IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

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



lowa Code section 8.7 requires all gifts, bequests, and grants 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 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

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Date

PH 1:00

Hoover State Office Building, Third Floor Mailing Address 515-281-5360 Area Code & Telephone No. CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE: Mollie Anderson, Director Name Mailing Address (if different from above) Mollie.Anderson@iowa.gov Email Address Area Code & Telephone Number (if different from above)	Iowa Department of Administrative Services Name of Department or Office	
Area Code & Telephone No. City, State, Zip (if different from above) Mollie Anderson, Director Mailing Address (if different from above) Mollie Anderson@iowa.gov Email Address Area Code & Telephone Number (if different from above) City, State, Zip (if different from above) Area Code & Telephone Number (if different from above) ONOR OF GIFT, BEQUEST, OR GRANT: William A. Van Orsdel Family Foundation Name 443 SW 6th Street Des Moines, IA 50309 Mailing Address City, State, Zip Code Area Code & Telephone Number Finall Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Contribution to Iowa's West Capitol Terrace Fund - to be used for architectural drawings for future site improvements to the Capitol Complex Criteria to use this form:		Des Moines, IA 50319
Area Code & Telephone No. CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE: Mollie Anderson, Director Name Mailing Address (if different from above) Mollie Anderson@iowa.gov Email Address Contract Person For Recipient Department or Office. Mailing Address (if different from above) City, State, Zip (if different from above) Area Code & Telephone Number (if different from above) CONOR OF GIFT, BEQUEST, OR GRANT: William A. Van Orsdel Family Foundation Name 443 SW 6th Street Des Moines, IA 50309 Mailing Address City, State, Zip Code 7/2/07 \$ 5,000.00 Date of Gift, Bequest, or Grant Amount/Value* "value is defined as "fair market value" of item as determine 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: Contribution to Iowa's West Capitol Terrace Fund - to be used for architectural drawings for future site improvements to the Capitol Complex Criteria to use this form:	•	City, State, Zip Code
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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.	Criteria to use this form:	
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	Service and Servic	
tatement of Affirmation:		

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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.

July 12, 2007 Signatur

10 FAIR SAND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A

DES MOINES, IA 50319

2007 JUL 13 PH 1:00

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DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:				
Iowa Department of Administrative Services				
Name of Department or Office Hoover State Office Building, Third Floor Des	s Moines, IA 50319			
- 	r, State, Zip Code			
515-281-5360				
Area Code & Telephone No. CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE				
Mollie Anderson, Director Name				
Mailing Address (if different from above)	City Chata 7in (If different from about)			
Mollic.Anderson@iowa.gov	City, State, Zip (if different from above)			
Email Address	Area Code & Telephone Number (if different from above)			
DONOR OF GIFT, BEQUEST, OR GRANT:				
EMC Insurance Companies				
Name				
P. O. Box 712 Des Moines, IA 50306-0712	\$ 5,000,00			
Mailing Address City, State, Zip Code	7/2/07 \$ 5,000.00			
515-345-2950 Area Code & Telephone Number	Date of Gift, Bequest, or Grant Amount/Value*			
·	*value is defined as "fair market value" of item as determined by			
bruce.g.kelley@emcins.com Email Address(optional)	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:				
Contribution to Iowa's West Capitol Terrace Fund - to be used for architectural drawings for future site improvements to the Capitol Complex				
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Mollie Anderson affirm that the gift, bequest, or grant reported	above is accurate. I further affirm that the information concerning the			
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July 12, 2007

Date