Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

September 8, 2026

Accounting Department
Office of the Treasurer
Lucas Building
321 E 12th Street
Des Moines, IA, 50319

The Executive Council, in a meeting held on today's date, approved Department of Administrative Services request for a supplemental emergency allocation in the amount of $2,973.28. This brings the total allocation to $5,213.93. On May 16, 2026, Vehicle #382 sustain hail damage. Request was to cover repair costs.

This represents full and final payment, and this allocation will be closed.

EXECUTIVE COUNCIL OF IOWA

Kristi Onstot

Kristi Onstot
Executive Secretary

cc: Kyle Wear, DAS Fleet Chief Financial Officer
Ryan Betts, Fleet Services Risk Program Manager
Matt Bender, Department of Management
Heather Hackbarth, Department of Management

AOS Claim # 4373
TOS Job # 3134

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

State Capitol Building
Des Moines, Iowa 50319-0006

Telephone (515) 281-5834
www.auditor.iowa.gov

Rob Sand
Auditor of State

August 14, 2026

Kristi Onstot
Executive Council

Subject: Hail Damages to Vehicle #382 on May 16, 2026
Department of Administrative Services
Claim dated May 28, 2026
AOS Claim ID: 4373

The Department's request included a supplemental allocation request of $2,973.28 because additional damages were identified. We recommend Executive Council approval of the supplemental allocation of $2,973.28, which increases the allocation to $5,213.93. In accordance with Executive Council policy, we have examined the invoices and supporting documentation for final payment related to this loss. We have found the items to be in order as shown below:

Documented request		$ 5,213.93
Executive Council allocation (Revised)		$ 5,213.93
Less:		
Previous payments	$ 0.00	
This payment	5,213.93	
Total		$ 5,213.92
Remaining Executive Council allocation		$ 0.00

We recommend that reimbursement be made in the amount of $5,213.93. This represents <u>full</u> and <u>final</u> payment on this allocation.

Sincerely,

Brian R. Brustkern, CPA
Deputy Auditor of State

cc: Kyle Wear, Fleet Services CFO, Department of Administrative Services
Ryan Betts, Fleet Services Risk Program Manager, Department of Administrative Services

Claim: 340105 as of 07/31/2026

Claim Number	DAS Vehicle Number	State Driver	Vehicle Agency	Loss Date	Status	Total Incurred
340105	382-259200	Chris Wicklund	Public Safety - Administrative Services	5/15/2026	Open	4,501.93

ADMIN Only Claim Status

Overall Claim Status:	In Progress	Total Loss Status:	
Overall Claim Status Date:	07/10/2026	Total Loss Status Date:	
Overall Incident Status:		Restitution Status:	
Overall Incident Status Date:		Restitution Status Date:	
29C20 Status:	Reimbursement Requested	Subrogation Status:	
29C20 Status Date:	07/31/2026	Subrogation Status Date:	
Repair Status:	Closed-Repaired	TORT Status:	
Repair Status Date:	07/10/2026	TORT Status Date:	

ADMIN Only

Notification Date:	07/12/2026 2:22 PM	Potential Tort?	No
Entry User:	**System Process**	29C20 Claim?	Yes
Historical Claim?	Yes	Subrogation?	No
Group ID:		Restitution?	No
		Total Loss?	No
Accident Type:	Hail	SOI Driver at Fault?	No
Accident Type Description:	Hail		
Object Struck:		Driver's Agency:	**595-1 - Public Safety - Administrative Services**
Object Struck Description:		Driver's Agency Number:	595
Contributing Circumstances:		Driver's Agency Name:	DPS
		Driver's Agency Email:	**jadams@dps.state.ia.us**
Accident Description ADMIN:	Hail	Vehicle's Agency:	**595-1 - Public Safety - Administrative Services**
		Vehicle's Agency Number:	595
Incident Review Date:			

Populating this field will send an alert to the Driver's Agency Fleet contact that an accident has occurred

Vehicle's Agency Name: DPS

Vehicle's Agency Email: **jadams@dps.state.ia.us**

Estimate Approvals

Add Estimate

Entry Date	Estimate Type	Initial Estimate Amount	Approved Estimate Amount	Body Shop Name	MA Number	CRS Claim?	
07/13/2026 5:48 PM	Initial Estimate	2,240.65	2,240.65	North Iowa Collision Center	21092D	Yes	✖
07/13/2026 5:51 PM	Supplemental Estimat...	2,973.28	2,973.28	North Iowa Collision Center	21092D	Yes	✖
		5,213.93	**5,213.93**				

ADMIN Only Invoicing

Repair Costs

Bodyshop Repair Amount: 5,213.93

Towing Amount:

Storage Amount:

Other Amount:

Final Total: 5,213.93

Triggers creation/email of Payment Request Cover Sheet (REP5)

Bodyshop Payment Date:

Bodyshop Name: North Iowa Collision Center

Bodyshop MA Number: 21092D

Communication Preference: Email

ADMIN Only 29C20

Triggers Initial Notification to AOS from the Incident Form!!

Claim Type: Hail

AOS Notification Date:

Triggers Allocation Request to AOS (AON2)

Allocation Request Date: 05/15/2026

Allocation Request Amount: 2,240.65

Triggers 29C20 status update only (AON3)

AOS Recommendation date: 07/16/2026

AOS Claim Number: 4373

Triggers Reimbursement Request to AOS (AON4-Standard or AON5-Total Loss)

Reimbursement Request Date: 07/31/2026

Reimbursement Amount Requested: 5,213.93

Triggers 29C20 Status update only (AON6)

Reimbursement Letter Received Date: 06/12/2026

Other Information

29C20 Notes: Reimb. request submitted 7/31/2026

ADMIN Only Total Loss

Triggers ACV Request (TL1)

Total Loss NADA Amount:

Total Loss ACV Request Date:

Triggers Vehicle Prep email to DPS or Driver (TL2)

Is equipment teardown needed?

Vehicle Prep Request Date:

Does the Vehicle have a GPS Unit?

Triggers Dispatch to Auction email (TL3)

Has the Inspection Report been completed?

Dispatched to Auction Date:

Current Vehicle Location Name:

Current Vehicle Location Address:

Current Vehicle Location City:

Current Vehicle Location State:

Current Vehicle Location Zipcode:

Current Vehicle Location Phone:

Triggers tasks for any special handling (TL5)

Total Loss ACV Amount: 0.00

Total Loss Salvage Amount:

Total Loss Vehicle Sold Date:

Other Information

Special Instructions:

Admin Only - Tort Claims

Admin Only - Restitution

ADMIN Only Subrogation

Triggers Subrogation Request email to Insurance Company (SUB2)

Subrogation Request Date:	
Total Subrogation Demand:	0.00
Subrogation Vehicle Owner:	
Subrogation Insurance:	

Other Information

Subrogation Notes:

Triggers Subrogation Acceptance email to Insurance Company (SUB3)

Subrogation Acceptance Date:	
Subrogee Claim Number:	
Accepted Subrogation amount:	0.00

ADMIN Only CRS Info

CRS Claim Created:	
CRS Department Name:	
CRS Claimants:	
CRS Date of Loss:	

CRS Claim Created:	
CRS Claim Type:	
CRS Fee:	0.00
CRS Reviewed:	
CRS Review Notes:	

Accident Details

Claim Number:	340105
Claimant:	Chris Wicklund
Accident Date:	05/15/2026
Accident Time:	
Accident Street/Location:	
Accident City:	
Accident State:	
Accident Postal:	
Accident County:	

More than 1 driver involved?

More than 1 vehicle involved?

Accident Description Quick:

Accident Description Full:

Click **Edit Collision Diagram** below to complete an a diagram of the accident.

State Driver Details

Driver's First Name:	Chris	Driver's DoB:	
Driver's Last Name:	Wicklund	Driver's Phone Number:	
Drivers License Number:		Driver's State of Iowa Email Address:	
Drivers License State:			

Other Driver Details

Driver 2 First Name:		Driver 2 DoB:	
Driver 2 Last Name:		Driver 2 Phone Number:	
Driver 2 License Number:		Driver 2 Email Address:	
Driver 2 License State:			

State Vehicle Details

Vehicle:	**1GNSKLED6MR259200**	Tow Required?	
DAS Vehicle Number:	382-259200	Towed by what Company?	
Vehicle License Plate Number (if different than vehicle number)		Towed to where?	
VIN:	1GNSKLED6MR259200	Vehicle Mileage:	
Vehicle Year:	2021	Brief Description of Vehicle Damage:	Hail
Vehicle Make:	CHEVROLET		
Vehicle Model:	TAHOE		
Fund Source:			

Other Vehicle Details

Vehicle 2 License Plate Number:	
Vehicle 2 VIN:	
Vehicle 2 Year:	
Vehicle 2 Make:	
Vehicle 2 Model:	
Vehicle 2 Require Tow:	
Vehicle 2 Towed by what Company?	
Vehicle 2 Towed to where?	

Other Vehicle Insurance Information

Insurance Company Name:	
Address:	
City:	
State:	
Zipcode:	
Agent's Name:	
Agent's Phone:	

Vehicle 2 Mileage:

Vehicle 2 Description of Damage:

Agent's Email:

Policy #

Conditions

Location Type:

Weather Conditions:

Light Conditions:

Surface Conditions:

Vision Obscured:

Apparent Driver Conditions:

Other Comments from Driver:

Was anyone Injured?

Were you Injured?

Was anyone else injured?

Where there any Witnesses?

Were there any Witnesses?

If yes, were you able to collect their information?

If you weren't able to collect their information, why not?

Witness List

Was any Property Damaged other than the Vehicles listed above?

Was any property damaged:

Attach photos or other incident related documents.

Upload File

File Name	Folder	Document Type	Description
340105 AOS Letter.pdf	29C20	29C20 Allocation Letter from AOS	
340105 Final Invoice.pdf	Invoices	Invoice - Bodyshop Final	
340105 Proof of Payment.pdf	Proof of Payment	Proof of Payment - Bodyshop	
29C20 Reimbursement Request Summary - 2026-07-27.pdf	29C20	29C20 Reimbursement Request Summary	

Key Workflow Contacts

Fleet Admin MGR Contact:	**Fucaloro, Mariah**
Fleet Admin Contact:	**Betts, Ryan**
Fleet Finance Contact:	**Wear, Kyle**
Fleet Inbox:	**Betts, Ryan**
AOS 29C20 Contact:	**AOS,**
TOS 29C20 Contact:	**ExecutiveCouncil@TOS.Iowa.Gov,**
DPS Primary Contact:	**Adams, Jeannie**
Fleet Salvage Dispatch Contact:	**Kieffer, Michelle**
Fleet MA Contact:	**Rudawski, Michael**
Finance Invoice Payment Contact:	**DAS, Finance**

Files

File	Description	Folder	Attached By	Attach Date	Size
29C20 Reimbursement Request Summary - 2026-07-27.pdf		29C20	Ryan Betts	07/31/2026	154kb
340105 Proof of Payment.pdf		Proof of Payment	Ryan Betts	07/31/2026	380kb
340105 Final Invoice.pdf		Invoices	Ryan Betts	07/31/2026	1102kb
340105 AOS Letter.pdf		29C20	Ryan Betts	07/31/2026	411kb

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

State Capitol Building
Des Moines, Iowa 50319-0006
Telephone (515) 281-5834

Rob Sand
Auditor of State

July 16, 2026

Kristi Onstot
Executive Council

Subject: Hail Damages to Vehicle #382 on May 16, 2026
Department of Administrative Services
Claim dated May 28, 2026
AOS Claim ID: 4373

In accordance with Executive Council policy, we have examined the claim for 29C.20 funds for the above-mentioned damage. It is our conclusion that the above-mentioned damage incurred by the Department of Administrative Services is covered by Chapter 29C.20 of the Code of Iowa. Therefore, we recommend an Executive Council allocation in the amount of $2,240.65, subject to an audit of actual invoices.

Sincerely,

Brian R. Brustkern, CPA
Deputy Auditor of State

cc: Kyle Wear, Fleet Services CFO, Department of Administrative Services
Ryan Betts, Fleet Services Risk Program Manager, Department of Administrative Services
Heather Hackbarth, Department of Management

NORTH IOWA COLLISION CENTER INC.

Serving your car, light & heavy duty truck, heavy equipment & RV repair needs.
11201 265TH ST, CLEAR LAKE, IA 50428
Phone: (641) 421-8555
FAX: (641) 421-8558

Workfile ID:	745f2516
Federal ID:	87-2591068
Resale Number:	1-17-020011
Federal EPA:	IAR000007856

Final

Estimate

RO Number: 28730

Customer:	Insurance:	Adjuster:	Estimator:	Braden Byrnes
Iowa State Patrol		Phone:	Create Date:	4/29/2025
4425 S Washington		Claim:		
Mason City, IA 50401		Loss Date:		
(111) 111-1111		Deductible:		

2021 CHEV Tahoe Commercial 4WD (Fleet) 4D UTV 8-5.3L Gasoline Direct Injection Summit White

VIN:	1GNSKLED6MR259200	Interior Color:	Jet Black	Mileage In:		Vehicle Out:	6/4/2026
License:		Exterior Color:	Summit White	Mileage Out:			
State:		Production Date:	1/2021	Condition:		Job #:	

Line	Ver	Operation	Description	Qty	Extended Price $	Part Type	Labor	Type	Paint
1	E01		**HOOD**						
2	E01	Remove/Install	R&I hood assy				0.6	Body	
3	S01	PDR	Hood (ALU)	1	925.00	Other			
4	E01	Remove/Install	Insulator				0.3	Body	
5	S01		**FENDER**						
6	S01	PDR	LT Fender	1	110.00	Other			
7	E01		**ROOF**						
8	S01	PDR	Roof panel w/luggage rails	1	575.00	Other			
9	E01	Remove/Install	R&I headliner				3.7	Body	
10	E01		**PILLARS, ROCKER & FLOOR**						
11	S01	PDR	LT Roof rail	1	350.00	Other			
12	S01	PDR	RT Roof rail	1	110.00	Other			
13	E01		**FRONT DOOR**						
14	E01	Remove/Replace	LT Belt molding chrome	1	76.05	OEM	0.3	Body	
15	S01	Remove/Replace	LT Upper molding black	1	150.11	OEM	0.2	Body	
16	S01	Remove/Replace	LT Upper molding rivet	2	25.56	OEM			
17	S01	PDR	LT Door shell w/o body side moldings (ALU)	1	110.00	Other			
18	E01		**REAR DOOR**						
19	E01	Remove/Replace	LT Belt molding chrome	1	50.70	OEM	0.3	Body	
20	S01	Remove/Replace	LT Upper molding black	1	84.96	OEM	0.2	Body	
21	S01	Remove/Replace	LT Upper molding rivet	2	25.56	OEM			
22	S01	PDR	LT Door shell w/o body side moldings (ALU)	1	110.00	Other			
23	E01		**QUARTER PANEL**						

T = Taxable Item, RPD = Related Prior Damage, AA = Appearance Allowance, UPD = Unrelated Prior Damage, PDR = Paintless Dent Repair, A/M = Aftermarket, Rechr = Rechromed, Reman = Remanufactured, OEM = New Original Equipment Manufacturer, Recor = Re-cored, RECOND = Reconditioned, LKQ = Like Kind Quality or Used, Diag = Diagnostic, Elec = Electrical, Mech = Mechanical, Ref = Refinish, Struc = Structural

RO Number: 28730

2021 CHEV Tahoe Commercial 4WD (Fleet) 4D UTV 8-5.3L Gasoline Direct Injection Summit White

24	S01	PDR	LT Quarter Panel	1	500.00	Other		
25	E01	Remove/Install	LT Wheelhouse liner				0.3	Body
26	S01	Remove/Replace	LT Upper molding black	1	254.81	OEM	0.2	Body
27	S01	Remove/Replace	LT Front molding chrome	1	162.97	OEM	0.2	Body
28	S01	Remove/Replace	LT Upper molding rivet	2	25.56	OEM		
29	E01		**REAR LAMPS**					
30	E01	Remove/Install	LT Tail lamp				0.4	Body
31	E01		**REAR BUMPER**					
32	E01	Remove/Install	R&I bumper cover				1.1	Body
33	E01		**VEHICLE DIAGNOSTICS**					
34	E01	Sublet	Pre-repair scan	1	118.65	Sublet		
35	E01	Repair	Pre Repair Scan Labor				0.5	Mech
36	E01	Sublet	Post-repair scan	1	141.50	Sublet		
37	E01	Repair	Post Repair Scan Labor				0.5	Mech
38	E01		**MISCELLANEOUS OPERATIONS**					
39	E01	Remove/Replace	Corrosion protection	1	15.00	OEM	0.3	Body

Estimate Totals	Discount $	Markup $	Rate $	Total Hours	Total $
Parts					871.28
Sublet/Miscellaneous					260.15
Labor, Body			75.00	8.1	607.50
Labor, Mechanical			75.00	1.0	75.00
Miscellaneous		610.00			3,400.00
Subtotal					**5,213.93**
Sales Tax					0.00
Grand Total					**5,213.93**
Net Total					**5,213.93**

Estimate Version	Total $
Original	2,240.65
Supplement S01	2,973.28

Insurance Total $:	0.00
Received from Insurance $:	0.00
Balance due from Insurance $:	0.00
Customer Total $:	5,213.93
Received from Customer $:	0.00
Balance due from Customer $:	5,213.93

T = Taxable Item, RPD = Related Prior Damage, AA = Appearance Allowance, UPD = Unrelated Prior Damage, PDR = Paintless Dent Repair, A/M = Aftermarket, Rechr = Rechromed, Reman = Remanufactured, OEM = New Original Equipment Manufacturer, Recor = Re-cored, RECOND = Reconditioned, LKQ = Like Kind Quality or Used, Diag = Diagnostic, Elec = Electrical, Mech = Mechanical, Ref = Refinish, Struc = Structural

Check Search

Back

Filters

Bank Account

Check / EFT: 000001000967342

Issue Date: MM/DD/YYYY

External Disbursement ID

External Issue Date: MM/DD/YYYY

Status

Disbursement Type

Record Date: MM/DD/YYYY

Transaction Code

Transaction Dept

Transaction ID

Apply Reset

Grid Actions

1 - 1 of 1 Records

View per Page - 20 50 100

Page 1 of 1

Bank Account	Check / EFT	Issue Date	Status	Record Date	Amount	Transaction Code	Transaction Dept	Transaction ID	Disbursement Type
0800	000001000967342	06/16/2026	Paid	06/16/2026	$5,213.93	AD	005	ADC06162600000535164	Check

Date: July 31, 2026

To: AOS, Auditor of State
Executive Council, Treasurer of State

Re: REIMBURSEMENT REQUEST - 29C20

AOS Claim #	4373
DAS Claim #	340105
Vehicle / Event	382-259200 / Hail
Event Date	5/15/2026 at
Summary	Hail
Amount Requested	5,213.93

The Department of Administrative Services, Central Procurement Fleet Services Enterprise, has paid all vendors to date. We are seeking an allocation for those funds under 29C20 Contingency Fund – Disaster Aid. Please deposit into the following account: **0665-005-5790-0657**.

If you have any questions or need additional information, please do not hesitate to contact me.

Thank you.

Ryan Betts
Fleet Services Risk Program Manager
Iowa Department of Administrative Services
510 E 12th Street, Des Moines, IA 50319
(515) 281-8008
das.risk@das.iowa.gov