# 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

Reset Form

lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or 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 to be filed within 20 days of receipt of the gift or bequest.

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

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Name of Department or Office 406 N (Figh St Anamosa, IA 52205  Mailing Address City, State, Zip Code 319-462-3504  Area Code & Telephone No.  CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:  Mary Rose Coleman  Name	Anamosa State Penitentiar	·y		
Area Code & Telephone No  ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:  Mary Rose Coleman  Name  Mailing Address (if different from above)  maryrose.coleman@ilowa.gov  Email Address  ONOR OF GIFT OR BEQUEST:  Casey Harper  Name  406 N High St  Mailing Address  City, State, Zip Code  Area Code & Telephone Number (if different from above)  Area Code & Telephone Number  **Value is defined as "fair market value" of item as determined receiving department or office. If no value mark "0.00".  Provide a description of the gift or bequest and purpose thereof:  I Book - "Signing for Dummies" book to Chapel Reference Room  Criteria to use this form:	Name of Department or Office		**************************************	<del>_</del>
Area Code & Telephone No.  DNTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:  Mary Rose Coleman  Vame  Mailling Address (if different from above)  manyose.coleman@lows.gov  Tenail Address  Area Code & Telephone Number (if different from above)  DNOR OF GIFT OR BEQUEST:  Casey Harper  Name  106 N High St  Anamosa, IA 52205  Area Code & Telephone Number  Area Code &				
Area Code & Telephone No  DNTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:  Mary Rose Coleman Name  Malling Address (if different from above) maryrose coleman@ilowa.gov 319-462-3504 X2221 Area Code & Telephone Number (if different from above)  DNOR OF GIFT OR BEQUEST:  Casey Harper Name 406 N High St Anamosa, IA 52205 Malling Address City, State, Zip Code  Tarea Code & Telephone Number  Area Code & Telephone Number  Value is defined as "fair market value" of item as determined receiving department or office. If no value mark "0.00".  Provide a description of the gift or bequest and purpose thereof:  I Book - "Signing for Dummies" book to Chapel Reference Room  Criteria to use this form:		Ci	rty, State, Zip Code	N
Mary Rose Coleman Name  Mailing Address (if different from above)  Mailing Address (if different from above)  Mailing Address (if different from above)  Mailing Address  Area Code & Telephone Number (if different from above)  ONOR OF GIFT OR BEQUEST:  Casey Harper Name  406 N High St  Anamosa, IA 52205  Mailing Address  City, State, Zip Code  12/22/14  \$4.00  Date of Gift or Bequest  Amount/Value*  "value is defined as "fair market value" of item as determined receiving department or office. If no value mark "0.00".  Provide a description of the gift or bequest and purpose thereof:  1 Book - "Signing for Dummies" book to Chapel Reference Room  Criteria to use this form:	Area Code & Telephone No.		10000000000000000000000000000000000000	$\Box$
Mary Rose Coleman    Mailing Address (if different from above)   City, State, Zip (if different from above)   319-462-3504 X2221	ONTACT PERSON FOR RECI	PIENT DEPARTMENT OR OFFIC	<b>)</b> E:	2
Malling Address (if different from above) maryrose.coleman@iowa.gov 319-462-3504 X2221 Area Code & Telephone Number (if different from above)  DNOR OF GIFT OR BEQUEST:  Casey Harper Jame JOHN High St. Anamosa, IA 52205 Mailing Address City, State, Zip Code  Trea Code & Telephone Number  Trea Code & Teleph	Mary Rose Coleman			ထ္
Alling Address (if different from above) maryrose.coleman@iowa.gov  Area Code & Telephone Number (if different from above)  DNOR OF GIFT OR BEQUEST:  Casey Harper Jame 106 N High St Anamosa, IA 52205 Alling Address City, State, Zip Code  12/22/14 \$4.00 Date of Gift or Bequest  Amount/Value*  "value is defined as "fair market value" of item as determined receiving department or office. If no value mark "0.00".  Provide a description of the gift or bequest and purpose thereof:  1 Book - "Signing for Dummies" book to Chapel Reference Room  Criteria to use this form:	łame		V	N
marytose.coleman@iowa.gov  319-462-3504 X2221  Area Code & Telephone Number (if different from above)  DNOR OF GIFT OR BEQUEST:  Casey Harper Iame  06 N High St Anamosa, IA 52205 Iailing Address City, State, Zip Code  Trea Code & Telephone Number  Trea Code & Telephone Number	falling Address (if different from a	havel	City State Zip (if different from above)	
DNOR OF GIFT OR BEQUEST:  Casey Harper Name H06 N High St Anamosa, IA 52205 Mailing Address City, State, Zip Code  Trea Code & Telephone Number  Trea Code &				
Casey Harper Name 406 N High St Anamosa, IA 52205 Mailing Address City, State, Zip Code  The Code & Telephone Number  Area Code & Telephone Number  The Code & Te			Area Code & Telephone Number (if different from	above)
Provide a description of the gift or bequest and purpose thereof:  1 Book - "Signing for Dummies" book to Chapel Reference Room  Criteria to use this form:	Mailing Address		Date of Gift or Bequest Amou	determined by
1 Book - "Signing for Dummies" book to Chapel Reference Room  Criteria to use this form:	Email Address (optional)			
Criteria to use this form:	Provide a description of the gift or	bequest and purpose thereof:		WWW.
	1 Book - "Signing for Du	mmies" book to Chapel Ref	erence Room	
Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.	Criteria to use this form:			
	Receipt of any gift or bequest that	is received by any department of the s	state or received by the Governor on behalf of the state.	
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atement of Affirmation:	atement of Affirmation:			

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assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature



## STATE OF IOWA

CHESTER J. CULVER, GOVERNOR PATTY JUDGE, LT. GOVERNOR

Website: www.doc.state.ia.us

DEPARTMENT OF CORRECTIONS
JOHN BALDWIN, DIRECTOR
ANAMOSA STATE PENITENTIARY
JOHN FAYRAM, WARDEN

### RECEIPT FOR DONATION TO THE ANAMOSA STATE PENITENTIARY

	Date: 12/22/14
Donor Name: Casey Harper	
Address: 406 N. High St.	
	<u>/A</u> Zip Code: <u>5220 ≤</u>
Item(s) Donated: Signing for To Chapel reference	Duranies book
To Chapel reference	room,
<i>I V</i>	
Estimated Value \$ 4, 00	
Acceptance of Donation	12/22/14
Received by The American Received by The Ameri	Date / /
James Code postion 0.7 requires the recontinu	

lowa Code section 8.7 requires the reporting of gifts, bequests, and grants received by an agency or accepted by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee.

Please forward completed form to the Warden's Office.

c: Fred Scaletta File

AD-GA-17 (ASP) F-1

Revised 06/08

# 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



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### FORM-GB

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

For office use only				
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Computer				

EPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUES	iT:	
Anamosa State Penitentiary		
Name of Department or Office 406 N High St At	namosa, IA 52205	
ailing Address City, State, Zip Code		
Area Code & Telephone No.	***************************************	
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC	E:	
Mary Rose Coleman		
Name		
Mailing Address (if different from above)	City, State, Zip (if different from above)	
maryrose.coleman@iowa.gov	319-462-3504 X222)	
Email Address	Area Code & Telephone Number (if different from above)	
ONOR OF GIFT OR BEQUEST:		
Johnny Johnson		
lame		
406 N High St Anamosa, IA 52205		
Mailing Address City, State, Zip Code	12/22/14 \$4.00	
	Date of Gift or Bequest Amount/Value*	
Area Code & Telephone Number	*value is defined as "fair market value" of item as determined by	
	receiving department or office. If no value mark "0,00".	
mail Address (optional)		
Provide a description of the gift or bequest and purpose thereof:	The state of the s	
	4 174	
1 Book - "The Coming Economic Armageddon" to C	napel Library at ASP	
Criteria to use this form:		
Receipt of any gift or bequest that is received by any department of the s	itate or received by the Governor on behalf of the state.	
atement of Affirmation:		
erry Bartruff affirm that the gift or bequest reported above	e is accurate. I further affirm that the information concerning the donor an	

### S

assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.



## STATE OF IOWA

CHESTER J. CULVER, GOVERNOR PATTY JUDGE, LT. GOVERNOR

Website: www.doc.state.ia.us

DEPARTMENT OF CORRECTIONS
JOHN BALDWIN, DIRECTOR
ANAMOSA STATE PENITENTIARY
JOHN FAYRAM, WARDEN

## RECEIPT FOR DONATION TO THE ANAMOSA STATE PENITENTIARY

Date: 12/21/14
Donor Name: Johnson Johnson
Address: 406 W. High St
Address: 406 W. High St  City: Inamore State: 1A Zip Code: 52203
Item(s) Donated: 1 Book - The coming
beconomic amagilian
to Chapel Library - ASP
Estimated Value \$ 4.99 4.00
Acceptance of Donation
Received by Date 12/22/14
Pate ,

lowa Code section 8.7 requires the reporting of gifts, bequests, and grants received by an agency or accepted by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee.

Please forward completed form to the Warden's Office.

c: Fred Scaletta File

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Fax: (515)281-4073 www.iowa.gov/ethics



City, State, Zip (if different from above)

Area Code & Telephone Number (if different from above)

319-462-3504 X2221

lowa Code section 8.7 requires all gifts and bequests 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 to be filed within 20 days of receipt of the gift or bequest.

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

Anamosa State Penitentiary		
Name of Department or Office	Алатоха, IA 52205	
Mailing Address 319-462-3504	City, State, Zip Code	<del></del>
Area Code & Telephone No.		***************************************
CONTACT PERSON FOR RECIPIENT DE	PARTMENT OR OFFICE:	
Mary Rose Coleman		
Name		***************************************

### DONOR OF GIFT OR BEQUEST:

maryrose.coleman@iowa.gov Email Address

Mailing Address (if different from above)

Barb Szucs Name				
406 N High St	Anamosa, IA 52205			
Mailing Address	City, State, Zip Code		12/18/14	\$25.00
		200	Date of Gift or Bequest	Amount/Value*
Area Code & Telephone Num	ber		*value is defined as "fair mark receiving department or office	ket value" of item as determined by
Email Address (optional)				

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

1 Book - "Manhood" by Terry Crews. Barb Szucs, a Kirkwood Community College Teacher, is donating the book to her classroom's library.

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

### Statement of Affirmation:

\_affirm that the gift or bequest 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.

/2-22-19 Date

# terry or aws



ANN SERVAN ANN SERVES ANN SERVES ANN SERVAN ANN SERVAN

Book: Manhood Fry Crews

Donated by Rash Sens (For my rooms library)

amount of book \$2500

12/18/2014

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Revised 06/08

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:	:		
Anamosa State Penitentiary			
Name of Department or Office Anamosa, IA. 52205			
	fdress City, State, Zip Code		
Area Code & Telephone No.			
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE			
Mary Rose Coleman			
Name			
Mailing Address (if different from above)	City, State, Zip (if different from above)		
maryrose.coleman@iowa.gov	319-462-3504 X2221		
Email Address	Area Code & Telephone Number (if different from above)		
Camp Courageous of Iowa  Name  12007 190th St Monticello, IA 52310  Mailing Address City, State, Zip Code  Area Code & Telephone Number  Email Address (optional)	12/15/14 \$2,466.00  Date of Gift or Bequest 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 or bequest and purpose thereof:  Assorted food items for Dietary.			
Criteria to use this form:			
Receipt of any gift or bequest that is received by any department of the star	te or received by the Governor on behalf of the state.		
tatement of Affirmation:			

Series affirm that the gift or bequest 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.

12-22-14 Date