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

July 1, 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 \$4,722.34, subject to the audit of actual invoices. On May 3, 2024, Vehicle #1546 was damaged by a deer. Request was to cover repair costs.

This represents full and final payment.

EXECUTIVE COUNCIL OF IOWA

Kristi Onstot

Kristi Onstot Executive Secretary

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

TOR OF STATE OF 10

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

May 21, 2024

Kristi Onstot Executive Council L O C A L

Subject: Deer Damage to Vehicle #1546 on May 3, 2024

Department of Administrative Services

Claim dated May 9, 2024 AOS Claim ID: 3745

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. The Department requested an allocation of \$5,052.90; however, the estimate from the vendor includes sales tax of \$330.56. This amount will be deducted from the Department's request. Therefore, we recommend an Executive Council allocation in the amount of \$4,722.34, subject to an audit of actual invoices.

Sincerely,

Brian R. Brustkern, CPA Deputy Auditor of State

Bri R. Bris

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





Date: May 9, 2024

To: Tammy Hollingsworth, Auditor of State

Victoria Newton, Treasurer of State

Executive Council

From: Karl Bubser, Fleet Administrator

DAS Fleet Services

Department of Administrative Services

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

Vehicle / Event	#1546/Animal
Event Date	May 3, 2024
Summary	Vehicle 1546 struck a deer. (280347)
Amount Requested	\$5,052.90 - 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,

Karl Bubser, Fleet Administrator

DAS Fleet Services Karl.Bubser@iowa.gov

515-281-3162



29C20

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

Fri, May 3, 2024 at 1:51 PM

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

Please accept this email as initial 24 hr notification for AON, vehicle 1546 struck a deer on 5/3/24. 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 13th St, Des Moines, IA 50319

515-281-3162 office

das.risk@iowa.gov

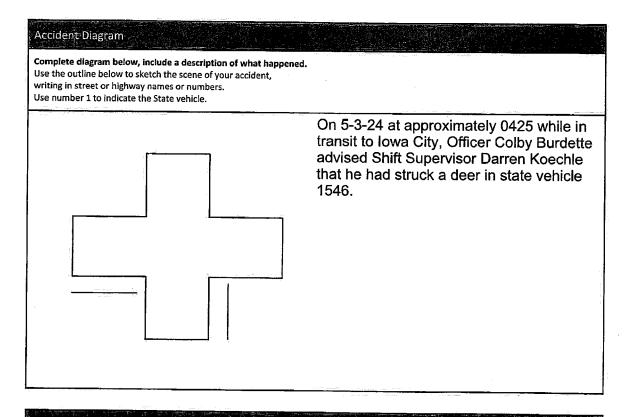
https://das.iowa.gov



Vehicle Accident Report

Accident Date (Mo/Day/Year)		Time	No. of Vehicles	
5/3/24		4:25 AM	1	
County	the All And Control of the Control o	State		
	Lee	lowa		
Vehicle 1 (State vehicl	a)			
Driver's Name		Work Street Address		
Col	y Burdette	2111 3	330th Avenue	
Driver's License No./State		City, State, Zip	The second secon	
_		Fort Madi	son, Iowa 52627	
Date of Birth	Department	Work Phone	Home Phone	
	242	319-372-543	2	
License Plate No.	VIN	Year, Make, Model	and the second s	
1546	1GNEVLKWZPJ242476	2023 Chevrolet Traverse		
Estimate (\$) of Damage		Description of Damage	iption of Damage	
\$5,052.90		Damage to right front		
Vehicle 2 (other vehicle	e) If more than two vehicles-use a	dditional forms		
Driver's Name	los de la companione de	Street Address		
The second secon	N/A	N/A		
Driver's License No./State	No./State City, State, Zip			
N/A		N/A		
Date of Birth	Work Phone	Home Phone	License Plate No.	
N/A	N/A	N/A	N/A	
Description of Damage				

Property Damage other than vehicle (fence, utility pole,	etc)		
Owner's Name, Address and Phone	Description of Property Damaged		
N/A	N/A		
injured Persons (attach additional sheets if necessary)			
Vehicle No. 1/ Name and Address	Describe Injuries		
N/A	N/A		
Vehicle No. 2/ Name and Address	Describe Injuries		
N/A	N/A		
Witness			
Name	Address/Phone		
N/A	N/A		
Name	Address/Phone		
N/A	N/A		



	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 Inf	ormation
Driver's Name	
Driver's License No. (State	

The State of lowa 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

Vehicle Plate No.

VIN

Vehicle year, makel, model



Abra - Jim Baier Fort Madison

5701 Avenue O, Fort Madison, IA 52627 Phone: (319) 372-8120

Workfile ID: Federal ID: State ID: Federal EPA:

State EPA:

bf6d13bb 420982103 1-56-007451 NED9817236513 NED9817236513

Preliminary Estimate

Customer: ISP

Written By: Cruz Estrada

Insured:

ISP

Type of Loss:

Point of Impact: 11 Left Front

Policy #:

Date of Loss:

Claim #:

Days to Repair: 0

Owner: ISP

Inspection Location:

Abra - Jim Baier Fort Madison

5701 Avenue O

Fort Madison, IA 52627

Repair Facility

(319) 372-8120 Business

Insurance Company:

CUSTOMER PAY

VEHICLE

2023 CHEV Traverse LS AWD (Fleet) 4D UTV 6-3.6L Gasoline Direct Injection white

VIN:

State:

License:

1546

1GNEVLKWXPJ242476

IΑ

Interior Color: Exterior Color:

Production Date:

black white

4/2023

Mileage In:

Condition:

Mileage Out:

36,061

Job #:

Vehicle Out:

TRANSMISSION

Automatic Transmission

4 Wheel Drive

POWER

Power Steering

Power Brakes Power Windows

Power Locks

Power Mirrors

Heated Mirrors

Power Driver Seat

DECOR

Dual Mirrors

Body Side Moldings

Privacy Glass Console/Storage **CONVENIENCE**

Air Conditioning

Intermittent Wipers

Tilt Wheel

Cruise Control

Rear Defogger Keyless Entry

Alarm

Message Center

Steering Wheel Touch Controls

Rear Window Wiper

Climate Control

Dual Air Condition

Backup Camera Parking Sensors

RADIO

AM Radio

FM Radio

Stereo Search/Seek

Auxiliary Audio Connection

Satellite Radio

SAFETY

Drivers Side Air Bag

Passenger Air Bag

Anti-Lock Brakes (4)

4 Wheel Disc Brakes Traction Control

Stability Control Front Side Impact Air Bags

Head/Curtain Air Bags Communications System Hands Free Device

Xenon or L.E.D. Headlamps

Blind Spot Detection

Lane Departure Warning

SEATS

Cloth Seats

Bucket Seats

3rd Row Seat

WHEELS

Aluminum/Alloy Wheels

PAINT

Clear Coat Paint

OTHER

Signal Integrated Mirrors

Customer: ISP

2023 CHEV Traverse LS AWD (Fleet) 4D UTV 6-3.6L Gasoline Direct Injection white

Line		Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1	FRONT BUM	PER & G	RILLE					
2	¥.		O/H front bumper		0	0.00	3.8	0.0
3	<>	Repl	Bumper cover	85596503	1	643.00	Incl.	3.0
4			Add for Clear Coat		0	0.00	0.0	1.2
5		Repl	LT Side bracket	84426587	1	60.10	Incl.	0.0
6		Repl	LT Side retainer	85619280	1	12.80	0.1	0.0
7		Repl	LT Fog lamp bezel chrome	84541294	1	27.45	Incl.	0.0
8		Repl	LT Lower cover LS, LT, RS	85572792	1	354.15	Incl.	0.0
9		Repl	Grille assy bright chrome LS	87830137	1	501.03	Incl.	0.0
10	FRONT LAM	PS						
11		Repi	LT Headlamp LS, LT, RS	85596373	1	1,192.90	0.3	0.0
12		Repl	LT H'lamp bracket	84421604	1	47.33	0.2	0.0
13	COOLING							
14		Repl	Shutter upper	84938011	1	218.58 m	0.3	0.0
15		Repl	Upper baffle	84842282	1	55.15	0.2	0.0
16		Repl	LT Side baffle	84827289	1	25.95	0.0	0.0
17	AIR CONDIT	IONER 8	& HEATER					
18		Repl	Condenser 3.6 liter	84725047	1	264 . 55 m	2.0	0.0
19			AC Service evacuate & recharge		0	0.00 m	1.4	0.0
20			AC Service refrigerant recovery		0	0.00 m	0.4	0.0
21	FENDER	-						
22	**	Repl	A/M CAPA LT Wheel opng mldg black	84999339	1	59.00	Incl.	0.0
23		Repl	LT Fender liner	87844735	. 1	122.45	0.4	0.0
24	#		Hazardous waste removal		1	5.00	0.0	0.0
25	#	Repl	Cover Car		1	5.00	0.0	0.0
26	#	Repl	Corrosion Protection		1	5.00	0.0	0.0
27	#	Repl	Flex Additive/Adhesion Promoter		1	8.50 T	0.0	0.0
28	#		OPEN TO UNSEEN DAMAGE		1	0.00	0.0	0.0
				SUBTOTALS		3,607.94	9.1	4.2

Customer: ISP

2023 CHEV Traverse LS AWD (Fleet) 4D UTV 6-3.6L Gasoline Direct Injection white

ESTIMATE TOTALS

Category	Basis		Rate	Cost \$
Parts				3,599.44
Body Labor	9.1 hrs	@	\$ 68.00 /hr	618.80
Paint Labor	4.2 hrs	@	\$ 68.00 /hr	285.60
Paint Supplies	4.2 hrs	@	\$ 50.00 /hr	210.00
Miscellaneous				8.50
Subtotal				4,722.34
Sales Tax	\$ 4,722.34	@	7.0000 %	330.56
Grand Total				5,052.90
Deductible				0.00
CUSTOMER PAY				0.00
INSURANCE PAY				5,052.90

MyPriceLink Estimate ID / Quote ID:

1215743412121116672 / 136167656

THE ABOVE IS AN ESTIMATE BASED ON OUR INSPECTION AND DOES NOT COVER ANY ADDITIONAL PARTS OR LABOR WHICH MAY BE REQUIRED AFTER THE WORK HAS BEEN OPENED UP. THERE IS A LIMITED LIFETIME GUARANTEE ON WORKMANSHIP AND REFINISHING.

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.

Customer: ISP

2023 CHEV Traverse LS AWD (Fleet) 4D UTV 6-3.6L Gasoline Direct Injection 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 DR1GM18, CCC Data Date 05/01/2024, 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. 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. 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.

Customer: ISP

2023 CHEV Traverse LS AWD (Fleet) 4D UTV 6-3.6L Gasoline Direct Injection white

PARTS SUPPLIER LIST

Line	Supplier	Description	Price
22	Keystone, Inc	#GM1290253C	\$ 59.00
	110 THUNDERBIRD LANE	A/M CAPA LT Wheel opng mldg black	
	EAST PEORIA IL 61611	Quote: 2491185576	
	(309) 698-0700	Expires: 06/17/24	