

IA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
510 EAST 12TH, 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:

Insurance Division, Department of Commerce
Name of Department or Office
330 Maple Street Des Moines, IA 50319
Mailing Address City, State, Zip Code
515-281-5705
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Craig Goettsch
Name
Mailing Address (if different from above) City, State, Zip (if different from above)
craig.goettsch@iid.state.ia.us
Email Address Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Centers for Medicare Services
Name
Mail Stop: C2-21-15 7500 Security Blvd., Baltimore, MD 21244
Mailing Address City, State, Zip Code
410-786-3076
Area Code & Telephone Number
Email Address (optional)

March 28, 2008 \$ 571,992.00
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:
Federal grant to operate the Senior Health Insurance Information Program within the Insurance Division.

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, Craig A. Goettsch 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.

Craig A. Goettsch
Signature

April 16, 2008
Date