IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

JUL T & ZUU

Fax: (515)281-3701 www.iowa.gov/ethics

lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of loware received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

FORM-GBG

Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

	For office use only	
Indexed		
Audited _		
Checked		
Compute	er	

DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

Iowa Law Enforcement Acade	mq		
Name of Department or Office Camp Dodge Johnston IA Sol 31			
Mailing Address City, State, Zip Code			
Area Code & Telephone No.			
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:			
E.A. "tenny" Westfall Director			
Name Box 130 Camp Dodge, Johnston JA 50131			
Mailing Address Penny. 10 lest fall @ ilea. State.ia.us City, State, Zip 515-242-5214			
Email Address Area Code & Telephone Number			
DONOR OF GIFT, BEQUEST, OR GRANT:			
204 th Basic Academy Class			
Name			
Box 130 Camp Dodg Tohnston 50131			
Mailing Address City, State, Zip Code	7-1-05 \$300		
515-292-5357 Area Code & Telephone Number	Date of Gift, Bequest, or Grant Amount/Value*		
	*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".		
Email Address (optional)			
Provide a description of the gift, bequest, or grant and purpose thereof:			
The Academy Son 204 the Basic Academy			
Money given to Acade my from 204th Basic Acade my Trainine Class to purchase defensive tactics equipment.			
	0		
Criteria to use this form:			
Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.			
Statement of Affirmation:			
CA. 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
I, FA Teum (DES Trail) affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.			
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Chi. Tenny also del	7-13-05		
Signature	Date		
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