

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 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:**

<b>STATE TRAINING SCHOOL</b>	
Name of Department or Office 3211 EDGINGTON AVENUE	ELDORA, IA 50627
Mailing Address 641-858-5402	City, State, Zip Code
Area Code & Telephone No.	

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

<b>KRISTIN HAGEDON</b>	
Name same	
Mailing Address (if different from above) khagedo@dhs.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:**

<b>Paul Ward 149 American Legion Aux, c/o Melinda Bennett</b>	
Name	
Mailing Address 105 S. Main	Gilman, IA 50106
City, State, Zip Code	
Area Code & Telephone Number	
Email Address (optional)	

<b>4/27/15</b>	<b>\$25.00</b>
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 max "\$0.00".	

Provide a description of the gift or bequest and purpose thereof:  
 monetary donation to the student Religious Activities account at STS

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, Kristin Hagedon 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.

*Kristin Hagedon*

Signature

April 28, 2015

Date