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SECRETARY OF AGRICULTURE



Executive Council of Iowa

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

August 7, 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 for an emergency allocation in the amount of \$8,018.90, subject to audit of actual invoices. On October 6, 2022, State Patrol Vehicle #343 was damaged by a deer. Request was to cover repair costs.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

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

AOS Claim # 2376
TOS Job # _____



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

August 2, 2023

Victoria Newton
Executive Council
L O C A L

Subject: Deer Damage to Vehicle #343 on October 6, 2022
Department of Public Safety – Iowa State Patrol
Claim dated June 2, 2023
AOS Claim ID: 2376

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 damage incurred by the Department of Public Safety – Iowa State Patrol is covered by Chapter 29C.20 of the Code of Iowa. Therefore, we recommend an Executive Council allocation in the amount of \$8,018.90, subject to an audit of actual invoices.

Sincerely,

A handwritten signature in blue ink, appearing to read "Ernest H. Ruben, Jr.".

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
Joel Lunde, Department of Management



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

Date: June 2, 2023

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

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

Re: ALLOCATION REQUEST - 29C20 Claim for Executive Council Consideration

Vehicle / Event	#343/Deer
Event Date	October 6, 2022
Summary	Vehicle #343 struck a deer. (245803)
Amount Requested	\$8,018.90 - Estimate
Supporting Documentation	29C20 Email Notification, Accident Report, Repair Estimate(s), Photos

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

Thank you,

Mariah Flowers, Fleet Manager
DAS Fleet Services
Mariah.Flowers@iowa.gov
515-414-6582



Risk, DAS <das.risk@iowa.gov>

FW: 343 deer strike

1 message

Adams Jeannie <jadams@dps.state.ia.us>

Fri, Oct 7, 2022 at 7:46 AM

To: Tammy Hollingsworth <Tammy.Hollingsworth@aos.iowa.gov>, "ExecutiveCouncil [TOS]" <ExecutiveCouncil@tos.iowa.gov>

Cc: "Risk, DAS (das.risk@iowa.gov)" <das.risk@iowa.gov>

Good morning

Trooper Scott (#343) hit a deer while on duty. An estimate will be forthcoming.

Thank you

Jeannie Adams
ISP Fleet & Supply, Fleet Asset Manager
Department of Public Safety
30 N.E. 48th Place
Des Moines, Iowa 50313
Direct #: 515-725-0643
Cell Phone: 515-204-3019
Shop: 515-281-3277
Fax: 515-242-6321
Email: jadams@dps.state.ia.us<mailto:jadams@dps.state.ia.us>

From: Lewis Brett <brlewis@dps.state.ia.us>

Sent: Thursday, October 6, 2022 10:03 PM

To: vehicledamage <vehicledamage@dps.state.ia.us>; DAS.Risk (DAS.Risk@iowa.gov) <DAS.Risk@iowa.gov>

Cc: Knutson Dana <knutson@dps.state.ia.us>; Sinnwell Brian <sinnwell@dps.state.ia.us>; Duenow Keith <duenow@dps.state.ia.us>

Subject: 343 deer strike

Please see the attached reference a car vs. deer crash that occurred tonight, October 6th with car #343 driven by Trooper Zach Scott. He will get an estimate tomorrow, October 7th and we will send that down when it's completed. Let me know if you need anything else.

Thanks,

Sergeant Brett Lewis # 147
Iowa Department of Public Safety
Iowa State Patrol District 8
4425 S. Washington Ave.
Mason City, IA 50401-7002

Phone: 641-424-3625

Fax: 641-423-8381

Email: brlewis@dps.state.ia.us<mailto:brlewis@dps.state.ia.us>

[Description: Description: Description: Signature Banner]

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8 attachments



IMG_0003.JPG
2130K



IMG_0004.JPG
2002K



IMG_0005.JPG
2421K





IMG_0008.JPG
2274K



image001.jpg
11K

 **MARS_Unit_Report-2022024743.pdf**
75K

 **MEMO 10-6-22.doc**
41K

 **State Vehicle Damage Report.Form.doc**
95K

State Vehicle Damage Report

Attach this completed form to an email along with the items identified below and send to: **DPS – Vehicle Damage; DAS – Risk**

- One Repair Estimate from Approved State Bid Shop
- DOT MARS Report (if reportable)
- Memo from the Driver of the State Vehicle
- 3-4 photos of the vehicle damage

***Sworn Officers only: Complete a Line of Duty Form #432037 and send to DOT if 10-50 was reportable!!!

STATE VEHICLE: (Mark if Act of Nature) CASE #: 2022024743

Date: <small>(Month/Day/Year)</small>	10/06/2022	Time: <small>(Time plus a.m./p.m.)</small>	8:40 p.m.
Vehicle Plate #:	343	Vehicle Mileage:	31,276
Vehicle Description: <small>(Yr/Make/Model/ & Vin#)</small>	2021 gray Dodge Charger VIN: 2C3CDXKG1MH528642		
Assigned To:	Trp. Zach Scott	Badge #	343
Driven By:	Trp. Zach Scott	Badge #	343
Driver's Lic #:	203CC9986	Damage:	\$5,466.84
Vehicle Towed: <small>(Yes / No)</small>	No	Towed By:	NA
Towed To:	N/A	Towing Cost:	\$NA
Seat Belt: <small>(Yes / No)</small>	Yes	Type of Vehicle: <small>(Marked/Semi /Unmarked)</small>	Marked
Injured/Injuries:	None		
Occupants: <small>(Other than driver)</small>	None		

VEHICLE #2:

DL #:		State:	
Vehicle Lic. #		State:	
Driver's Name:			
Driver's Address:			
Owner's Name:			
Owner's Address:			
Owner's Phone:			

Insurance Info: (Carrier/Policy #/Phone)			
Veh Description: (Yr/Make/Model & Vin#)			
Damage:	\$	Seat Belt: (Yes / No)	No
Injured/Injuries:			
Occupants: (Other than driver)			
Occupant(s) Wearing Seat Belt: (Yes/No)	Yes		

OTHER INFORMATION:

Witnesses:	None
Accident Location: (Street/Hwy)	B20 and Interstate 35
County:	Cerro Gordo
Weather/Road Conditions:	Clear
Narrative: Trp. Scott was traveling west on county road B20 when a deer entered the roadway and struck the driver side of his patrol car.	
Property Damage other than Vehicles:	NA
Cost:	\$
Citations Issued To: (List Charge(s) and Statute Code(s))	

Investigating Officer:	Sgt. Brett Lewis #147
------------------------	-----------------------

VEHICLE #3: (If needed) (For more vehicles, please make extra copies of this portion)

DL #:		State:	
Vehicle Lic. #		State:	
Driver's Name:			
Driver's Address:			
Owner's Name:			
Owner's Address:			

Owner's Phone:			
Insurance Info: (Carrier/Policy #/Phone)			
Veh Description: (Yr/Make/Model & Vin#)			
Damage:	\$	Seat Belt: (Yes / No)	Yes
Injured/Injuries:			
Occupants: (Other than driver)			
Occupant(s) Wearing Seat Belt: (Yes/No)	Yes		



MEMORANDUM

TO: Sgt. Brett Lewis #147
FROM: Trp. Zachary Scott #343
DATE: 13:41
SUBJECT: Squad Car collision with deer-

On October 6, 2022 at about 8:38pm I was on routine patrol when I unavoidably collided with a deer with my patrol car. My patrol car sustained damage to my front driver's side fender, both driver's side doors, spotlight, and driver's side A pillar.

Respectfully,

~~Trooper~~ Trp. Zachary Scott #343

INVESTIGATING OFFICER'S REPORT OF MOTOR VEHICLE ACCIDENT

Law Enforcement Case Number:

2022024743

MAIL REPORTS TO: Iowa Department of Transportation, Office of Driver Services, P.O. Box 9204, Des Moines, Iowa 50306-9204

Date of Accident 10/06/2022		Time of Accident 20:40 Hrs.		County CERRO GORDO - 17		Accident occurred within corporate limits of (city)											
UNIT	Driver's Name - Last SCOTT					First ZACHARY			Middle STEVEN								
	Address 4425 S WASHINGTON					City MASON CITY			State IA	Zip 50401							
	Date of Birth 11/30/1992		Driver's License Number 203CC9986		CDL	Citation Charge 1			Citation Charge 2								
	Male <input checked="" type="radio"/>	Female <input type="radio"/>	State IA	Class C	Endorsements L	Restrictions	Yes <input type="radio"/>	No <input checked="" type="radio"/>	Citation Charge 3			Citation Charge 4					
	Alcohol Test Given: 1		Test Results:		Drug Test Given: 1	Test Result:	Re-exam: Yes <input type="radio"/>		No <input checked="" type="radio"/>		Reason for Re-Exam Request:						
	Owner's Name - Last STATE OF IOWA					First			Middle								
	Address 109 SE 13TH ST					City DES MOINES			State IA	Zip 50319							
	License Plate No. 343	State IA	Year	VIN: 2C3CDXKG1MH528642		Color GRY	Year 2021	Make DODG	Model CHARGER POLI	Style 4D							
	Trailer Plate No.	State	Year	VIN:		Tow 1	Tow #	Towed To		Approx. Cost to Repair or Replace \$5,000.00							
	Insurance Company Name STATE OF IOWA					Insurance Co. Phone Number			Insurance Policy Number								
Initial Travel Direction		Veh. Act.	Veh. Config. 01	Cargo Body Type 01	Veh. Defect	Point of Initial Impact	Most Damaged Area	Extent of Damage	Total Occ. in Veh. 1								
Special Veh. Func.	Emergency Status	Bus Use	Driver Condition	Vision Obscured	Contributing Circumstances Driver (up to two) 88		Driver Distractions 02	Speed Limit									
Traffic Controls	Horizontal Alignment		Vertical Alignment		SEQUENCE OF EVENTS	First Event	Second Event	Third Event	Fourth Event	Most Harmful Event							
COMMERCIAL	Carrier Name/Lessee																
	Street Address					City			State	Zip Code							
	Number of Axles		Gross Vehicle Weight Rating			US DOT Number		MC Number	Underride/Override								
	Haz Mat Involvement	Haz Mat Placard	Placard Number	Haz. Mat Released	Haz Mat Class	Haz Mat Name											
	Trailer Plate:	State	Year	VIN													
	Trailer Plate:	State	Year	VIN													
Converter Dolly	Dolly Plate:		State	Plate Year	VIN												
PERSONS INJURED	DRIVER OF UNIT 1					Phone Number: (641) 424-3625		Sex	Seating Position	Injury Status	Occupant Protection	Airbag Deployment	Ejection	Ejection Path	Trapped/extricated	Source of Transport	Died at scene/enroute
	Transported to:					Transported by:											
	Name			Phone Number		DOB:											
	Address					Transported to:							Transported by:				
	Name			Phone Number		DOB:											
	Address					Transported to:							Transported by:				
	Name			Phone Number		DOB:											
	Address					Transported to:							Transported by:				
	Name			Phone Number		DOB:											
	Address					Transported to:							Transported by:				

INVESTIGATING OFFICER'S REPORT OF MOTOR VEHICLE ACCIDENT

MAIL REPORTS TO: Iowa Department of Transportation, Office of Driver Services, P.O. Box 9204, Des Moines, Iowa 50306-9204

Law Enforcement Case Number: 2022024743
Legal Intervention? Private Property?
County: 17 Route:
X Coordinate: 472045.062
Y Coordinate: 4782944.5
If Divided Highway, Provide Route (Cardinal) Travel Direction

LOCATION
Date of Accident 10/06/2022 Time of Accident 20:40 Hrs. County CERRO GORDO - 17
Accident occurred within corporate limits of (city)
Literal Description B20 AND I 35
If accident occurred outside of city limits show general vicinity
On Road, Street or Highway: At Intersection with:
Note: Unless accident occurred at an intersection which is completely described above, use the space below to give the exact location from a milepost or definable intersection, bridge, or railroad crossing, using two distances and directions if necessary

ACCIDENT ENVIRONMENT ROADWAY CHARACTERISTICS
Location of First Harmful Event Weather Conditions (up to two) Major Contributing Circumstances Environment
Manner of Crash/Collision Roadway
Light Conditions Surface Conditions Type of Roadway Junction/Feature
FRA No.

First Harmful Event (Crash) WORKZONE RELATED? Yes No Activity Location Type Workers Present
31

NONMOTORISTS
Name 001 Phone Number DOB:
Address: Alcohol Test Given Test Results: Drug Test Given Result Charged Yes No
Transported to: Transported by:
Name Phone Number DOB:
Address: Alcohol Test Given Test Results: Drug Test Given Result Charged Yes No
Transported to: Transported by:

PROPERTY DAMAGE
If Property other than vehicles damaged explain Object Damaged Estimate of Damage
Owner's Last Name First Name Middle Name Phone Number
Address City State Zip Code Was owner or tenant notified? 1 = Yes 2 = No 9 = Unknown

WITNESSES
Last Name First Name Address City State Zip Code Phone Number
Last Name First Name Address City State Zip Code Phone Number
Last Name First Name Address City State Zip Code Phone Number
Last Name First Name Address City State Zip Code Phone Number
Last Name First Name Address City State Zip Code Phone Number

Is This a Secondary Crash? Y N
Type of Primary Incident Roadway Clearance Date 10/06/2022 Incident Clearance Date 10/06/2022
Signature of Officer SERGEANT B LEWIS Badge Number 147 Time Officer Notified of Accident 20:40 Hrs. Roadway Clearance Time 21:10 Hrs. Incident Clearance Time 21:10 Hrs.
Name of Agency IOWA STATE PATROL - DIST 08 Date of Report 10/06/2022 Time Officer Arrived At Scene 20:58 Hrs. Total Roadway Clearance Time 000:30 Total Incident Clearance Time 000:30
Report Reviewed By Date of Review Investigation made at scene? Y N T.I. No. Other Technical Investigating Agency

INVESTIGATING OFFICER'S REPORT
OF MOTOR VEHICLE ACCIDENT

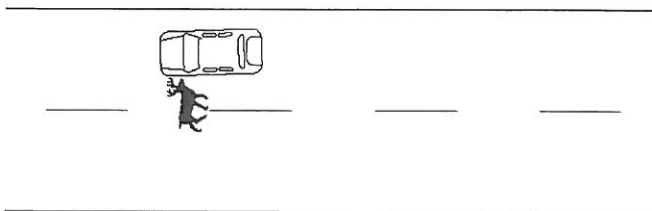
Form 4433003 (11-13)

Law Enforcement Case Number:

2022024743

MAIL REPORTS TO: Iowa Department of Transportation, Office of Driver Services, P.O. Box 9204, Des Moines, Iowa 50306-9204

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Unit one, a fully marked Iowa State Patrol vehicle was traveling west on B20 when a deer entered the roadway and struck unit one.



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: 9508312C
PartsShare: 6Zd7pb
Federal ID: 87-2591068
Resale Number: 1-17-020011
Federal EPA: IAR000007856

Final Bill

RO Number: 23219

Customer: Iowa State Patrol 4425 S Washington Mason City, IA 50401 (111) 111-1111	Insurance: DAS	Adjuster: Phone: Claim: APDSOI0245803-00 1	Estimator: Tyler Lundgren Create Date: 10/7/2022 Loss Date: Deductible:
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2021 DODG Charger Police AWD (Fleet) 4D SED 6-3.6L Gasoline Sequential MPI Granite Crystal

VIN: 2C3CDXKG1MH528642	Interior Color:	Mileage In: 31,342	Vehicle Out: 11/11/2022
License: 343	Exterior Color: Granite Crystal	Mileage Out:	
State: IA	Production Date: 12/2020	Condition:	Job #:

Line	Ver	Operation	Description	Qty	Extended Price \$	Part Type	Labor	Type	Paint
1	E01		Repair Formula: 37/4=9						
2	E01		ADDITIONAL DAYS MAY OCCUR DUE TO SUBLETS & ADDITIONAL PARTS						
3	E01								
4	S01		FRONT BUMPER & GRILLE						
5	S01	Remove/Install	R&I bumper cover - Drop Left Side				1.0	Body	
6	E01		HOOD						
7	E01	Remove/Install	R&I hood assy				0.6	Body	
8	E01	Repair	Hood (ALU)				1.0	Body	3.0
9	E01		Add for Clear Coat						1.2
10	E01		FENDER						
11	E01	Remove/Replace	LT Fender liner 3.6, 5.7 liter	1	139.00	OEM	0.0	Body	
12	E01	Remove/Replace	LT Fender	1	370.00	OEM	1.6	Body	2.0
13	E01		Overlap Major Adj. Panel						(0.4)
14	E01		Add for Clear Coat						0.3
15	E01		Add for Edging						0.5
16	S01	Remove/Install	Spotlight				1.0	Body	
17	S01	Repair	Decal Installtion				0.5	Body	
18	E01		WINDSHIELD						
19	E01	Remove/Replace	Urethane / Glass Kit	1	20.00	Other			
20	E01	Remove/Install	LT Wiper arm				0.0	Body	
21	E01	Remove/Install	RT Wiper arm				0.0	Body	

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: 23219

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

22	S01	Remove/Replace	Windshield NAGS w/o rain sensor, w/o humidity sensor	1	521.80	Glass	3.5	Body	
23	E01		COWL						
24	E01	Remove/Replace	Cowl grille	1	124.00	OEM	0.0	Body	
25	E01		PILLARS, ROCKER & FLOOR						
26	E01	Remove/Install	LT Rocker molding				0.0	Body	
27	E01	Repair	LT Aperture panel w/o wide body				6.0	Body	2.2
28	E01		Overlap Major Adj. Panel						(0.4)
29	E01		Add for Clear Coat						0.4
30	E01	Remove/Install	Upper Light Bar				1.5	Body	
31	E01		FRONT DOOR						
32	E01	Remove/Replace	LT Door shell (HSS)	1	1,005.00	OEM	5.7	Body	3.1
33	E01		Overlap Major Adj. Panel						(0.4)
34	E01		Add for Clear Coat						0.5
35	E01	Remove/Install	LT Applique				0.0	Body	
36	S01	Remove/Replace	LT Frame molding	1	115.00	OEM	0.3	Body	
37	E01	Remove/Install	LT Power mirror w/o heat, w/o memory, w/o blind spot blue				0.0	Body	
38	E01	Remove/Install	LT Handle, outside granite				0.0	Body	
39	E01	Remove/Install	LT R&I trim panel				0.0	Body	
40	S01	Repair	Decal Installation				0.5	Body	
41	S01		REAR DOOR						
42	S01	Remove/Replace	LT Door shell w/o wide body (HSS)	1	1,250.00	OEM	5.7	Body	3.0
43	S01		Overlap Major Adj. Panel						(0.4)
44	S01		Add for Clear Coat						0.5
45	S01	Remove/Replace	LT Frame molding	1	139.00	OEM	0.0	Body	
46	S01	Remove/Install	LT Applique				0.0	Body	
47	S01	Remove/Install	LT Handle, outside black				0.0	Body	
48	S01	Remove/Install	RT R&I trim panel				0.5	Body	
49	E01		BACK GLASS						
50	E01	Repair	Back glass - Rope Glass				0.5	Body	
51	E01		QUARTER PANEL						
52	E01	Blend	LT Quarter panel						1.3
53	E01	Remove/Install	Fuel door				0.3	Body	
54	E01		REAR LAMPS						
55	E01	Remove/Install	LT Tail lamp assy				0.3	Body	
56	E01		REAR BUMPER						
57	E01	Remove/Install	R&I bumper cover				1.2	Body	
58	E01		MISCELLANEOUS OPERATIONS						
59	S01	Remove/Replace	Cover car/bag	1	60.00	A/M	0.2	Body	
60	S01	Remove/Replace	Corrosion Protection	1	30.73	A/M	0.1	Body	
61	E01	Repair	De-Nib & Polish						0.9
62	S01		Fuel Surcharge	1	5.00	A/M			

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: 23219

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

63 S01 Fuel Surcharge 1 1.67 A/M

Estimate Totals	Discount \$	Markup \$	Rate \$	Total Hours	Total \$
Parts					3,781.20
Labor, Body			68.00	32.0	2,176.00
Labor, Refinish			119.00	17.3	2,058.70
E.P.C.					3.00
Subtotal					8,018.90
Sales Tax					0.00
Grand Total					8,018.90
Net Total					8,018.90

Estimate Version	Total \$
Original	4,911.20
Supplement S01	3,107.70

Insurance Total \$:	8,018.90
Received from Insurance \$:	0.00
Balance due from Insurance \$:	8,018.90
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