

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. ROBY SMITH
TREASURER OF STATE

HON. MICHAEL L. NAIG
SECRETARY OF AGRICULTURE



Executive Council of Iowa

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

November 6, 2023

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 the Department of Public Safety's request a supplemental emergency allocation in the amount of \$1,490.75. This brings the total allocation to \$10,927.00, subject to audit of actual invoices. On April 19, 2023, State Patrol Vehicles #44, 167, 636, 662 were damaged by hail. Request was to cover repair costs.

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

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: Jeannie Adams, Iowa State Patrol, Department of Public Safety
DAS Risk
Joel Lunde, Department of Management

AOS Claim # 3493
TOS Job # 2464

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OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004
Telephone (515) 281-5834 Facsimile (515) 281-6518

October 17, 2023

Victoria Newton
Executive Council
L O C A L

Subject: Hail Damage to Vehicle #'s 44, 167, 636 and 662 on April 19, 2023
Department of Public Safety – Iowa State Patrol
Claim dated April 28, 2023
AOS Claim ID: 3494

The Department's request included a supplemental allocation request of \$1,490.75 because additional damages were identified. We recommend Executive Council approval of the supplemental allocation of \$1,490.75, which increases the allocation to \$10,927.00. 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		\$	<u>10,927.00</u>
Executive Council allocation (Revised)		\$	10,927.00
Less:			
Previous payments	\$	0.00	
This payment		<u>10,927.00</u>	
Total		\$	<u>10,927.00</u>
Remaining Executive Council allocation		\$	<u>0.00</u>

As requested by the Department, we recommend reimbursement be made to the Department of Administrative Services in the amount of \$10,927.00. This represents full and final payment on this allocation.

Sincerely,

Ernest H. Ruben, Jr., CPA
Deputy Auditor of State

cc: Jeannie Adams, Iowa State Patrol, Department of Public Safety
Mariah Flowers, Fleet Services Manager, Department of Administrative Services



Governor Kim Reynolds
Lt. Governor Adam Gregg
Adam Steen, Director

Date: August 7, 2023

To: Tammy Hollingsworth, Auditor of State
Victoria Newton, Treasurer of State
Executive Council

From: Mariah Fucaloro, Fleet Manager
DAS Fleet Services
Department of Administrative Services

Re: REIMBURSEMENT REQUEST - 29C20 Claim

Claim #	3494
Vehicle / Event	#44, 167, 636, 662/Hail
Event Date	April 19, 2023
Summary	Vehicles sustained hail damage. (255533, 255416, 255402, 255355)
Amount Requested	\$ 3,438.00 - #44 \$ 3,354.00 - #167 \$ 2,665.00 - #636 \$ 1,470.00 - #662 \$10,927.00 - Total

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,

Mariah Fucaloro, Fleet Manager
DAS Fleet Services
Mariah.Fucaloro@iowa.gov
515-414-6542

All Makes Collision Center

524 23rd Ave
 Council Bluffs, IA 51501
 Phone (712) 256-3195

Invoice

No: 1826

Scheduled In Date: 6/6/2023
 Completed Date: None 6/6/23
 Service Rep: Kortnie Getzschman
 Page 1
 PO No:

Name

state of iowa

Service Item

17 Ford Taurus Police Intercptr 4 D
 Lic: 636 Unit#
 VIN: 1FAHP2MK5HG129432 Color:
 Mileage In: Mileage Out:
 Paint Code : _____

Insurance Information

Claim No:
 Policy No:
 Date of Loss:
 Deductible: 0.0000

Insurance Company

Ext:

Insured

APDS018255402-001
 Ext:

Adjuster

,

Type	Description	Qty	Each	Amount	Sales Tax%	Sales Tax	Total
BL	Body Labor	2.4	50.00	120.00	7.00%	0.00	120.00
NS	NonTaxable Sublet			2,545.00	0.00%	0.00	2,545.00
ESTIMATE TOTALS				\$2,665.00		\$0.00	\$2,665.00

Type	Description	Qty	Each	Amount	Sales Tax%	Sales Tax	Total
BL	Body Labor	2.4	50.00	120.00	7.00%	0.00	120.00
NS	NonTaxable Sublet			2,545.00	0.00%	0.00	2,545.00
INVOICE TOTALS				\$2,665.00		\$0.00	\$2,665.00

An express mechanic's lien is hereby acknowledged on the above vehicle to secure the amount of costs incurred by in collecting amounts owed for repairs on the above vehicle. I also hereby make, constitute and appoint you and/or your employees as my true lawful attorney for me and in my name, place, and stead to ask, demand, collect, sign for and receive all such sums of money which are or shall be due owing, payable and belonging to me, or detained from me, related to the vehicle herein described. This includes full power and authority to sign my name to all checks, drafts, and/or negotiable instruments related to or arising out of work done by you and/or your employees on the above mentioned vehicle.

Signature: _____

Date: _____

Warrants

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	Fiscal Year	Warrant Number	Line Number	Line Amount	Issued	Redeemed	Vendor Customer
✓	2023	85940779	1	\$99.00	06/28/2023	07/03/2023	00002112887
	2023	85940779	2	\$3,255.00	06/28/2023	07/03/2023	00002112887

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▼Warrant Information

Fiscal Year : 2023 Amount : \$3,354.00
 Warrant Number : 85940779 Vendor Customer : 00002112887
 Line Number : 1 Last Updated : 7/3/23

▼Issue Information

Issued : 06/28/2023 Void :
 Document ID : RISK00523177010 Duplicate :
 Document Line Number : 1 Stop :
 Line Amount : \$99.00
 Comments :

▼Redeemed Information

Redeemed : 07/03/2023 Batch Number : 0992
 Redeemed Bank : 0022 Sequence Number : 00015
 Redeemed Fund : 0665
 Redeemed Department : 005

▼Fund Accounting

Fund : 0665 Object : 2715 Dept Object :
 Sub Fund : Sub Object : Dept Revenue :
 Department : 005 Object Class :
 Unit : 5790 Revenue Source :
 Sub Unit : Sub Revenue Source :
 Appropriation : 0000 Revenue Source Class :
 BSA :
 Sub BSA :

▼Detail Accounting

Location : Reporting : Major Program :
 Sub Location : Sub Reporting : Program :
 Activity : 2920 Task : Phase :
 Sub Activity : Sub Task : Program Period :
 Function : Task Order :
 Sub Function :

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Karl Chevrolet Collision Center Ankeny

Workfile ID: T1E8E416
 PartsShare: 7jrN8x
 Federal ID: 42-1092272

Your Dealer for Life
 1101 Southeast Oralabor Road, Ankeny, IA 50021
 Phone: (515) 299-4337
 FAX: (515) 964-2293

Final Bill

RO Number: 930099

Customer:	Insurance:	Adjuster:	Estimator:	Michael Wright
STATE OF IOWA 167	STATE OF IOWA	Phone:	Create Date:	4/20/2023
		Claim:	APDSOI0255416-00	
			1	
		Loss Date:		
(515) 725-0010		Deductible:		

2019 DODG Charger Police AWD (Fleet) 4D SED 8-5.7L Gasoline Sequential MPI SILVER

VIN: 2C3CDXKT1KH577267	Interior Color: BLACK	Mileage In: 66,433	Vehicle Out: 6/13/2023
License: 167	Exterior Color: SILVER	Mileage Out:	
State: IA	Production Date: 1/2019	Condition:	Job #:

Line	Ver	Operation	Description	Qty	Extended Price \$	Part Type	Labor	Type	Paint
1	S01		DENT BUSTERS INVOICE						
2	S01		HOOD						
3	S01		3 oversize	3	150.00	Other			
4	S01	PDR	Hood (ALU) NOTE: PDR 200 quarter	1	900.00	Other			
5	S01		FENDER						
6	S01	PDR	LT Fender NOTE: PDR 10 nickel	1	125.00	Other			
7	S01	PDR	RT Fender NOTE: PDR 10 nickel	1	125.00	Other			
8	E01		ROOF						
9	E01	PDR	Roof panel w/o sunroof NOTE: PDR 20 nickel	1	315.00	Other			
10	E01		PILLARS, ROCKER & FLOOR						
11	S01		RT Roof rail	1	312.50	Other			
12	S01	PDR	LT Aperture panel NOTE: PDR 15 quarter	1	150.00	Other			
13	E01		FRONT DOOR						
14	E01	Remove/Replace	RT Frame molding	1	125.00	OEM	0.3	Body	
15	E01	Remove/Install	RT Power mirror w/o heat, w/o memory, w/o blind spot blue				0.5	Body	
16	E01	Remove/Install	RT R&I trim panel				0.5	Body	
17	S01	PDR	LT Outer panel (HSS) NOTE: PDR 10 nickel	1	125.00	Other			

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: 930099

2019 DODG Charger Police AWD (Fleet) 4D SED 8-5.7L Gasoline Sequential MPI SILVER

18	E01		REAR DOOR			
19	E01	PDR	RT Outer panel (HSS) NOTE: PDR 1 quarter	1	100.00	Other
20	E01		QUARTER PANEL			
21	E01	PDR	2 OVERSIZE	1	100.00	Other
22	E01	PDR	RT Quarter panel NOTE: PDR 10 quarter	1	150.00	Other
23	E01	PDR	LT Quarter panel NOTE: PDR 15 quarter	1	150.00	Other
24	E01		TRUNK LID			
25	E01	PDR	Trunk lid w/police w/camera NOTE: PDR 5 quarter	1	200.00	Other
26	E01		Post Repair Scan- Per OEM Guideline			0.5 Body

Estimate Totals	Discount \$	Markup \$	Rate \$	Total Hours	Total \$
Parts	(35.00)	262.50			3,255.00
Labor, Body			55.00	1.8	99.00
Subtotal					3,354.00
Sales Tax					0.00
Grand Total					3,354.00
Net Total					3,354.00

Estimate Version	Total \$
Original	3,193.25
Supplement S01	160.75

Insurance Total \$:	3,354.00
Received from Insurance \$:	0.00
Balance due from Insurance \$:	3,354.00
Customer Total \$:	0.00
Received from Customer \$:	0.00
Balance due from Customer \$:	0.00

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

Warrants

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	Fiscal Year	Warrant Number	Line Number	Line Amount	Issued	Redeemed	Vendor Customer
✓	2023	85940771	1	\$120.00	06/28/2023	07/03/2023	VS000002922
	2023	85940771	2	\$1,350.00	06/28/2023	07/03/2023	VS000002922

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▼Warrant Information

Fiscal Year : 2023 Amount : \$1,470.00
 Warrant Number : 85940771 Vendor Customer : VS000002922
 Line Number : 1 Last Updated : 7/3/23

▼Issue Information

Issued : 06/28/2023 Void :
 Document ID : RISK00523167005 Duplicate :
 Document Line Number : 1 Stop :
 Line Amount : \$120.00
 Comments :

▼Redeemed Information

Redeemed : 07/03/2023 Batch Number : 0992
 Redeemed Bank : 0022 Sequence Number : 00007
 Redeemed Fund : 0665
 Redeemed Department : 005

▼Fund Accounting

Fund : 0665 Object : 2715 Dept Object :
 Sub Fund : Sub Object : Dept Revenue :
 Department : 005 Object Class :
 Unit : 5790 Revenue Source :
 Sub Unit : Sub Revenue Source :
 Appropriation : 0000 Revenue Source Class :
 BSA :
 Sub BSA :

▼Detail Accounting

Location : Reporting : Major Program :
 Sub Location : Sub Reporting : Program :
 Activity : Task : Phase :
 Sub Activity : Sub Task : Program Period :
 Function : Task Order :
 Sub Function :

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All Makes Collision Center

524 23rd Ave
 Council Bluffs, IA 51501
 Phone (712) 256-3195

Invoice

No: 1829

Scheduled In Date: 6/6/2023
 Completed Date: None *6/6/23*
 Service Rep: Kortnie Getzschman
 Page 1
 PO No:

Name

state of iowa

Service Item

15 Ford Taurus SE 4 DR Sedan
 Lic: 662 Unit#
 VIN: 1FAHP2D84FG105172 Color:
 Mileage In: Mileage Out:
 Paint Code : _____

Insurance Information

Claim No:
 Policy No:
 Date of Loss:
 Deductible: 0.0000

Insurance Company

Ext:

Insured

APDS018 255355-001
 Ext:

Adjuster

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Type	Description	Qty	Each	Amount	Sales Tax%	Sales Tax	Total
BL	Body Labor	2.4	50.00	120.00	7.00%	0.00	120.00
NS	NonTaxable Sublet			1,350.00	0.00%	0.00	1,350.00
ESTIMATE TOTALS				\$1,470.00		\$0.00	\$1,470.00

Type	Description	Qty	Each	Amount	Sales Tax%	Sales Tax	Total
BL	Body Labor	2.4	50.00	120.00	7.00%	0.00	120.00
NS	NonTaxable Sublet			1,350.00	0.00%	0.00	1,350.00
INVOICE TOTALS				\$1,470.00		\$0.00	\$1,470.00

An express mechanic's lien is hereby acknowledged on the above vehicle to secure the amount of costs incurred by in collecting amounts owed for repairs on the above vehicle. I also hereby make, constitute and appoint you and/or your employees as my true lawful attorney for me and in my name, place, and stead to ask, demand, collect, sign for and receive all such sums of money which are or shall be due owing, payable and belonging to me, or detained from me, related to the vehicle herein described. This includes full power and authority to sign my name to all checks, drafts, and/or negotiable instruments related to or arising out of work done by you and/or your employees on the above mentioned vehicle.

Signature: _____

Date: _____

Warrants

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Fiscal Year	Warrant Number	Line Number	Line Amount	Issued	Redeemed	Vendor Customer
✓ 2023	72511076	1	\$33.00	05/25/2023	05/31/2023	00002112887
2023	72511076	2	\$3,405.00	05/25/2023	05/31/2023	00002112887

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▼ Warrant Information

Fiscal Year : 2023 **Amount :** \$3,438.00
Warrant Number : 72511076 **Vendor Customer :** 00002112887
Line Number : 1 **Last Updated :** 5/31/23

▼ Issue Information

Issued : 05/25/2023 **Void :**
Document ID : RISK00523143002 **Duplicate :**
Document Line Number : 1 **Stop :**
Line Amount : \$33.00
Comments :

▼ Redeemed Information

Redeemed : 05/31/2023 **Batch Number :** 0000
Redeemed Bank : 0000 **Sequence Number :** 05935
Redeemed Fund : 0665
Redeemed Department : 005

▼ Fund Accounting

Fund : 0665 **Object :** 2715 **Dept Object :**
Sub Fund : **Sub Object :** **Dept Revenue :**
Department : 005 **Object Class :**
Unit : 5790 **Revenue Source :**
Sub Unit : **Sub Revenue Source :**
Appropriation : 0000 **Revenue Source Class :**
BSA :
Sub BSA :

▼ Detail Accounting

Location : **Reporting :** **Major Program :**
Sub Location : **Sub Reporting :** **Program :**
Activity : 2920 **Task :** **Phase :**
Sub Activity : **Sub Task :** **Program Period :**
Function : **Task Order :**
Sub Function :

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Karl Chevrolet Collision Center Ankeny

Workfile ID: ab/ctb3d
PartsShare: 7jFQRj
Federal ID: 42-1092272

Your Dealer for Life
1101 Southeast Oralabor Road, Ankeny, IA 50021
Phone: (515) 299-4337
FAX: (515) 964-2293

Final Bill

RO Number: 931163

Customer: STATE OF IOWA 44	Insurance: STATE OF IOWA	Adjuster: Phone: Claim: 44 Loss Date: Deductible:	Estimator: Michael Wright Create Date: 4/24/2023
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(515) 725-0010

2021 DODG Charger Police AWD (Fleet) 4D SED 6-3.6L Gasoline Sequential MPI GREY

VIN: 2C3CDXKKG2MH528634	Interior Color: BLACK	Mileage In: 29,090	Vehicle Out: 5/16/2023
License: 44	Exterior Color: GREY	Mileage Out:	
State: IA	Production Date: 12/2020	Condition:	Job #: 3382

Line	Ver	Operation	Description	Qty	Extended Price \$	Part Type	Labor	Type	Paint
1	E01		HOOD						
2	E01	PDR	Hood (ALU) NOTE: PDR 450 nickel	1	1,260.00	Other			
3	E01	Remove/Install	Insulator				0.3	Body	
4	E01		FENDER						
5	E01	PDR	LT Fender w/o wide body NOTE: PDR 3 quarter	1	100.00	Other			
6	E01	PDR	RT Fender w/o wide body NOTE: PDR 30 quarter	1	225.00	Other			
7	E01		ROOF						
8	E01	PDR	Roof panel w/o sunroof NOTE: PDR 20 quarter	1	430.00	Other			
9	E01		PILLARS, ROCKER & FLOOR						
10	E01	PDR	RT Aperture panel w/o wide body NOTE: PDR 2 quarter	1	100.00	Other			
11	E01		REAR DOOR						
12	E01	PDR	RT Outer panel (HSS) NOTE: PDR 4 quarter	1	100.00	Other			
13	E01		QUARTER PANEL						
14	E01	PDR	RT Quarter panel w/o wide body NOTE: PDR 40 quarter	1	275.00	Other			
15	E01	PDR	LT Quarter panel w/o wide body NOTE: PDR 10 quarter	1	150.00	Other			
16	E01		TRUNK LID						
17	E01	PDR	Trunk lid w/o police	1	450.00	Other			

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: 931163

2021 DODG Charger Police AWD (Fleet) 4D SED 6-3.6L Gasoline Sequential MPI GREY

NOTE: PDR 50 quarter

18 E01 Remove/Install Trunk lid trim 0.3 Body

Estimate Totals	Discount \$	Markup \$	Rate \$	Total Hours	Total \$
Parts		315.00			3,405.00
Labor, Body			55.00	0.6	33.00
Subtotal					3,438.00
Sales Tax					0.00
Grand Total					3,438.00
Net Total					3,438.00

Estimate Version	Total \$
Original	3,438.00

Insurance Total \$:	3,438.00
Received from Insurance \$:	0.00
Balance due from Insurance \$:	3,438.00
Customer Total \$:	0.00
Received from Customer \$:	0.00
Balance due from Customer \$:	0.00

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