

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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

Reset Form

| | |
|---|-------|
| 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 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:

| | |
|------------------------------|-----------------------|
| Anamosa State Penitentiary | |
| Name of Department or Office | |
| 406 N High St | Anamosa, IA 52205 |
| Mailing Address | City, State, Zip Code |
| 319-462-3504 | |
| Area Code & Telephone No. | |

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IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

| | |
|---|--|
| Mary Rose Coleman | |
| Name | |
| Mailing Address (if different from above) | City, State, Zip (if different from above) |
| maryrose.coleman@iowa.gov | 319-462-3504 X2221 |
| Email Address | Area Code & Telephone Number (if different from above) |

DONOR OF GIFT OR BEQUEST:

| | |
|---------------------------------|-----------------------|
| Ottumwa St Paul Lutheran Church | |
| Name | |
| 1424 N Court St | Ottumwa, IA 52501 |
| Mailing Address | City, State, Zip Code |
| Area Code & Telephone Number | |
| Email Address (optional) | |

| | |
|--|---------------|
| 4/22/15 | \$150.00 |
| 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:

For Chapel: 24 new paperback Life Application Bibles, New International Version (NIV) for distribution at the discretion of the Chaplain.

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, Sheryl Dahm 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.

Sheryl Dahm
Signature

Date