

Revised 06/08

**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-GB**

Gift or Request 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 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:**

**IA Department of Human Rights - Office of Status of Women**

Name of Department or Office  
 Lucas State Office Building - 321 E 12th Street  
 Des Moines, IA 50319

Mailing Address  
 515-281-4470  
 City, State, Zip Code

Area Code & Telephone No

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

**Kristen Corey**  
 Name

Mailing Address (if different from above)  
 kristen.corey@iowa.gov  
 City, State, Zip (if different from above)

Email Address  
 Area Code & Telephone Number (if different from above)

2016 JAN - 7 AM 8:45

IOWA ETHICS AND CAMPAIGN DISCLOSURE

**DONOR OF GIFT OR BEQUEST:**

**Dr. Christine H. B. Grant**  
 Name

1748 Red Oak Dr  
 Cornville IA 52241-3016  
 Mailing Address  
 319-351-9652  
 City, State, Zip Code

Area Code & Telephone Number

Email Address (optional)

**December 23, 2015**      **\$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".

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

**For general use by the Office of the Status of Women**

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, Kristen Corey 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.

Kristen Corey  
 Signature

January 5, 2016  
 Date