

**IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**

**514 EAST LOCUST, SUITE 104  
DES MOINES, IA 50309-1912  
fax (515) 281-3701  
[www.iowa.gov/ethics](http://www.iowa.gov/ethics)**

**EXECUTIVE BRANCH RECEPTION REPORT**

This form must be filed with the Board within five business days following the date of the reception. This applies only to receptions held during the regular session when every member of the general assembly is invited. See Iowa Code section 68B.22(4)"r" and rule 351-8.10.

The form may be photocopied.



**PART A SPONSOR IDENTIFICATION**

Iowa Telecommunications Association  
Sponsor's Name  
2987 100th Street  
Mailing Address  
Urbandale, Iowa 50322  
City/State/ZIP  
515-867-2091  
Area Code/Phone Number

**PART B RECEPTION INFORMATION**

1/28/04      State Capitol, Des Moines, Iowa 50309  
Date              Location of reception

Please provide the total amount expended including in-kind expenditures on food, beverage, and entertainment for the reception.

**TOTAL COST of reception (includes in-kind expenditures) \$** \_\_\_\_\_  
Food                              \$ 3075.00 (both food and beverage)  
Beverage                         \$ \_\_\_\_\_  
Entertainment                 \$ n/a

[Handwritten Signature]  
Signature of Sponsor  
Director of Gov't Relations  
Iowa Telecommunications Assoc.

1/30/04  
Date Signed