

Revised 06/05

IA ETHICS AND CAMPAIGN DISCLOSURE BOARD

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12<sup>TH</sup>, SUITE 1A  
DES MOINES, IA 50319  
Fax: (515)281-4073  
www.iowa.gov/ethics

2008 APR 11 AM 9:34

**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 \_\_\_\_\_

Computer \_\_\_\_\_

Iowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa 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.

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

Iowa Department of Agriculture and Land Stewardship

Name of Department or Office  
502 East 9th Des Moines, IA 50319

Mailing Address  
515-281-8611 City, State, Zip Code

Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Erinn Sprouse

Name  
Same

Mailing Address (if different from above)  
Erinn.sprouse@IDALS.state.ia.us City, State, Zip (if different from above)  
515-281-8611

Email Address  
Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

USDA, FSIS

Name  
1400 Independence Ave.SW Washington, DC 20250

Mailing Address  
202-418-8909 City, State, Zip Code

Area Code & Telephone Number  
Vicki.Cundiff@fsis.usda.gov

Email Address (optional)

03/19/2008 \$ 1,656,900.00

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".

Provide a description of the gift, bequest, or grant and purpose thereof:  
Meat and Poultry inspections

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:

I, Erinn Sprouse affirm that the gift, bequest, or grant reported above is correct and true to the best of my knowledge. I also 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.

Erinn A. Sprouse  
Signature

4-10-08  
Date

Revised 06/05



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

Iowa Department of Agriculture and Land Stewardship

Name of Department or Office  
502 East 9th Des Moines, IA 50319

Mailing Address  
515-281-8611 City, State, Zip Code

Area Code & Telephone No.

### CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Erinn Sprouse

Name  
Same

Mailing Address (if different from above)  
Erinn.sprouse@IDALS.state.ia.us City, State, Zip (if different from above)  
515-281-8611

Email Address  
Area Code & Telephone Number (if different from above)

### DONOR OF GIFT, BEQUEST, OR GRANT:

USDA,

Name  
1244 Speer Blvd, Ste 903 Denver, CO 80204

Mailing Address  
City, State, Zip Code

Area Code & Telephone Number

Email Address (optional)

03/24/2008 \$ 445,769.00

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".

Provide a description of the gift, bequest, or grant and purpose thereof:

WIC Farmers' Market Nutrition Program

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:

I, Erinn Sprouse 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.

Erinn A. Sprouse  
Signature

4-10-08  
Date

Revised 06/05

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

**Iowa Department of Agriculture and Land Stewardship**

Name of Department or Office  
 502 East 9th  
 Des Moines, IA 50319

Mailing Address  
 515-281-3611  
 City, State, Zip Code

Area Code & Telephone No.

**CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:**

Erinn Sprouse

Name  
 Same

Mailing Address (if different from above)  
 Erinn.sprouse@IDALS.state.ia.us  
 City, State, Zip (if different from above)  
 515-281-3611

Email Address  
 Area Code & Telephone Number (if different from above)

**DONOR OF GIFT, BEQUEST, OR GRANT:**

USDA,

Name  
 1244 Speer Blvd, Ste 903  
 Denver, CO 80204

Mailing Address  
 City, State, Zip Code

Area Code & Telephone Number

Email Address (optional)

03/24/2008 \$ 507,964.00

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".

Provide a description of the gift, bequest, or grant and purpose thereof:

Senior Farmers' Market Nutrition Program

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:**

I, Erinn Sprouse 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.

Erinn A. Sprouse  
 Signature

4-10-08  
 Date