FEB 2 8 2005

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
510 EAST 12th, STE 1A
DES MOINES, IA 50319
fax (515) 281-3701
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.

Reset Form

PART A **SPONSOR IDENTIFICATION**

Iowa Beverage Association
Sponsor's Name

4201 Westown Parkway, Suite 250
Mailing Address

West Des Moines, Iowa 50266
City/State/ZIP

(515) 283-1801
Area Code/Phone Number

PART B **RECEPTION INFORMATION**

2-16-05 — Date

Embassy Suites, 101 E. Locust St., Des Moines, IA 50309 — 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) $ 4,013.70

Food $ 2,218.06

Beverage $ 1,795.64

Entertainment $

Craig Schroeder
Signature of Sponsor

2/18/05
Date Signed

Rev. 12/03