



IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
 514 EAST LOCUST, SUITE 104
 DES MOINES, IA 50309-1912
 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

In The Farmington Dedan Assoc
 Sponsor's Name

3208 SW 34th st
 Mailing Address

Des Moines IA 50321
 City/State/ZIP

515 287 4751 Karen Schneider Lobbyist
 Area Code/Phone Number

PART B RECEPTION INFORMATION

Feb 3-05 State Capital
 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 \$ _____
 Beverage \$ _____
 Entertainment \$ total 286.65

Karen Schneider
 Signature of Sponsor

Feb 7-05
 Date Signed