

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:

Iowa Department of Education, Division of Vocational Rehabilitation Services

Name of Department or Office
 510 E. 12th Street Des Moines, Iowa 50319
 Mailing Address City, State, Zip Code
 (515) 281-5911
 Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Kelley Rice
 Name
 Same
 Mailing Address (if different from above) City, State, Zip (if different from above)
 kelley.rice@iowa.gov (515) 281-4146
 Email Address Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Ralph Smith
 Name
 1710 S. Coolidge Mason City, IA 50401
 Mailing Address City, State, Zip Code
 (641) 423-3174
 Area Code & Telephone Number
 Email Address (optional)

March 19 & 20, 2015 \$716.84
 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:

Mr. Smith passed away December 23, 2014. His will left a \$716.84 bequest to Iowa Vocational Rehabilitation Services to be used for future needs not met by other funding sources.

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, Kelley Rice 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.

Kelley Rice
 Signature

December 29, 2015
 Date