

ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-3701
www.iowa.gov/ethics



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 6.7 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:

Name of Department or Office: Glenwood Resource Center
Mailing Address: 711 South Vine Street
Area Code & Telephone No.: Glenwood, Iowa 51534

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Name: _____
Mailing Address (if different from above): _____ City, State, Zip (if different from above): _____
Email Address: _____ Area Code & Telephone Number (if different from above): _____

DONOR OF GIFT, BEQUEST, OR GRANT:

Name: RETHA MCGINNIS
Mailing Address: 309 E. FLORENCE AVE. GLENWOOD, IA 51534
Area Code & Telephone Number: _____
Email Address (optional): _____

Date of Gift, Bequest, or Grant: 10-3-06
Amount/Value*: \$ 50.00
*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:

ASSORTED FLOWER POTS & GARDENING TOOLS - YARD WORK FOR CLIENTS TO DO

Criteria to use this form:

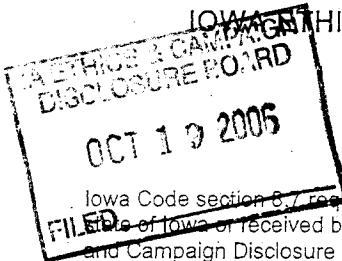
Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, R. Messinger, 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.

Signature: R. Messinger

Date: 10-17-06



IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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

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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:

Name of Department or Office: Glenwood Resource Center
Mailing Address: 711 South Vine Street
Area Code & Telephone No.: Glenwood, Iowa 51534

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Name: _____
Mailing Address (if different from above): _____ City, State, Zip (if different from above): _____
Email Address: _____ Area Code & Telephone Number (if different from above): _____

DONOR OF GIFT, BEQUEST, OR GRANT:

Name: SUSAN BURCHETT
Mailing Address: 108 Southview Blvd Shenandoah IA
City, State, Zip Code: 51601
Area Code & Telephone Number: _____
Email Address (optional): _____

Date of Gift, Bequest, or Grant: 10-9-06 Amount/Value*: \$ 5.00
*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:

MAENS USED CLOTHING - FOR CLIENT USE

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:

[Signature] 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.

[Signature]
Signature

10-17-06
Date

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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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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OCT 18 2006

FILED

Iowa Code section 0.7 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.

Reset Form

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

Iowa Juvenile Home
Name of Department or Office
701 S. Church St. Toledo, IA 52342
Mailing Address City, State, Zip Code
641/484-2560
Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Deb Hanus
Name
DHanus@dhs.state.ia.us
Mailing Address (if different from above) City, State, Zip (if different from above)
Email Address Area Code & Telephone Number (if different from above)

DONOR OF GIFT, BEQUEST, OR GRANT:

Sara Totten
Name
701 S. Church St. Toledo, IA 52342
Mailing Address City, State, Zip Code
641 484 2560
Area Code & Telephone Number
Email Address (optional)

10/09/06 \$ 125
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:
Numerous new gift items & school supplies to be used as Christmas gifts & awards
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, Deb Hanus 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.

Deb Hanus
Signature

10/17/06
Date