

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
FAX: 515 281-7562

February 5, 2024

Mr. Leif Olson
Chief Deputy Attorney General
Iowa Attorney General
Hoover Bldg., 2nd Floor
L O C A L

Re: Approval of Iowa Code § 7D.10 Expenses

Dear Mr. Olson,

The Executive Council, in a meeting held this date, approved your request for payment pursuant to Iowa Code § 7D.10 for payment of expenses incurred in prosecuting civil commitments under Iowa Code chapter 229A for the Sexually Violent Predator (SVP) program, in the amount of \$30,965.22.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: Accounting, State Treasurer's Office

BRENNA BIRD
ATTORNEY GENERAL

LEIF OLSON
CHIEF DEPUTY ATTORNEY GENERAL



1305 E. WALNUT ST.
DES MOINES, IA 50319
Main: 515-281-5164 • Direct: 515-954-9564
Email: leif.olson@ag.iowa.gov
www.iowaattorneygeneral.gov

IOWA DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

January 29, 2024

Victoria Newton
Executive Secretary
Executive Council
State Capitol
L O C A L

Re: Request for Payment of SVP Court Costs

Dear Victoria:

Our Office requests Executive Council approval for payment under Iowa Code section 7D.10 for court costs and expenses incurred in prosecuting civil commitments under Iowa Code chapter 229A for the Sexually Violent Predator (SVP) program.

In addition to the cost of employee salaries, travel and support devoted to this program, the Office incurs substantial expenses for expert witnesses. These expenses have increased substantially due to the growing number of chapter 229A commitments. Section 7D.10 authorizes payment of court costs and expenses by the Executive Council “[i]f sufficient funds for court costs have not been appropriated to a state department, or if sufficient funds are not otherwise available for such purposes within the budget of a state department.” There is no specific appropriation for these expenses and sufficient funds are not otherwise available.

Therefore, under Iowa Code section 7D.10, the Office requests Executive Council approval of payment of \$30,965.22 for record review/report preparation (invoices enclosed).

Sincerely,

Leif Olson
Chief Deputy Attorney General

SVP Invoices - SFY 2024 (01/11/2024)

Date Received	Vendor	Description	Amount	Paid by Executive Council	Approval Date
1/11/24	Eric Jensen, Ph.D.	Trial prep/testimony 1/9/24 - Steiger	\$2,400.00		
1/11/24	Eric Jensen, Ph.D.	Initial Report - Ratliff	\$3,200.00		
12/30/23	Fierce Compassion, LLC	Final eval - Briles	\$4,000.00		
12/22/23	Barry Leavitt, Psy.D.	Final eval - Freeman	\$4,000.00		
12/27/23	William Schmitt, Ph.D.	Final eval and report - Axtell	\$4,000.00		
1/2/24	Rachel Kahn, Ph.D.	Trial expenses - Rodriguez	\$565.22		
12/22/23	Eric Jensen, Ph.D.	Full Report - Steiger	\$4,000.00		
12/19/23	Eric Jensen, Ph.D.	Trial Prep/testimony - Wilson	\$2,400.00		
12/18/23	Fierce Compassion, LLC	Prelim eval - Ratliff	\$3,200.00		
12/18/23	William Schmitt, Ph.D.	Initial Eval/Preliminary Report - Smith	\$3,200.00		
			\$30,965.22	\$0.00	

Eric Jensen, Ph.D.
81 Kimball Terrace
Shelburne, VT 05482

ebjensen@comcast.net
Phone 352-214-2039

INVOICE

INVOICE # 1183
DATE: JANUARY 11, 2024

TO:

Olivia McAtee
Inv. II SVP
Office of Iowa Attorney General
1305 E. Walnut St
Des Moines, IA 50319

REGARDING:

SVP Respondent: Johnnie Steiger
ID# 0208299

DESCRIPTION	HOURS	RATE	AMOUNT
Trial prep/testimony 1/9/24		Flat fee service	\$2400.00
<i>Approved Julia Palmer</i> <i>Date 1/11/24 Amt 2400.00</i> <i>Agency SVP Expense - Steiger</i> <i>Class _____ Obj _____ Org _____</i> <i>00003100238</i>			
Tax ID#008408740		TOTAL	\$2400.00

Eric Jensen, Ph.D.
81 Kimball Terrace
Shelburne, VT 05482

ebjensen@comcast.net
Phone 352-214-2039

INVOICE

INVOICE # 1181
DATE: JANUARY 11, 2024

TO:

Olivia McAtee
Inv. II SVP
Office of Iowa Attorney General
1305 E. Walnut St
Des Moines, IA 50319

REGARDING:

SVP Respondent: J. Ratliff
ID # 6776755

DESCRIPTION	HOURS	RATE	AMOUNT
Initial Report		Flat fee service	\$3200.00

Approved: *Jana Palmer*
Date: *1-11-24* / *3200.00*
Agency: *SVP Expense - Ratliff*
Class: _____ Obj: _____ Org: _____
00003100238

Fierce Compassion, LLC

Scott J. Woodley, Ph.D.
302 Country Club Dr.
Lake Geneva, WI 53147

Invoice

Date	Invoice #
12/30/2023	259

Bill To
Iowa Department of Justice ATTN: Olivia McAtee 1305 E. Walnut St. Des Moines, Iowa 50319

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
1	Final Evaluation on Dennis Briles (12/30/2023)	4,000.00	4,000.00
Total			\$4,000.00

Approved Jana Palmer
Date 1-11-24 Am 4000.00
Agency SUP Expense - Briles
Class _____ Obj _____ Org _____
0000 3213186

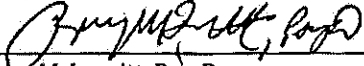
Barry M. Leavitt, Psy.D.
 Barry M. Leavitt, Psy.D. & Associates, LLC
 1500 Skokie Boulevard, Suite 315
 Northbrook, IL 60062
 (847) 849-5553
 Fax: (847) 849-5554
barrymleavitt@comcast.net

INVOICE FOR FORENSIC PSYCHOLOGICAL SERVICES

Date: December 22, 2023

For Professional Services: Barry M. Leavitt, Psy. D.	Fee:
RE: Trey Freeman IaDOC# 6944688	
12/21/2023 Final Evaluation	\$4,000.
Total:	\$4000.00

Please make checks payable to:
 Dr. Barry M. Leavitt
 Barry M. Leavitt, Psy. D. and Associates, LLC



 Barry M. Leavitt, Psy. D. Date 12/22/2023
 Illinois Licensed Psychologist
 Illinois Licensed Sex Offender Evaluator and Sex Offender Treatment Provider

Approved Jana Palmer
 Date 1-11-24 Amt 4000.00
 Agency SVP Expense - Freeman
 Class _____ Obj _____ Org _____
00002097550

William A. Schmitt, Ph.D., LLC
Licensed Psychologist

PO Box 930376
Verona, WI 53593
(608) 698-2713
wschmitt55@gmail.com

INVOICE
Final Evaluation for Iowa §229A

Re: Raymond Axtell
DOB: October 16, 1961

Evaluator: William A. Schmitt, PhD
Date: December 27, 2023

Final Evaluation and Report was completed and submitted December 27, 2023.

Contracted fee for services rendered:

\$4000.00

Thank you for this interesting referral.



William A. Schmitt, Ph.D.
Licensed Psychologist

Approved Jana Palmer
Date 1-11-24 Amt 4000.00
Agency SVP Expense - Axtell
Class _____ Obj _____ Org _____

00003101313

Rachel Kahn. Ph.D.

INVOICE

P.O. Box 6491
Monona, WI 53716-0491
USA
Phone: 608-620-3067

DATE: JANUARY 2, 2024

To:
Iowa Office of the Attorney General
c/o Olivia McAtee
Area Prosecutions Division
Hoover Building
1305 E. Walnut Street
Des Moines, IA 50319

Description	Amount
Trial Expenses Christopher Morales Rodriguez Engagement Letter: 06/15/2022 Trial Testimony: 08/17/2023 Dates of Travel 8/16/2023 – 8/17/2023 Car Rental AVIS Hotel – Kings Point <u>Meal Per Diem</u> 8/16 – Lunch & Dinner 8/17 – Breakfast, Lunch, & Dinner	 \$442.02 \$123.20 ??? ???
Total	565.22

Approved Jana Palmer
Date 1-11-24 Amt 565.22
Agency SUP EXPENSE - Rodriguez
Class _____ Obj _____ Org _____
00003192796

Payment should made out to Rachel Kahn and mailed to Rachel Kahn, P.O. Box 6491, Monona, WI 53716-0491

Rachel Kahn, Ph.D.
Licensed Psychologist



We are proud to feature a 100% smoke-free fleet!

RENTAL AGREEMENT NUMBER: 533712922

RECEIPT

Your Information

Customer Name: RACHEL KAHN
Avis Worldwide Discount: EXPEDIA MOBILE
Method of Payment: VISA XX6094
AUTH: 07522D

Your Vehicle Information

Vehicle Number: 15099744
Vehicle Group Rented: Intermediate SUV
Vehicle Group Charged: Intermediate
Vehicle Description: BLK FORD ESCAPE 4WD
License Plate Number: WI19000AFT
Odometer Out: 28894
Odometer In: 29598
Total Driven: 704
Fuel Reading: Out 16.4 Gall In 7.1 Gal

Your Rental

Pickup Date/Time: AUG 16, 2023 @ 8:14 AM
Pickup Location: 4000 INTERNATIONAL LANE
DANE COUNTY REGIONAL AIRPORT
MADISON, WI, 53704, US
608-242-0600

Return Date/Time: AUG 17, 2023 @ 8:02 PM
Return Location: 4000 INTERNATIONAL LANE
DANE COUNTY REGIONAL AIRPORT
MADISON, WI, 53704, US
608-242-0600

Additional fees may apply if changes are made to your return date, time and/or location.

Your Vehicle Charges (MIN 1 DAY IF NOT MET DLY RT = 102.00 / MAX 98 HRS)

Table with columns: Rate Chart, Free Miles, Time and Mileage. Includes rows for Miles (UNLIMITED), Hourly (25.51), Ad'l day (102.00), Period (204.00), and Your Discount (204.00).

Your Optional Products/Services

Table with columns: Product/Service, Price, Status. Includes Loss Damage Waiver (29.99, Accepted), Fuel Service = (16.4 Gal Out- 07.1 Gal In) (3.590/GAL), and Optional Services Total (93.98).

Your Taxable Fees

Table with columns: Fee Description, Amount. Includes 11.11% Concession Recovery Fee (40.53), PARKING RECOVERY SURCH (6.50), VEH LICENSE RECOUP (2.00), ENERGY RECOVERY FEE (2.00), Optional Services Total Taxable (93.98), Sub-total-Charges (349.01), and TAX 5.500% (19.20).

Your Non-Taxable Products/Services

Table with columns: Product/Service, Amount. Includes * 5% FEE (17.45) and GAS SVC OPTION (56.36).

Summary table with columns: Description, Amount. Includes Your Total Charges (442.02) and Prepayment (0.00).

Summary table with columns: Description, Amount. Includes Net Charges (USD 442.02) and Your Total Due (0.00).

Thank you for renting with Avis. For all other inquiries, please contact us at 1-800-352-7900 or www.Avis.com. At Avis, we are committed to providing you with the best rental experience in the industry. We are in the business of treating people like people. Thank you for renting with AVIS. To enroll in AVIS preferred and to enroll in the AVIS loyalty program, please visit avis.com for more information. Your vehicle was rented to you by ANASTHASIA. Your vehicle was checked in by SAGE.



1520 East Lakeshore Drive, Storm Lake, IA 50588 US
 Phone: 712-213-4500 Fax: www.kingspointeresort.com

Reservation Number 64736

Send to Rachel Kahn
 501 Acacia Ln
 Madison, WI 53716

Phone 217-621-5944

Guest Name Rachel Kahn **Arrival Date** 8/16/23 **Departure Date** 8/17/23

Room Information 101 - Standard Double Queen North

Folio Number 63438

Trans Date	Description	Voucher	Amount
Charges			
8/16/23	Room - Government	kpr-101	110.00
8/16/23	State Sales Tax - 7%	kpr-101	7.70
8/16/23	State Occupancy Tax	kpr-101	5.50
	Subtotal		123.20
	Total Charges		123.20
Payments			
8/17/23	Visa	#####6094 05465D 101 0000035029	-123.20
	Subtotal		-123.20
	Total Payments		-123.20
		Balance Due:	0.00

Eric Jensen, Ph.D.
81 Kimball Terrace
Shelburne, VT 05482

ebjensen@comcast.net
Phone 352-214-2039

INVOICE

INVOICE # 1181
DATE: DECEMBER 22, 2023

TO:

Olivia McAtee
Inv. II SVP
Office of Iowa Attorney General
1305 E. Walnut St
Des Moines, IA 50319

REGARDING:

SVP Respondent: Johnnie Steiger
DOB:

DESCRIPTION	HOURS	RATE	AMOUNT
Full Report		Flat fee service	\$4000.00
<p>Approved <u>Jana Palmer</u> Date <u>1-11-24</u> Amt <u>4000.00</u> Agency <u>SVP Expense-Steiger</u> Class _____ Obj _____ Org _____ <u>0000 3100238</u></p>			
TOTAL			\$4000.00

Tax ID#008408740

Eric Jensen, Ph.D.
81 Kimball Terrace
Shelburne, VT 05482

ebjensen@comcast.net
Phone 352-214-2039

INVOICE

INVOICE # 1183
DATE: DECEMBER 19, 2023

TO:

Olivia McAtee
Inv. II SVP
Office of Iowa Attorney General
1305 E. Walnut St
Des Moines, IA 50319

REGARDING:

SVP Respondent: David Wilson
DOB: 7/2/78

DESCRIPTION	HOURS	RATE	AMOUNT
Trial prep/testimony 12/13-12/14/23		Flat fee service	\$2400.00
<p>Approved <u>Jana Palmer</u> Date <u>1-11-24</u> Amt <u>2400.00</u> Agency <u>SVP Expense - Wilson</u> Class _____ Obj _____ Org _____ <u>00003100238</u></p>			
TOTAL			\$2400.00

Tax ID#008408740

Fierce Compassion, LLC

Scott J. Woodley, Ph.D.
302 Country Club Dr.
Lake Geneva, WI 53147

Invoice

Date	Invoice #
12/18/2023	258

Bill To
Iowa Department of Justice ATTN: Olivia McAtee 1305 E. Walnut St. Des Moines, Iowa 50319

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
1	Preliminary 229A evaluation on Jeffrey Ratliff	3,200.00	3,200.00
<p>Approved <i>Tina Palmer</i> Date <i>1-11-24</i> Amt <i>3200.00</i> Agency <i>SVP Expense - Ratliff</i> Class _____ Obj _____ Org _____ <i>0000 3213186</i></p>			
Total			\$3,200.00

William A. Schmitt, Ph.D., LLC
Licensed Psychologist

PO Box 930376
Verona, WI 53593
(608) 698-2713
wschmitt55@gmail.com

INVOICE
Preliminary Evaluation for Iowa §229A

Re: **Joseph "Josie" Smith**
DOB: October 8, 1996

Evaluator: William A. Schmitt, PhD
Date: December 18, 2023

- Initial Evaluation/Preliminary Report was completed and submitted December 18, 2023.

Contracted fee for services rendered: \$3200.

Thank you for this interesting referral.



William A. Schmitt, Ph.D.
Licensed Psychologist

Approved Jana Palmer
Date 1-11-24 Amt 3200.00
Agency SVP Expense - Smith
Class _____ Obj _____ Org _____

0600 3101313