

Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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



Iowa Code section 8.7 requires all gifts and bequests 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 to be filed within 20 days of receipt of the gift or bequest.

FORM-GB	
Gift or Bequest information received by a department or accepted by the Governor on behalf of the state	
For office use only	
Indexed	_____
Audited	_____
Checked	_____
Computer	_____

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Iowa Department of Public Defense - Military Division	
Name of Department or Office 7105 NW 70th Ave.	Johnston, Iowa 50131
Mailing Address 515-252-4347	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Steven K. Lorenz	
Name 7105 NW 70th Ave, Bldg 3535	Johnston, Iowa 50131
Mailing Address (if different from above) Steven.Lorenz@iowa.gov	City, State, Zip (if different from above) 515-252-4347
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Abby L. Cline	
Name	
1191 Old Stage Rd	Decorah IA 52101
Mailing Address	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

February 13, 2013	\$ 300.00
Date of Gift or Request	Amount/Value
*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00"	

2013 MAR 12 AM 5:25
IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

Provide a description of the gift or bequest and purpose thereof: Cash gift for support of the Iowa National Guard Family Assistance Program
Criteria to use this form: Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Steven K. Lorenz affirm that the gift or bequest 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.

Steven K Lorenz
Signature

March 11, 2013

Date

Revised 06/08

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Iowa Department of Public Defense - Military Division	
Name of Department or Office	Johnston, Iowa 50131
7105 NW 70th Ave.	
Mailing Address	City, State, Zip Code
812-252-4347	
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Steven K. Lorenz	
Name	Johnston, Iowa 50131
7105 NW 70th Ave, Bldg 3925	
Mailing Address (if different from above)	City, State, Zip (if different from above)
Steven.Lorenz@iowa.gov	515-252-4347
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Tenth Souls M.C.	
Name	
Mailing Address	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

February 23, 2013	\$ 1,000.00
Date of Gift or Bequest	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 or bequest and purpose thereof:

Cash gift for support of the Iowa National Guard Family Assistance Program

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Steven K. Lorenz affirm that the gift or bequest 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.

Steven K Lorenz
Signature

March 11, 2013
Date

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Iowa Department of Public Defense - Military Division	
Name of Department or Office 7105 NW 70th Ave.	Johnston, Iowa 50131
Mailing Address 515-232-4347	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Steven K. Lorenz	
Name 7105 NW 70th Ave, Bldg 3335	Johnston, Iowa 50131
Mailing Address (if different from above) Steven.Lorenz@iowa.gov	City, State, Zip (if different from above) 515-232-4347
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Shirley MacDonald	
Name	
4024 E Ovid Ave	Des Moines, IA 50317
Mailing Address	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

March 3, 2013	\$ 50.00
Date of Gift or Bequest	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 or bequest and purpose thereof:

Cash gift for support of the Iowa National Guard Family Assistance Program

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Steven K. Lorenz affirm that the gift or bequest 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.

Steven K Lorenz
Signature

March 11, 2013
Date

2013 MAR 12 AM 6:35
IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

Revised 06/08

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FORM-GB

Gift or Bequest 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 6.7 requires all gifts and bequests 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 to be filed within 20 days of receipt of the gift or bequest.

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Iowa Department of Public Defense - Military Division	
Name of Department or Office 7105 NW 70th Ave.	Johannston, Iowa 50131
Mailing Address 515-252-4347	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Steven K. Lorenz	
Name 7105 NW 70th Ave, Bldg 3535	Johannston, Iowa 50131
Mailing Address (if different from above) Steven.Lorenz@iowa.gov	City, State, Zip (if different from above) 515-252-4347
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Lori MacDonald	
Name 4024 E Ovid Ave	Des Moines, IA 50317
Mailing Address	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

March 2, 2013	\$ 100.00
Date of Gift or Bequest	Amount/Value
*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00"	

2013 MAR 11 AM 6:35
IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

Provide a description of the gift or bequest and purpose thereof:
Cash gift for support of the Iowa National Guard Family Assistance Program

Criteria to use this form:
Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Steven K. Lorenz affirm that the gift or bequest 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.

Steven K Lorenz
Signature

March 11, 2013
Date

Account: **PAYMENT** PLEASE POST THIS PAYMENT FOR OUR MUTUAL CUSTOMER **\$300.00**

ABBY L CLINE
181 OLD STAGE RD
DES MOINES, IA 50317-7948
MEMO: Funds Repayment

Please Direct Any Questions
To: (800) 778-6787
Online Bill Payment Processing Center

7428/3140
0000995170
February 13, 2013
USAA FEDERAL SAVINGS BANK

Pay **THREE HUNDRED AND 00/100** DOLLARS **\$ *****300.00**

To The Order Of
59436 1AT 0304 3-D 500
>59436 23223355 003 080005 00001/00001
IOWA NG EMER ASSISTANCE FUNDS
7105 NW 70TH AVE RM 186
JOHNSTON, IA 50131-1824

Void After 180 DAYS
Signature On File
This check has been authorized by your depositor



4518

DATE March 2, 2013

PAY TO THE ORDER OF Star National Guard Family Emergency Feeds \$ 100.00
One hundred dollars and 00/100

usbank. All of US serving you

Lori L. Macdonald

MEMO

SHIRLEY MACDONALD 33-54/700 4782
PH. 515-266-3993
4024 E OVID AVE
DES MOINES, IA 50317-5526

DATE 3-2-13

PAY TO THE ORDER OF Star National Guard Family Emergency Feeds \$ 50.00
Fifty dollars and 00/100 DOLLARS

usbank. All of US serving you

MEMO Shirley Mac Donald

TENTH SOULS M. C.

33-24/02
700

1282

DATE 2-23-13

PAY TO THE ORDER OF Star Veterans + Family Services Fund \$ 1,000.00
One thousand dollars and 00/100 Dollars

Well Fargo Bank N.A.
Cashier Field, Webster Mo.
wellfargo.com

MEMO

Donation

LORI L. MACDONALD
4024 E OVID AVE
DES MOINES, IA 50317-5526