

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12th, SUITE 1A

DES MOINES, IA 50319

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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

Sponsor's Name Iowa Natural Heritage Foundation

Mailing Address 505 5th Avenue, Suite 444

City/State/ZIP Des Moines, IA 50309-7321

Area Code/Phone Number 515/288-1846

APR 1 2005

PART B RECEPTION INFORMATION

Date 3/29/05 Location of reception Iowa State Capital Legislative Dining Room

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

Table with 2 columns: Item, Amount. Rows: TOTAL COST of reception (includes in-kind expenditures) \$ 165.23, Food \$ 33.60, Beverage \$ 131.63, Entertainment \$ 0.00

Signature of Sponsor July Frazier, Director of Administration

Date Signed April 1, 2005