

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. MIKE. NAIG  
SECRETARY OF AGRICULTURE



## Executive Council of Iowa

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

November 4, 2024

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 an emergency allocation in the amount of \$8,950.66, subject to an audit of actual invoices. On August 25, 2024, Vehicle #105967 was damaged by a deer. Request was to cover repair costs.

EXECUTIVE COUNCIL OF IOWA

Kristi Onstot  
Executive Secretary

cc: Adam Steen, Director, Department of Administrative Services  
DAS Fleet Services, Risk  
Matt Bender, Department of Management  
Heather Hackbarth, Department of Management

AOS Claim # 3905  
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

October 10, 2024

Kristi Onstot  
Executive Council  
L O C A L

Subject: Deer Damage to Vehicle #105967 on August 25, 2024  
Department of Administrative Services  
Claim dated September 6, 2024  
AOS Claim ID: 3905

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 Administrative Services is covered by Chapter 29C.20 of the Code of Iowa. Therefore, we recommend an Executive Council allocation in the amount of \$8,950.66, subject to an audit of actual invoices.

Sincerely,

A handwritten signature in black ink, appearing to read "Brian R. Brustkern".

Brian R. Brustkern, CPA  
Deputy Auditor of State

cc: Adam Steen, Director, Department of Administrative Services  
Mariah Fucaloro, Fleet Services Manager, Department of Administrative Services  
Heather Hackbarth, Department of Management



Department of  
Administrative Services

Empowering People  
Collaboration  
Customer Service

Governor Kim Reynolds  
Lt. Governor Adam Gregg

Adam Steen, Director

Date: September 6, 2024

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

|                          |   |
|--------------------------|---|
| Vehicle / Event          | #105967/Deer  |
| Event Date               | August 25, 2024   |
| Summary                  | Vehicle 105967 struck a deer. (288862)                                |
| Amount Requested         | \$8,950.66 - 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 Fucaloro, Fleet Manager  
DAS Fleet Services  
[mariah.fucaloro@iowa.gov](mailto:mariah.fucaloro@iowa.gov)  
515-414-6582



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

---

**29C20 - 105967**

1 message

---

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

Tue, Aug 27, 2024 at 9:10 AM

To: Tammy Hollingsworth <Tammy.Hollingsworth@aos.iowa.gov>, TOS ExecutiveCouncil <executivecouncil@tos.iowa.gov>

Please accept this email as initial 24 hr notification for AON, vehicle 105967 struck a deer on 8/25/2024. I will forward all information as soon as it is received.

**All accidents must be reported via email or phone to Fleet Services within 24 hours. All accident reports and estimates are due within 72 hours of an accident. Agencies have 60 days to complete repairs to vehicles once approval is given.**

Thank you,

**DAS Risk**

Central Procurement and Fleet Services Enterprise

Iowa Department of Administrative Services

109 SE 13<sup>th</sup> St, Des Moines, IA 50319

515-281-3162 office

[das.risk@iowa.gov](mailto:das.risk@iowa.gov)

<https://das.iowa.gov>



**Department of  
Administrative Services**

## Vehicle Accident Report

### Time and location of accident

|                             |        |                 |
|-----------------------------|--------|-----------------|
| Accident Date (Mo/Day/Year) | Time   | No. of Vehicles |
| 8/25/24                     | 7:06pm | 1               |
| County                      | State  |                 |
| Henry                       | Iowa   |                 |

### Vehicle 1 (State vehicle)

|                            |                          |                        |              |
|----------------------------|--------------------------|------------------------|--------------|
| Driver's Name              |                          | Work Street Address    |              |
| Miranda Haes               |                          | 2282 290th Street      |              |
| Driver's License No./State |                          | City, State, Zip       |              |
| 460YY2263 Iowa             |                          | New London, Iowa 52645 |              |
| Date of Birth              | Department               | Work Phone             | Home Phone   |
| 02/16/1975                 | DNR Water Quality Bureau | 515-204-3485           | 319-651-8628 |
| License Plate No.          | VIN                      | Year, Make, Model      |              |
| 105967                     | 3FA6P0LU8HR12311         | 2017 Ford Fusion       |              |
| Estimate (\$) of Damage    |                          | Description of Damage  |              |
|                            |                          | Collision with deer    |              |

### Vehicle 2 (other vehicle) if more than two vehicles-use additional forms

|                            |            |                  |                   |
|----------------------------|------------|------------------|-------------------|
| Driver's Name              |            | Street Address   |                   |
| NA - no other driver       |            |                  |                   |
| Driver's License No./State |            | City, State, Zip |                   |
|                            |            |                  |                   |
| Date of Birth              | Work Phone | Home Phone       | License Plate No. |
|                            |            |                  |                   |
| Description of Damage      |            |                  |                   |
|                            |            |                  |                   |

**Property Damage other than vehicle (fence, utility pole, etc)**

| Owner's Name, Address and Phone | Description of Property Damaged |
|---------------------------------|---------------------------------|
|                                 |                                 |

**Injured Persons (attach additional sheets if necessary)**

| Vehicle No. 1/ Name and Address | Describe Injuries |
|---------------------------------|-------------------|
|                                 |                   |
| Vehicle No. 2/ Name and Address | Describe Injuries |
|                                 |                   |

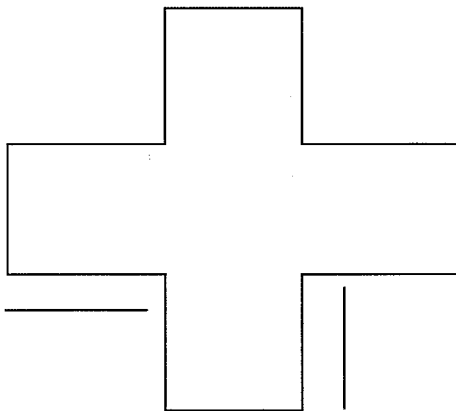
**Witness**

| Name | Address/Phone |
|------|---------------|
|      |               |
| Name | Address/Phone |
|      |               |

**Accident Diagram**

**Complete diagram below, include a description of what happened.**  
Use the outline below to sketch the scene of your accident,  
writing in street or highway names or numbers.  
Use number 1 to indicate the State vehicle.

See attached police report



## Accident Information Exchange Sheet

### Other Vehicle information

Driver's Name

Street Address

Driver Phone

Driver's License No./State

Vehicle Plate No.

Vehicle year, make, model

VIN

Insurance Company Name

Policy No.

Agent name

Agent phone

Owner's Name/Address (if different)

Submit this information along with the accident report to DAS Fleet Service within 72 hours of the accident.

**Complete the next section, tear at the dotted line and give to the other party involved.**

-----

### State Vehicle Insurance Information

Driver's Name

Driver's License No./State

Vehicle Plate No.

Vehicle year, make, model

VIN

The State of Iowa is self-insured.  
If you have any questions regarding an accident, please contact  
DAS Fleet Services at 515-281-3162 of [DAS.Risk@iowa.gov](mailto:DAS.Risk@iowa.gov)

INVESTIGATING OFFICER'S REPORT OF MOTOR VEHICLE ACCIDENT

Form Number: 24015031

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

Main form containing accident details, driver information, vehicle details, and witness information. Includes sections for Unit 1, Commercial, and Personal Injured.



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

Form Number: 24015031

LOCATIONS: Date of Accident 08/25/2024, Time of Accident 19:06 Hrs., County HENRY - 44, Accident occurred within corporate limits of (city) MOUNT PLEASANT - 5292, Legal Intervention? [ ], Private Property? [ ], Literal Description MARSH AVE, County: 44, Route: 44, X Coordinate: 627417.75, Y Coordinate: 4529206, Milepost Number, Definable intersection, bridge, or railroad crossing

ACCIDENT ENVIRONMENT: Location of First Harmful Event, Weather Conditions (up to two), Manner of Crash/Collision 01, Light Conditions, Surface Conditions, ROADWAY CHARACTERISTICS: Major Contributing Circumstances Environment 06, Roadway, Type of Roadway Junction/Feature, FRA No.

First Harmful Event (Crash) 31, WORKZONE RELATED? [ ], Yes [ ], No [ ], Activity, Location, Type, Workers Present, Sex, Struck by Unit No., Injury Status, Non-Motorist Type, Location (prec. to impact), Action (prior to crash), Condition, Safety Equipment, Contributing Circumstances, Source of Transport, Died at scene/enroute

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:

NPORNOVEEHRITCYULDAMRG: 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 0 = Unknown

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 0 = 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 [X], Type of Primary Incident, Roadway Clearance Date 08/25/2024, Incident Clearance Date 08/25/2024

Signature of Officer DEPUTY CASSANDRA KRAFT, Badge Number 44-7, Time Officer Notified of Accident 19:06 Hrs., Roadway Clearance Time 19:23 Hrs., Incident Clearance Time 19:45 Hrs.

Name of Agency HENRY COUNTY SHERIFF'S OFFICE, Date of Report 08/25/2024, Time Officer Arrived At Scene 19:16 Hrs., Total Roadway Clearance Time 00:17, Total Incident Clearance Time 00:39

Report Reviewed By, Date of Review, Investigation made at scene? Y [X] N [ ], T.I. No., Other Technical Investigating Agency

INVESTIGATING OFFICER'S REPORT  
OF MOTOR VEHICLE ACCIDENT

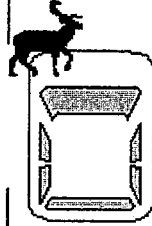
Form 4433003 (11-13)

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

Form Number: 24015031

D  
I  
A  
G  
R  
A  
M

2700 grid Marsh Avenue

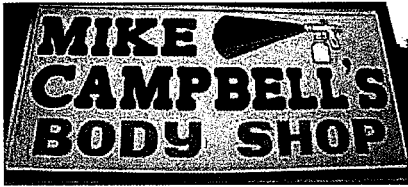


N  
A  
R  
R  
A  
T  
I  
V  
E

August 25th, 2024, I, Henry County Deputy Cassandra Kraft, responded to a car vs deer accident in the 2700 grid of Marsh Avenue.

After investigation it was made clear the driver of Unit 1 was traveling north when a deer entered the roadway. Unit 1 collided with the deer. There was damage to the front of the vehicle. The approximate cost to repair the damages to the vehicle is \$1,500.

There were no injuries.



**MIKE CAMPBELL'S BODY SHOP**

223 Angular St, BURLINGTON, IA 52601  
Phone: (319) 752-5225

Workfile ID: ea333b31  
PartsShare: 876RmD  
Federal ID: 42-1434236

**Preliminary Estimate**

**Customer: State of Iowa**

**Job Number:**

Insured: State of Iowa  
Type of Loss:  
Point of Impact:

Policy #:  
Date of Loss:

Claim #:  
Days to Repair: 0

**Owner:**

State of Iowa  
550 S Gear St  
West Burlington, IA 52655  
(319) 753-2231 Business

**Inspection Location:**

MIKE CAMPBELL'S BODY SHOP  
223 Angular St  
BURLINGTON, IA 52601  
Repair Facility  
(319) 752-5225 Business

**Insurance Company:**

**VEHICLE**

2017 FORD Fusion Hybrid SE FWD 4D SED 4-2.0L Hybrid Sequential MPI WHITE

VIN: 3FA6P0LU8HR123311  
License: 105967  
State: IA

Interior Color:  
Exterior Color: WHITE  
Production Date: 5/2016

Mileage In: 77,762  
Mileage Out:  
Condition:

Vehicle Out:  
Job #:

**TRANSMISSION**

Automatic Transmission

**POWER**

Power Steering  
Power Brakes  
Power Windows  
Power Locks  
Power Mirrors  
Power Driver Seat  
Power Passenger Seat

**DECOR**

Dual Mirrors  
Tinted Glass  
Console/Storage

Overhead Console

**CONVENIENCE**

Air Conditioning  
Intermittent Wipers  
Tilt Wheel  
Cruise Control  
Rear Defogger  
Keyless Entry  
Alarm  
Message Center  
Steering Wheel Touch Controls  
Telescopic Wheel  
Climate Control  
Backup Camera

**RADIO**

AM Radio  
FM Radio  
Stereo  
Search/Seek  
CD Player  
Satellite Radio  
**SAFETY**  
Drivers Side Air Bag  
Passenger Air Bag  
Anti-Lock Brakes (4)  
4 Wheel Disc Brakes  
Front Side Impact Air Bags  
Head/Curtain Air Bags

Hands Free Device

**SEATS**

Cloth Seats  
Bucket Seats  
Reclining/Lounge Seats

**WHEELS**

Aluminum/Alloy Wheels

**PAINT**

Clear Coat Paint

**OTHER**

Traction Control  
Stability Control  
California Emissions

Get live updates at [www.carwise.com/e/4Smxkr](http://www.carwise.com/e/4Smxkr)

**Preliminary Estimate**

**Customer: State of Iowa**

**Job Number:**

2017 FORD Fusion Hybrid SE FWD 4D SED 4-2.0L Hybrid Sequential MPI WHITE

| Line | Oper  | Description   | Part Number    | Qty | Extended Price \$ | Labor        | Paint |
|------|-------|---|----------------|-----|-------------------|--------------|-------|
| 1    |       | <b>INFORMATION LABELS</b>                                     |                |     |                   |              |       |
| 2    | *     | Repl <u>Emissoin Label (underhood)</u><br>-10%                | see dealer     | 1   | <u>24.08</u>      | 0.2          |       |
| 3    |       | <b>FRONT BUMPER &amp; GRILLE</b>                              |                |     |                   |              |       |
| 4    |       | O/H front bumper  |                |     |                   | 2.7          |       |
| 5    | ** <> | Repl A/M CAPA Bumper cover w/o<br>auto park w/o tow hook -10% | HS7Z17D957APTM | 1   | <u>808.20</u>     | Incl.        | 3.0   |
| 6    |       | Add for Clear Coat  |                |     |                   |              | 1.2   |
| 7    | *     | Repl LT Side retainer -10%                                    | HS7Z17C947AB   | 1   | <u>9.05</u>       | Incl.        |       |
| 8    | *     | R&I Emblem  |                |     |                   | <u>Incl.</u> |       |
| 9    |       | R&I License bracket   |                |     |                   | 0.2          |       |
| 10   |       | R&I Impact bar w/o tow hook                                   |                |     |                   | 1.1          |       |
| 11   | **    | Repl A/M CAPA Upper grille chrome<br>-10%                     | HS7Z8200AA     | 1   | <u>540.90</u>     | Incl.        |       |
| 12   |       | <b>FRONT LAMPS</b>  |                |     |                   |              |       |
| 13   | **    | Repl A/M CAPA LT Headlamp assy<br>w/signature lamps -10%      | HS7Z13008H     | 1   | <u>1,089.90</u>   | Incl.        |       |
| 14   |       | Aim headlamps   |                |     |                   | 0.5          |       |
| 15   |       | R&I RT Headlamp assy w/signature<br>lamps                     |                |     |                   | Incl.        |       |
| 16   | *     | Repl LT Headlamp assy mount bracket<br>-10%                   | HS7Z13A005B    | 1   | <u>10.28</u>      | Incl.        |       |
| 17   |       | <b>RADIATOR SUPPORT</b>                                       |                |     |                   |              |       |
| 18   | *     | Repl Shutter assembly -10%                                    | HS7Z8475C      | 1   | <u>408.18</u> m   | Incl.        |       |
| 19   | **    | Repl A/M CAPA Mount panel Flat Rock<br>plant -10%             | HS7Z16138A     | 1   | <u>227.70</u>     | 2.1          |       |
| 20   | **    | Repl A/M CAPA Upper tie bar -10%                              | HP5Z8A284B     | 1   | <u>256.50</u>     | 1.2          | 0.8   |
| 21   |       | R&I Sight shield  |                |     |                   | 0.2          |       |
| 22   |       | <b>HOOD</b>   |                |     |                   |              |       |
| 23   | **    | Repl A/M CAPA Hood (ALU) -10%                                 | DS7Z16612B     | 1   | <u>772.20</u>     | 1.7          | 2.8   |
| 24   |       | Overlap Major Non-Adj. Panel                                  |                |     |                   |              | -0.2  |
| 25   |       | Add for Clear Coat  |                |     |                   |              | 0.5   |
| 26   |       | Add for Underside(Complete)                                   |                |     |                   |              | 1.4   |
| 27   | *     | Repl LT Lower bumper side -10%                                | DS7Z16758B     | 1   | <u>8.30</u>       | Incl.        |       |
| 28   | *     | Repl LT Bumper bracket -10%                                   | KS7Z16758A     | 1   | <u>8.08</u>       | Incl.        |       |
| 29   | **    | Repl A/M RT Hinge -10%  | DS7Z16796A     | 1   | <u>30.60</u>      | 0.9          | 0.4   |
| 30   |       | Add for Clear Coat  |                |     |                   |              | 0.1   |
| 31   | **    | Repl A/M LT Hinge -10%  | DS7Z16797A     | 1   | <u>32.40</u>      | 0.9          | 0.4   |
| 32   |       | Add for Clear Coat  |                |     |                   |              | 0.1   |
| 33   |       | <b>FENDER</b>   |                |     |                   |              |       |
| 34   |       | R&I RT Fender liner w/o turbo w/2.0<br>liter DOHC             |                |     |                   | 0.3          |       |
| 35   | *     | Rpr RT Fender   |                |     |                   | <u>2.5</u>   | 2.0   |
| 36   |       | Overlap Major Adj. Panel                                      |                |     |                   |              | -0.4  |

**Preliminary Estimate**

**Customer: State of Iowa**

**Job Number:**

2017 FORD Fusion Hybrid SE FWD 4D SED 4-2.0L Hybrid Sequential MPI WHITE

|       |    |  |               |   |                  |                 |             |             |
|-------|----|--|---------------|---|------------------|-----------------|-------------|-------------|
| 37    |    | Add for Clear Coat                       |               |   |                  |                 | 0.3         |             |
| 38    |    | Add for Edging                           |               |   |                  |                 | 0.5         |             |
| 39    | ** | Repl A/M CAPA LT Fender -10%             | HS7Z16006A    | 1 | <u>341.10</u>    | 1.6             | 2.0         |             |
| 40    |    | Overlap Major Adj. Panel                 |               |   |                  |                 | -0.4        |             |
| 41    |    | Add for Clear Coat                       |               |   |                  |                 | 0.3         |             |
| 42    |    | Add for Edging                           |               |   |                  |                 | 0.5         |             |
| 43    |    | Deduct for Overlap                       |               |   |                  | -0.3            |             |             |
| 44    |    | Deduct for Overlap                       |               |   |                  | -0.5            |             |             |
| 45    |    | R&I RT Upper molding bright/black        |               |   |                  |                 | 0.2         |             |
| 46    | *  | Repl LT Upper molding bright/black -10%  | ES7Z16003DA   | 1 | <u>30.39</u>     | Incl.           |             |             |
| <hr/> |    |  |               |   |                  |                 |             |             |
| 47    |    | <b>PILLARS, ROCKER &amp; FLOOR</b>       |               |   |                  |                 |             |             |
| 48    |    | R&I RT Rocker molding                    |               |   |                  | 0.7             |             |             |
| 49    |    | R&I LT Rocker molding                    |               |   |                  | 0.7             |             |             |
| 50    | *  | Rpr RT Aperture panel                    |               |   |                  | s <u>1.0</u>    | <u>2.0</u>  |             |
| 51    |    | Overlap Major Adj. Panel                 |               |   |                  |                 | -0.4        |             |
| 52    | *  | Add for Clear Coat                       |               |   |                  |                 | 0.3         |             |
| 53    | *  | Rpr LT Aperture panel                    |               |   |                  | s <u>3.0</u>    | <u>2.0</u>  |             |
| 54    |    | Overlap Major Adj. Panel                 |               |   |                  |                 | -0.4        |             |
| 55    | *  | Add for Clear Coat                       |               |   |                  |                 | 0.3         |             |
| <hr/> |    |  |               |   |                  |                 |             |             |
| 56    |    | <b>FRONT DOOR</b>                        |               |   |                  |                 |             |             |
| 57    | *  | Blnd LT Door shell                       |               |   |                  |                 | <u>1.5</u>  |             |
| 58    |    | R&I LT Belt molding                      |               |   |                  | 0.3             |             |             |
| 59    | *  | Repl LT Nameplate "HYBRID" -10%          | DS7Z9942528G  | 1 | <u>16.80</u>     | 0.2             |             |             |
| 60    | *  | R&I LT Mirror assy w/o blind spot        |               |   |                  |                 | <u>0.5</u>  |             |
| 61    |    | R&I LT Handle, outside w/o passive entry |               |   |                  | 0.3             |             |             |
| 62    |    | R&I LT R&I trim panel                    |               |   |                  | 0.5             |             |             |
| <hr/> |    |  |               |   |                  |                 |             |             |
| 63    |    | <b>VEHICLE DIAGNOSTICS</b>               |               |   |                  |                 |             |             |
| 64    | *  | Pre-repair scan                          |               | 1 |                  | m <u>0.5</u>    | M           |             |
| 65    | *  | Post-repair scan                         |               | 1 |                  | m <u>0.5</u>    | M           |             |
| <hr/> |    |  |               |   |                  |                 |             |             |
| 66    |    | <b>MISCELLANEOUS OPERATIONS</b>          |               |   |                  |                 |             |             |
| 67    | *  | Repl Cover car/bag                       |               | 1 | <u>10.00</u>     | 0.2             |             |             |
| 68    | #  | Subl Hazardous waste removal             |               | 1 | 3.00             | T               |             |             |
| 69    | #  | Repl Flex additive                       |               | 1 | 8.00             | T               |             |             |
| 70    | #  | Repl Corrosion protection primer         |               | 1 | 10.00            | T               |             |             |
| 71    |    |  | OTHER CHARGES |   |                  |                 |             |             |
| 72    | #  |  | Towing        | 1 | 145.00           |                 |             |             |
|       |    |  |               |   | <b>SUBTOTALS</b> | <b>4,790.66</b> | <b>23.9</b> | <b>20.6</b> |

Preliminary Estimate

Customer: State of Iowa

Job Number:

2017 FORD Fusion Hybrid SE FWD 4D SED 4-2.0L Hybrid Sequential MPI WHITE

**ESTIMATE TOTALS**

| Category           | Basis      | Rate          | Cost \$         |
|--------------------|------------|---------------|-----------------|
| Parts              |            |               | 4,624.66        |
| Body Labor         | 22.9 hrs @ | \$ 70.00 /hr  | 1,603.00        |
| Paint Labor        | 20.6 hrs @ | \$ 120.00 /hr | 2,472.00        |
| Mechanical Labor   | 1.0 hrs @  | \$ 85.00 /hr  | 85.00           |
| Miscellaneous      |            |               | 21.00           |
| Other Charges      |            |               | 145.00          |
| Subtotal           |            |               | 8,950.66        |
| <b>Grand Total</b> |            |               | <b>8,950.66</b> |

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF AFTERMARKET CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. ANY WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THESE PARTS RATHER THAN THE MANUFACTURER OF YOUR VEHICLE.

## Preliminary Estimate

**Customer: State of Iowa**

**Job Number:**

2017 FORD Fusion Hybrid SE FWD 4D SED 4-2.0L Hybrid Sequential MPI WHITE

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide DR2JP13, CCC Data Date 08/16/2024, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (\*) or Double Asterisk (\*\*) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2024 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

### SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

### SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

### OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. CFC=Carbon Fiber. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. STS=Stainless Steel. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

Preliminary Estimate

Customer: State of Iowa

Job Number:

2017 FORD Fusion Hybrid SE FWD 4D SED 4-2.0L Hybrid Sequential MPI WHITE

PARTS SUPPLIER LIST

| Line | Supplier  | Description  | Price       |
|------|---|--|-------------|
| 5    | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO1000718C<br>A/M CAPA Bumper cover w/o auto park w/o tow hook -10%<br>Quote: 2639664468<br>Expires: 10/14/24 | \$ 808.20   |
| 11   | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO1200598PP<br>A/M CAPA Upper grille chrome -10%<br>Quote: 2639666672<br>Expires: 10/14/24                    | \$ 540.90   |
| 13   | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO2502350C<br>A/M CAPA LT Headlamp assy w/signature lamps -10%<br>Quote: 2639670424<br>Expires: 10/14/24      | \$ 1,089.90 |
| 19   | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO1225239PP<br>A/M CAPA Mount panel Flat Rock plant -10%<br>Quote: 2639671722<br>Expires: 10/14/24            | \$ 227.70   |
| 20   | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO1225247PP<br>A/M CAPA Upper tie bar -10%<br>Quote: 2639671974<br>Expires: 10/14/24                          | \$ 256.50   |
| 23   | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO1230301PP<br>A/M CAPA Hood (ALU) -10%<br>Quote: 2639673287<br>Expires: 10/14/24                             | \$ 772.20   |
| 29   | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO1236157<br>A/M RT Hinge -10%<br>Quote: 2639674628<br>Expires: 10/14/24                                      | \$ 30.60    |
| 31   | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO1236156<br>A/M LT Hinge -10%<br>Quote: 2639674832<br>Expires: 10/14/24                                      | \$ 32.40    |
| 39   | Keystone, Inc<br>110 THUNDERBIRD LANE<br>EAST PEORIA IL 61611<br>(309) 698-0700 | #FO1240305PP<br>A/M CAPA LT Fender -10%<br>Quote: 2639678276<br>Expires: 10/14/24                              | \$ 341.10   |