

Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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



FORM-GB
IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
Gift or Bequest Information received by a department or accepted by the Governor on behalf of the state
2013 APR 22 AM 8:58
For office use only
Indexed _____
Audited _____
Checked _____
Computer _____

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.

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Public Safety
Name of Department or Office
215 E. 7th Street
Des Moines, IA 50319
Mailing Address
City, State, Zip Code
515-225-6182
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jeanie Flattery
Name
Mailing Address (if different from above)
flattery@dps.state.ia.us
City, State, Zip (if different from above)
Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Poweshiek County Sheriff Office Association - Michael Smith
Name
PO Box 297
Montezuma, IA 50171
Mailing Address
City, State, Zip Code
563-623-5679
Area Code & Telephone Number
Email Address (optional)

April 3, 2013	\$200.00
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 donation to be used towards enhancing the Peace Officer Memorial with flagpole and lighting.

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, Jeanie Flattery 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.

Jeanie Flattery
Signature

April 22, 2013
Date

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Public Safety	
Name of Department or Office 215 E. 7th Street	Des Moines, IA 50319
Mailing Address 515-725-6182	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jennie Flattery	
Name	
Mailing Address (if different from above) jflattery@dps.state.ia.us	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Buena Vista County Deputies Association - Sgt Rob Danielson	
Name	
PO Box 276	Storm Lake, IA 50588
Mailing Address 712-749-2530	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

April 3, 2013	\$300.00
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 donation to be used towards enhancing the Peace Officer Memorial with flagpole and lighting.

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, Jennie Flattery 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.

Jennie Flattery
Signature

April 22, 2013
Date

Revised 08/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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DES MOINES, IA 50319
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Gift or Bequest 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 OR BEQUEST:

Public Safety	
Name of Department or Office 215 B. 7th Street	Des Moines, IA 50319
Mailing Address 515-723-6162	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jenae Flattery	
Name	
Mailing Address (if different from above) jflattery@ops.state.ia.us	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Iowa State Sheriff's and Deputies Association	
Name	
PO Box 526	Atlantic, IA 50022-0526
Mailing Address	City, State, Zip Code
712-243-6205	
Area Code & Telephone Number	
Email Address (optional)	

April 3, 2013	\$ 1,500.00
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 donation to be used towards enhancing the Peace Officer Memorial with flagpole and lighting.

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, Jenae Flattery 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.

Jenae Flattery
Signature

April 22, 2013
Date

Revised 06/08

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DES MOINES, IA 50319
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Gift or Bequest 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 OR BEQUEST:

Public Safety	
Name of Department or Office 215 E. 7th Street	Des Moines, IA 50319
Mailing Address 515-725-6182	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jeanie Flattery	
Name	
Mailing Address (if different from above) flattery@dps.state.ia.us	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Scott County Sheriff's Office Deputies Association - Det. Tim Ellis	
Name	
400 W 4th Street	Davenport, IA 52801
Mailing Address 563-326-8286	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

April 3, 2013	\$250.00
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 donation to be used towards enhancing the Peace Officer Memorial with flagpole and lighting.

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, Jeanie Flattery 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.

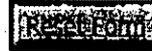
Jeanie Flattery
Signature

April 22, 2013
Date

Revised 08/08

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510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
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Gift or Request 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 OR REQUEST:

Public Safety	
Name of Department or Office 215 B. 7th Street	Des Moines, IA 50319
Mailing Address 515-723-6182	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jeanie Flattery	
Name	
Mailing Address (if different from above) flattery@dps.state.ia.us	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR REQUEST:

Poweshiek County Sheriff Office Association - Michael Smith	
Name	
PO Box 297	Montezuma, IA 50171
Mailing Address 563-623-5679	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

April 3, 2013	\$200.00
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".	

Provide a description of the gift or bequest and purpose thereof.

Cash donation to be used towards enhancing the Peace Officer Memorial with flagpole and lighting.

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, Jeanie Flattery 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.

Jeanie Flattery
Signature

April 22, 2013
Date

Revised 08/08

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Public Safety	
Name of Department or Office 215 E. 7th Street	Des Moines, IA 50319
Mailing Address 515-725-6182	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jeanie Flattery	
Name	
Mailing Address (if different from above) flattery@dps.state.ia.us	City, State, Zip (if different from above)
Email Address	
Area Code & Telephone Number (if different from above)	

DONOR OF GIFT OR BEQUEST:

Buena Vista County Deputies Association - Sgt Rob Danielson	
Name	
PO Box 276	Storm Lake, IA 50588
Mailing Address	City, State, Zip Code
712-749-2530	
Area Code & Telephone Number	
Email Address (optional)	

April 3, 2013	\$ 300.00
Date of Gift or Bequest	Amount/Value*
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Provide a description of the gift or bequest and purpose thereof:

Cash donation to be used towards enhancing the Peace Officer Memorial with flagpole and lighting.

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Statement of Affirmation:

I, Jeanie Flattery 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.

Jeanie Flattery
Signature

April 22, 2013
Date

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Public Safety	
Name of Department or Office 215 E. 7th Street	Des Moines, IA 50319
Mailing Address 515-725-4182	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jeanie Flattery	
Name	
Mailing Address (if different from above) flattery@dps.state.ia.us	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Iowa State Sheriff's and Deputies Association	
Name	
PO Box 526	Atlantic, IA 50022-0526
Mailing Address 712-243-6205	City, State, Zip Code
Area Code & Telephone Number	
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April 3, 2013	\$ 1,500.00
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Jeanie Flattery
Signature

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Date

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Public Safety	
Name of Department or Office 215 E. 7th Street	Des Moines, IA 50319
Mailing Address 512-725-0112	City, State, Zip Code
Area Code & Telephone No.	

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Jeanie Flattery	
Name	
Mailing Address (if different from above) flattery@dps.state.ia.us	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Scott County Sheriff's Office Deputies Association - Det. Tim Ellis	
Name	
400 W 4th Street	Davenport, IA 52801
Mailing Address	City, State, Zip Code
563-326-8286	
Area Code & Telephone Number	
Email Address (optional)	

April 3, 2013	\$250.00
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Jeanie Flattery
Signature

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