FEB 25 2005

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
510 EAST 12th, SUITE 1A
DES MOINES, IA 50319
fax (515) 281-3701
www.iowa.gov/ethics

Faxed 2-25-05

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 Public Transit Association
Sponsor's Name

1001 Office Park Rd. Ste #105
Mailing Address

West Des Moines IA 50265
City/State/ZIP

515-440-6057
Area Code/Phone Number

PART B **RECEPTION INFORMATION**

2-23-05 Capitol Cafeteria
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 $ 1,288.00

Beverage $_____

Entertainment $_____

Beverly Hanes
Signature of Sponsor

2-25-05
Date Signed