074.00
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

L Brimeyer
Signature

12-27-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
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Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

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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 Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Anonymous
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

May - July 2007 — $ 205.00
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

L Brimeyer
Signature

12-22-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
www.iowa.gov/ethics

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FORM-GBG

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

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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 Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Kenneth Copeland Ministries
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address s (optional)

June 2007 — $ 1,382.72
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

L Brimeyer
Signature

12-27-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
www.iowa.gov/ethics

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FORM-GBG

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

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

Iowa Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Table to Table
Name

20 East Market Street — Iowa City, IA 52245
Mailing Address — City, State, Zip Code

Area Code & Telephone Number

Email Address (optional)

July 2007 — $ 3,677.00
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:

Unusable perishable donations to Table to Table donated to IMCC Offenders (170 cases fresh oranges)

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, Larry Brimeyer 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.

L Brimeyer
Signature

12-22-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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FORM GBG

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

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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 Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Kenneth Copeland Ministries
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

July — $ 28.95
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

L Brimeyer
Signature

12-22-05
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
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www.iowa.gov/ethics

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FORM GBG

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

Iowa Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Kenneth Copeland Ministries
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

August — $ 1,271.35
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

Signature

12-27-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
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DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

Iowa Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Anonymous
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

September 2007 — $ 165.00
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brinkmeyer 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.

L Brinkmeyer
Signature

12-22-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
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Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

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

Iowa Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Kenneth Copeland Ministries
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

October 2007 — $ 823.40
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

L Brimeyer
Signature

12-27-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
www.iowa.gov/ethics

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

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

Iowa Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Jesse Duplantis Ministres
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

October 2007 — $ 30.00
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

Signature — 12-27-07 **Date**

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
www.iowa.gov/ethics

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

Iowa Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Kenneth Copeland Ministries
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

September 2007 — $ 792.00
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

L. Brimeyer
Signature

12-27-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
www.iowa.gov/ethics

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

Iowa Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Joyce Myers Ministres
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

October 2007 — $ 81.00
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

Signature — **Date**

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
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 Medical & Classification Center
Name of Department or Office

PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

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

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

DONOR OF GIFT, BEQUEST, OR GRANT:

Kenneth Copeland Ministries
Name

Beverly Huffman - IMCC, PO Box A — Oakdale, IA 52319
Mailing Address — City, State, Zip Code

319-626-2391
Area Code & Telephone Number

beverly.huffman@iowa.gov
Email Address (optional)

December — $ 443.62
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:

Printed materials, CDs, DVDs from Offender use in the IMCC Chapel

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, Larry Brimeyer 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.

L Brimeyer
Signature

12-27-07
Date

Revised 06/05

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073
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

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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 Medical & Classification Center
Name of Department or Office

PO Box A
Mailing Address

Oakdale, IA 52319
City, State, Zip Code

319-626-2391
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Lowell Brandt, Warden
Name

Mailing Address (if different from above)

City, State, Zip (if different from above)

lbrandt@iowa.gov
Email Address

Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Table to Table
Name

20 East Market Street
Mailing Address

Iowa City, IA 52245
City, State, Zip Code

Area Code & Telephone Number

Email Addres s (optional)

December 2007
Date of Gift, Bequest, or Grant

$ 2,761.20
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:

Unusable perishable donations to Table to Table donated to IMCC Offenders (7080 servings of yogurt)

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, Larry Brimeyer 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.

Signature

12-27-07
Date

Iowa Medical & Classification Center

PO Box A, Hwy 965, Oakdale, IA 52319

Date	Name	Address	Reason	Amount	
May	Kenneth Copeland Ministries	Bev-Huffman, CC	Chapel	$ 585.48	Printed materials, CDs, DVDs
May-July	Anonymous	Reported by Beverly Huffman, IMCC Corr Counse	Chapel	$ 205.00	Printed materials, CDs, DVDs
May-July	Kenneth Copeland Ministries	Bev-Huffman, CC	Chapel	$ 1,074.00	Printed materials, CDs, DVDs
June	Kenneth Copeland Ministries	Bev-Huffman, CC	Chapel	$ 1,382.72	Printed materials, CDs, DVDs
July	Kenneth Copeland Ministries	Bev-Huffman, CC	Chapel	$ 28.95	Printed materials, CDs, DVDs
July	Table to Table	20 East Market Street, Iowa City, Iowa 52245	Dietary-Unusable perishable	$ 3,677.00	170 cases fresh oranges
Aug	Kenneth Copeland Ministries	Bev-Huffman, CC	Chapel	$ 1,271.35	Printed materials, CDs, DVDs
Sep	Kenneth Copeland Ministries	Bev-Huffman, CC	Chapel	$ 792.00	Printed materials, CDs, DVDs
Sep	Anonymous	Reported by Beverly Huffman, IMCC Corr Counse	Chapel	$ 165.00	Printed materials, CDs, DVDs
Oct	Jesse Duplantis Ministries	Bev-Huffman, CC	Chapel	$ 30.00	Printed materials, CDs, DVDs
Oct	Joyce Myers Ministries	Bev-Huffman, CC	Chapel	$ 81.00	Printed materials, CDs, DVDs
Oct	Kenneth Copeland Ministries	Bev-Huffman, CC	Chapel	$ 823.40	Printed materials, CDs, DVDs
Dec	Table to Table	20 East Market Street, Iowa City, IA	Dietary-Unusable perishable	$ 2,761.20	7080 servings of yogurt for offender consumption
Dec	Kenneth Copeland Ministries	Bev-Huffman, CC	Chapel	$ 443.62	Printed materials, CDs, DVDs
			Total Amount :	$ 13,320.72	

IA ETHICS AND
2009 JUN -7 AM 11:17

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

Reset Form

FORM-GBG

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

2008 JAN 7 PM 12:00

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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:

Fort Dodge Correctional Facility
Name of Department or Office

1550 L Street — Fort Dodge, Iowa 50501
Mailing Address — City, State, Zip Code

515-574-4700
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Cornell R. Smith
Name

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

Cornell.Smith@iowa.gov — 515-574-4711
Email Address — Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Church of the Damascus Road
Name

239 North 11th Street, P.O. Box 834 — Fort Dodge, Iowa 50501
Mailing Address — City, State, Zip Code

515-955-3579
Area Code & Telephone Number

Email Address (optional)

December 28, 2007 — $ 90.96
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:

Forty-eight contemporary English Version Bibles for offender's use.

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, Dan Craig 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.

Dan Craig
Signature

1-6-08
Date

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

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
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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:

Fort Dodge Correctional Facility
Name of Department or Office

1550 L Street — Fort Dodge, Iowa 50501
Mailing Address — City, State, Zip Code

515-574-4700
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Cornell R. Smith
Name

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

Cornell.Smith@iowa.gov — 515-574-4711
Email Address — Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Church of the Damascus Road
Name

239 North 11th Street, P.O. Box 834 — Fort Dodge, Iowa 50501
Mailing Address — City, State, Zip Code

515-955-3579
Area Code & Telephone Number

Email Address (optional)

December 20, 2007 — $ 716.00
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:

Eighty daily text books for 2008 for offenders use.

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, Dan Craig 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.

Signature

1-6-08
Date

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

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

2008 JAN -7 PM 12:00 IA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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:

Fort Dodge Correctional Facility
Name of Department or Office

1550 L Street — Fort Dodge, Iowa 50501
Mailing Address — City, State, Zip Code

515-574-4700
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Cornell R. Smith
Name

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

Cornell.Smith@iowa.gov — 515-574-4711
Email Address — Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Church of the Damascus Road
Name

239 North 11th Street, P.O. Box 834 — Fort Dodge, Iowa 50501
Mailing Address — City, State, Zip Code

515-955-3579
Area Code & Telephone Number

Email Address (optional)

December 28, 2007 — $ 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:

Fifty Church of the Damascus Road calendars for offenders use.

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, Dan Craig 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.

Signature

1-6-08
Date

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

Reset Form

FORM-GBG

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

2008 JAN 7 PM 12:00 IOWA ETHICS AND CAMPAIGN DISCLOSURE BD

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:

Fort Dodge Correctional Facility
Name of Department or Office

1550 L Street — Fort Dodge, Iowa 50501
Mailing Address — City, State, Zip Code

515-574-4700
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Cornell R. Smith
Name

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

Cornell.Smith@iowa.gov — 515-574-4711
Email Address — Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Church of the Damascus Road
Name

239 North 11th Street, P.O. Box 834 — Fort Dodge, Iowa 50501
Mailing Address — City, State, Zip Code

515-955-3579
Area Code & Telephone Number

Email Address (optional)

December 28, 2007 — $ 5.76
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:

Thirty padded shipping envelopes and 32 cassette tapes in poly clamshell cases to be used by offenders in the class "Story Tellers Ministry".

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, Dan Craig 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.

Dan Craig
Signature

1-6-08
Date

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

Reset Form

FORM-GBG

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

IA ETHICS AND CAMPAIGN DISCLOSURE BOARD 2008 JAN 7 PM 12:00

For office use only

Indexed _____
Audited _____
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Computer _____

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

Fort Dodge Correctional Facility
Name of Department or Office

1550 L Street
Mailing Address

Fort Dodge, Iowa 50501
City, State, Zip Code

515-574-4700
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Cornell R. Smith
Name

Same
Mailing Address (if different from above)

Same
City, State, Zip (if different from above)

Cornell.Smith@iowa.gov
Email Address

515-574-4711
Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Church of the Damascus Road
Name

239 North 11th Street, P.O. Box 834
Mailing Address

Fort Dodge, Iowa 50501
City, State, Zip Code

515-955-3579
Area Code & Telephone Number

Email Address (optional)

December 28, 2007
Date of Gift, Bequest, or Grant

$ 40.00
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:

Eighty copies of the "Inside Journal, Final Edition" for use by offenders at FDCF.

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, Dan Craig 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.

Signature

1-6-08
Date

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

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FORM-GBG

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

IA ETHICS AND
2008 JAN -4 AM 8:07

For office use only

Indexed _____
Audited _____
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Computer _____

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

Fort Dodge Correctional Facility
Name of Department or Office

1550 L Street
Mailing Address

Fort Dodge, Iowa 50501
City, State, Zip Code

515-574-4700
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Cornell R. Smith
Name

Same
Mailing Address (if different from above)

Same
City, State, Zip (if different from above)

Cornell.Smith@iowa.gov
Email Address

515-574-4711
Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Fort Dodge Public Library
Name

424 Central Avenue
Mailing Address

Fort Dodge, Iowa
City, State, Zip Code

Area Code & Telephone Number

Email Address (optional)

December 19, 2007
Date of Gift, Bequest, or Grant

$ 120.00
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:

Six Volumes College Blue Books for use by offender's in the FDCF Library.

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, Dan Craig 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.

Signature

1-4-08
Date