



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

Date: December 20, 2021

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: REIMBURSEMENT REQUEST - 29C20 Claim**

Claim #	2199
Vehicle / Event	#581/Hail
Event Date	July 9, 2021
Summary	Vehicle 581 sustained hail damage from a storm. (223207)
Amount Requested	<b>\$5,319.74-Final Amount</b>

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,

A handwritten signature in blue ink, appearing to read "Mariah Flowers".


Mariah Flowers, Fleet Manager  
DAS Fleet Services  
[Mariah.Flowers@iowa.gov](mailto:Mariah.Flowers@iowa.gov)  
515-725-2243

## Warrants

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	Fiscal Year	Warrant Number	Line Number	Line Amount	Issued	Redeemed	Vendor Customer
✓	2022	71476757	1	\$195.25	08/24/2021	09/01/2021	00003099002

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## ▼Warrant Information

**Fiscal Year :** 2022 **Amount :** \$195.25  
**Warrant Number :** 71476757 **Vendor Customer :** 00003099002  
**Line Number :** 1 **Last Updated :** 9/1/21

## ▼Issue Information

**Issued :** 08/24/2021 **Void :** ☐  
**Document ID :** RISK00522235901 **Duplicate :** ☐  
**Document Line Number :** 1 **Stop :** ☐  
**Line Amount :** \$195.25  
**Comments :**

## ▼Redeemed Information

**Redeemed :** 09/01/2021 **Batch Number :** 0000  
**Redeemed Bank :** 0000 **Sequence Number :** 02444  
**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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Due upon receipt

# INVOICE

INVOICE NUMBER	INVOICE DATE
<b>776-0277560</b>	<b>07/22/2021</b>

BILL TO	CLIENT CODE
Attn: MIKE LONG DAS FLEET SERVICES 109 SE 13TH ST DES MOINESIA 50139	DAS105001
FOR INQUIRIES:	BUSINESS LINE / LOSS TYPE
PDA Des Moines, IA #776  pdadesmoines@pdaorg.net (515) 222-1906	A - Commercial Auto

SUBMIT PAYMENT TO:
Property Damage Appraisers, Inc. 75-1160563 Dept #161, P.O. Box 1000 Memphis, TN 38148-0161  <i>Please reference the invoice number and enclose a copy of the invoice on all payments.</i>

INSURED	CLAIMANT	ASSIGNMENT DATE	PDA ASSIGNMENT #
STATE OF IOWA		07/21/2021	776-107-0236
CLAIM #	POLICY #	LOSS DATE	REFERENCE #
APDSOI0223207-001			

SERVICE FEE: ( 1 Unit(s) @ \$179.00 ) \$ 179.00

Mileage: ( 13.00 miles ) @ \$1.25 \$ 16.25

ACH Payment Info:  
Bank: First Horizon Bank  
ABA (US): 084000026 Bank  
Account: 220002525824  
Email Remit Information to:  
achbackup@pdaorg.net

Click [here](#) to pay your invoice at PDAClientPortal.com

**Same-Day Service. Guaranteed.** PDA now offers expedited service for standard auto claims in select markets.

<b>**WE HAVE CHANGED OUR BANK REMITTANCE INFORMATION AS NOTED ABOVE PLEASE UTILIZE OUR PORTAL FOR ALL OTHER ELECTRONIC PAYMENTS.**</b>  <i>Terms: Professional fees due upon receipt. Interest accrues at 1% per month. Please include the invoice number on all payments.</i>	TOTAL CHARGES:	195.25
	:	
	<b>INVOICE TOTAL:</b>	<b>\$ 195.25</b>

## Warrants

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	Fiscal Year	Warrant Number	Line Number	Line Amount	Issued	Redeemed	Vendor Customer
✓	2022	71485214	1	\$483.80	08/27/2021	09/03/2021	00002112887
	2022	71485214	2	\$12.90	08/27/2021	09/03/2021	00002112887
	2022	71485214	3	\$4,627.79	08/27/2021	09/03/2021	00002112887

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## ▼Warrant Information

Fiscal Year : 2022

Amount : \$5,124.49

Warrant Number : 71485214

Vendor Customer : 00002112887

Line Number : 1

Last Updated : 9/3/21

## ▼Issue Information

Issued : 08/27/2021

Void : ☐

Document ID : RISK00522238001

Duplicate : ☐

Document Line Number : 1

Stop : ☐

Line Amount : \$483.80

Comments :

## ▼Redeemed Information

Redeemed : 09/03/2021

Batch Number : 0000

Redeemed Bank : 0000

Sequence Number : 02829

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**

Your Dealer for Life  
1101 Southeast Oralabor Road, Exit 90 and I-35,  
Ankeny, IA 50021  
Phone: (515) 299-4337  
FAX: (515) 964-2293

Workfile ID: 9d8607f1  
PartsShare: 6kMphf  
Federal ID: 42-1092272  
State ID: na  
Federal EPA: iado65212904  
State EPA: iado65212904

**Preliminary Supplement 2 with Summary****RO Number: 815547**

Written By: Mark Ramsey

Insured: STATE OF IOWA PUBLIC SAFETY Policy #: Claim #: APDSOI0223207-001  
Type of Loss: Date of Loss: Days to Repair: 0  
Point of Impact:

<b>Owner:</b> STATE OF IOWA PUBLIC SAFETY 215 E. 7TH STREET DES MOINES, IA 50319 (515) 971-4464 Business	<b>Inspection Location:</b> Karl Chevrolet Collision Center Ankeny 1101 Southeast Oralabor Road Exit 90 and I-35 Ankeny, IA 50021 Repair Facility (515) 299-4337 Business	<b>Insurance Company:</b> STATE OF IOWA
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**VEHICLE**

2016 CHEV Impala LT2 4D SED 6-3.6L Flex Fuel Direct Injection BLACK

VIN: 2G1115S38G9162313	Interior Color: BLACK	Mileage In: 39,620	Vehicle Out: 8/4/2021
License: DYZ398	Exterior Color: BLACK	Mileage Out:	
State: IA	Production Date: 1/2016	Condition:	Job #: 3285

**TRANSMISSION**

Overdrive

**POWER**

Power Steering

Power Brakes

Power Windows

Power Locks

Power Mirrors

Heated Mirrors

Power Driver Seat

**DECOR**

Dual Mirrors

Tinted Glass

Console/Storage

**CONVENIENCE**

Air Conditioning

Intermittent Wipers

Tilt Wheel

Cruise Control

Rear Defogger

Keyless Entry

Alarm

Message Center

Steering Wheel Touch Controls

Telescopic Wheel

Climate Control

**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

Front Side Impact Air Bags

Head/Curtain Air Bags

Communications System

Hands Free Device

Rear Side Impact Air Bags

**SEATS**

Cloth Seats

**WHEELS**

Aluminum/Alloy Wheels

**PAINT**

Clear Coat Paint

**OTHER**

Traction Control

Stability Control

Signal Integrated Mirrors

Power Trunk/Liftgate

Get live updates at [www.carwise.com/e/43DT8C](http://www.carwise.com/e/43DT8C)

**Preliminary Supplement 2 with Summary**

**RO Number: 815547**

2016 CHEV Impala LT2 4D SED 6-3.6L Flex Fuel Direct Injection BLACK

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1	<b>HOOD</b>						
2	#	Subl Hood		1	531.25 X		
3		R&I R&I hood assy				0.6	
4		R&I Insulator				0.3	
5	#	Subl RT Fender		1	125.00 X		
6	#	Subl LT Fender		1	75.00 X		
7	<b>FENDER</b>						
8	*	R&I RT Fender liner				<u>0.3</u>	
9	*	R&I LT Fender liner				<u>0.3</u>	
10	<b>ELECTRICAL</b>						
11	*	R&I Antenna all				<u>0.3</u> M	
12	<b>ROOF</b>						
13	#	Subl Roof Panel		1	1,500.00 X		
14	#	Labor Adjustment		1		0.7	
15	*	R&I R&I headliner				<u>3.7</u>	
16		Deduct for Overlap				-0.7	
17	<b>FRONT DOOR</b>						
18	#	Subl LT FRT Door Shell		1	125.00 X		
19	*	Repl LT Belt molding	84325699	1	120.17	<u>0.2</u>	
20	*	R&I LT R&I mirror				<u>0.7</u>	
21	*	Repl LT Reveal molding	84398700	1	103.62	<u>0.3</u>	
22	<b>REAR DOOR</b>						
23	*	S01 Repl LT Belt molding	84325911	1	<u>94.69</u>	<u>0.2</u>	
24	*	S01 Repl LT Reveal molding	22909602	1	<u>126.28</u>	<u>0.3</u>	
25	*	S01 Repl RT Belt molding	84476794	1	<u>77.04</u>	<u>0.2</u>	
26	*	S01 Repl RT Reveal molding	84398704	1	<u>112.30</u>	<u>0.3</u>	
27	#	Subl RT Unside		1	156.25 X		
28	#	Subl LT Unside		1	312.50 X		
29	#	Subl Deck Lid		1	875.00 X		
30	<b>QUARTER PANEL</b>						
31	*	S01 Repl LT Quarter glass GM w/o flex fuel	84531823	1	<u>654.50</u>	<u>1.8</u> G	
32	<b>TRUNK LID</b>						
33	*	R&I Trunk lid trim				<u>0.3</u>	
34	*	R&I R&I trunk lid				<u>0.5</u>	
35	<b>REAR LAMPS</b>						
36		R&I RT Tail lamp assy				0.3	
37		R&I LT Tail lamp assy				0.3	
38	<b>REAR BUMPER</b>						
39	*	R&I R&I bumper cover				<u>1.2</u>	
<b>SUBTOTALS</b>					<b>4,988.60</b>	<b>12.1</b>	<b>0.0</b>

## Preliminary Supplement 2 with Summary

**RO Number: 815547**

2016 CHEV Impala LT2 4D SED 6-3.6L Flex Fuel Direct Injection BLACK

### ESTIMATE TOTALS

Category	Basis		Rate	Cost \$
Parts				1,288.60
Parts Discount	\$ 634.10		-28.0 %	-177.55
Glass Discount	\$ 654.50		-28.0 %	-183.26
Body Labor	10.0 hrs	@	\$ 41.00 /hr	410.00
Mechanical Labor	0.3 hrs	@	\$ 43.00 /hr	12.90
Glass Labor	1.8 hrs	@	\$ 41.00 /hr	73.80
Miscellaneous				3,700.00
Subtotal				5,124.49
<b>Grand Total</b>				<b>5,124.49</b>
Deductible				0.00
<b>CUSTOMER PAY</b>				<b>0.00</b>
<b>INSURANCE PAY</b>				<b>5,124.49</b>

**MyPriceLink Estimate ID / Quote ID:**

844309567184576512 / 89302561

## Preliminary Supplement 2 with Summary

**RO Number: 815547**

2016 CHEV Impala LT2 4D SED 6-3.6L Flex Fuel Direct Injection BLACK

### RATE CHANGES

Mechanical Labor (Est) 0.3 hrs @ \$ -22.00 /hr ( 65.00 to 43.00 ) = -6.60

### TOTALS SUMMARY

Category	Basis	Rate	Cost \$
Parts			0.00
Additional Supplement Labor			-6.60
Subtotal			-6.60
<b>Total Supplement Amount</b>			<b>-6.60</b>
<b>NET COST OF SUPPLEMENT</b>			<b>-6.60</b>

**MyPriceLink Estimate ID / Quote ID:**

844309567184576512 / 89302561

### CUMULATIVE EFFECTS OF SUPPLEMENT(S)

Estimate	5,099.45	Mark Ramsey
Supplement S01	31.64	SANDRA HARTGERS
Supplement S02	-6.60	SANDRA HARTGERS
<b>Job Total:</b>	<b>\$ 5,124.49</b>	
<b>INSURANCE PAY:</b>	<b>\$ 5,124.49</b>	

THIS IS A PRELIMINARY ESTIMATE. ACTUAL COST TO REPAIR MAY BE DIFFERENT

LIMITED LIFETIME WARRANTY--SEE BODY SHOP PERSONNEL FOR DETAILS

\*\*\*IF AFTERMARKET PARTS (PARTS MADE BY A SOURCE OTHER THAN THE ORIGINAL MANUFACTURER OF THAT PART) ARE USED THEY WILL BE IDENTIFIED BY "QUAL.REPL.PART" IN THE MFG. PART NO. COLUMN

DUE TO MANY UNFORESEEN CIRCUMSTANCES IN THE REPAIRING OF VEHICLES, WE REGRET THAT WE CAN ONLY ESTIMATE, NOT PROMISE, A COMPLETION TIME.