

B

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 _____

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:

Mt. Pleasant Correctional Facility
 Name of Department or Office
 1200 E. Washington St., Mt. Pleasant, IA 52641
 Mailing Address City, State, Zip Code
 319-385-9511
 Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Dr. James A. Carter, Superintendent
 Name same City, State, Zip (if different from above) same
 Mailing Address (if different from above) City, State, Zip (if different from above)
 Carter.James@iowa.gov same
 Email Address Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Name _____
 Mailing Address City, State, Zip Code _____
 Area Code & Telephone Number _____
 Email Address (optional) _____

January 2007 \$ **85.00**
 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:
Gifts are to be used by offenders.

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

3-6-07
 Date

Mt. Pleasant Correctional Facility

Jan-07

Date	Name	Address	Reason	Amount
1/23/2007	Cummins Central Power	625 33rd Ave SW, Cedar Rapids, IA 52404	Calendars	\$25.00
1/26/2007	Christi Corporon	P.O.Box 853, Mt. Pleasant, IA 52641	Books	\$ 60.00

Total Amount : \$ 85.00