

Revised 06/05

**IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**

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



**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 Department of Agriculture and Land Stewardship	
Name of Department or Office 502 East 9th	Des Moines, IA 50319
Mailing Address 515-281-8611	City, State, Zip Code
Area Code & Telephone No.	

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

Erinn Sprouse	
Name Same	
Mailing Address (if different from above) Erinn.sprouse@iowaagriculture.gov	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)

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

USDA	
Name	
1244 Speer Blvd, Ste 903	Denver, CO 80204
Mailing Address	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

06/19/2008	\$ 35,631.00
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:

WIC Farmers Market Nutrition Program additional funding

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, Erinn Sprouse 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.

Erinn A. Sprouse  
Signature

6-20-08  
Date