



**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

March 3, 2026

Kristi Onstot  
Executive Council  
L O C A L

Subject: Deer Damage to Vehicle #1639 on February 2, 2026  
Department of Administrative Services  
Claim dated February 4, 2026  
AOS Claim ID: 4231

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 \$3,449.75, 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: Kyle Wear, Fleet Services CFO, Department of Administrative Services  
Ryan Betts, Fleet Services Risk Program Manager, Department of Administrative Services  
Heather Hackbarth, Department of Management



Date: February 4, 2026

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

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

|                          |                                                              |
|--------------------------|--------------------------------------------------------------|
| Vehicle / Event          | #1639 / Deer                                                 |
| Event Date               | February 2, 2026                                             |
| Summary                  | Vehicle 1639 - struck a deer (Claim # TBD)                   |
| Amount Requested         | <b>\$3,449.75 TOTAL</b>                                      |
| Supporting Documentation | 29C20 Email Notification, Accident Report, & Repair Estimate |

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

Thank you,

Ryan Betts  
DAS Fleet Risk Program Manager  
ryan.betts1@iowa.gov  
515-281-8008



Risk, DAS &lt;das.risk@iowa.gov&gt;

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**Fwd: IDALS Vehicle 1639 Accident Report**

1 message

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

Tue, Feb 3, 2026 at 7:40 AM

To: Tammy Hollingsworth &lt;Tammy.Hollingsworth@aos.iowa.gov&gt;, TOS ExecutiveCouncil &lt;executivecouncil@tos.iowa.gov&gt;

Please accept this email as the initial 24 hour notification for an AON claim. Vehicle 1639 struck a deer on 2/2/2026. I will forward all information as soon as it is received.

**DAS Risk**

Central Procurement and Fleet Services Enterprise

Iowa Department of Administrative Services

510 E 12<sup>th</sup> St, Des Moines, IA 50319

515-281-8008 office

[das.risk@iowa.gov](mailto:das.risk@iowa.gov)<https://das.iowa.gov>**Department of  
Administrative Services**

**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.**

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**approval is given.**

----- Forwarded message -----

From: **Potter, Lisa** <[Lisa.Potter@iowaagriculture.gov](mailto:Lisa.Potter@iowaagriculture.gov)>

Date: Tue, Feb 3, 2026 at 7:20 AM

Subject: IDALS Vehicle 1639 Accident Report

To: Risk, DAS <[das.risk@iowa.gov](mailto:das.risk@iowa.gov)>

Cc: Johnson, Casey <[Casey.Johnson@iowaagriculture.gov](mailto:Casey.Johnson@iowaagriculture.gov)>, Schubert, Kevin E <[kevin.schubert@iowaagriculture.gov](mailto:kevin.schubert@iowaagriculture.gov)>

Good morning. Attached please find an accident report and picture. The driver will have an estimate completed and submitted soon.

Thank you,

Lisa

Lisa K Potter

Accounting Tech 2

(515)281-5713

[Lisa.potter@iowaagriculture.gov](mailto:Lisa.potter@iowaagriculture.gov)



IOWA DEPARTMENT OF  
AGRICULTURE &  
LAND STEWARDSHIP

Hoover State Office Building

1305 E. Walnut St, Des Moines, IA 50319

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## 2 attachments



**Deer accident pic #1.HEIC**  
1838K



**Deer Accident report.pdf**  
453K





## Department of Administrative Services

Department of Administrative Services  
DAS Fleet Services - Risk Management  
510 East 12th Street  
Des Moines, IA 50319

# Vehicle Accident Report Form

- Render aid or assistance to the injured ([per Iowa Code 321.262](#)).
- The State of Iowa is self-insured. Refer to the insurance card and accident report procedures online or in your glove box packet. If the accident involves another party, exchange information with the driver or property owner. Do not admit fault or attempt to settle your claim.
- Call local law enforcement, if a fatality, injury or property damage has occurred, and obtain a police report. On the Capitol complex, call Iowa State Patrol, Post 16 at 515-281-5608.
- Within the first 24 hours, report accident or damage to DAS Fleet Services (515-281-3162 or [DAS.Risk@iowa.gov](mailto:DAS.Risk@iowa.gov)), your agency fleet contact, and supervisor. Damage caused by an act of nature or unavoidable cause MUST be reported to DAS Fleet Services within 24 hours of the incident to qualify for contingent fund use ([per Iowa Code 29C.20](#)).
- For an estimate, locate the nearest contracted auto body repair shop in the Contracted Service Providers map. A contracted auto body shop within 30 miles should be used if available.
- If towing is necessary, contact DAS Fleet Services (515-281-3162) for assistance. After hours, call National Automobile Club (NAC) FleetRescue\* (866-329-3471) or local law enforcement.
- Within 72 hours, print and submit a completed Accident Report Form, including a cost estimate from the auto body shop to [DAS.Risk@iowa.gov](mailto:DAS.Risk@iowa.gov).
- Any accident in the State of Iowa that causes death, personal injury, or total property damage of \$1,500 or more must be reported on an Iowa Accident Report Form UNLESS the accident is investigated by a law enforcement agency and a report is filed. Failure to return an accident report form within 72 hours may result in suspension of driving privileges.

## Vehicle Accident Report

### Time and location of accident

|                             |            |                 |
|-----------------------------|------------|-----------------|
| Accident Date (Mo/Day/Year) | Time       | No. of Vehicles |
| 02-02-2026                  | 11:57 a.m. | 1               |
| County                      | State      |                 |
| Taylor                      | Iowa       |                 |

### Vehicle 1 (State vehicle)

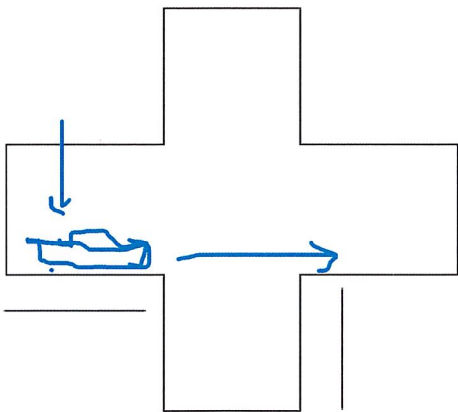
|                            |                   |                                                       |                 |
|----------------------------|-------------------|-------------------------------------------------------|-----------------|
| Driver's Name              |                   | Work Street Address                                   |                 |
| Kevin Schubert             |                   | 2222 265th st.                                        |                 |
| Driver's License No./State |                   | City, State, Zip                                      |                 |
| 871AK1913 Iowa             |                   | Bedford, Ia 50833                                     |                 |
| Date of Birth              | Department        | Work Phone                                            | Home Phone      |
| 01-25-58                   | Agriculture       | 417-545-1442                                          | 417-545-1442    |
| License Plate No.          | VIN               | Year, Make, Model                                     | Current Mileage |
| 1639                       | 1G1ZC5ST3PF124184 | 2023 chevy malibu                                     | 115572          |
| Estimate (\$) of Damage    |                   | Description of Damage                                 |                 |
| unknown at this time       |                   | Drivers side back door and forward part of the trunk. |                 |

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

|                            |            |                  |                   |
|----------------------------|------------|------------------|-------------------|
| Driver's Name              |            | Street Address   |                   |
| None                       |            |                  |                   |
| 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 |
| None                                                          |                                 |
| Injured Persons (attach additional sheets if necessary)       |                                 |
| Vehicle No. 1/ Name and Address                               | Describe Injuries               |
| None                                                          |                                 |
| Vehicle No. 2/ Name and Address                               | Describe Injuries               |
|                                                               |                                 |
| Witness                                                       |                                 |
| Name                                                          | Address/Phone                   |
| Kevin Schubert (self)                                         | Bedford, Ia 417-545-1442        |
| Name                                                          | Address/Phone                   |
|                                                               |                                 |

| Accident Diagram                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Complete diagram below, include a description of what happened.</b><br/>         Use the outline below to sketch the scene of your accident,<br/>         writing in street or highway names or numbers.<br/>         Use number 1 to indicate the State vehicle.</p> |                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                          | <p>I was west bound on Hwy. 2 (4 miles west of Bedford, Ia when two Deer ran out infront of state vehicile # 1639. I applied the brakes to avoid hitting the 2 Deer, when another Deer ran out of the same ditch (south side of the road) and ran into the state vehicle hitting it just back of the drivers side back door. (See pictures)</p> |

## Accident Information Exchange Sheet

### Other Vehicle information

|                                     |             |
|-------------------------------------|-------------|
| Driver's Name                       | NONE (Deer) |
| 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              | Kevin Schubert    |
| Driver's License No./State | 871AK1913 Ia      |
| Vehicle Plate No.          | 1639              |
| Vehicle year, make, model  | Chevy Malibu      |
| VIN                        | 1G1ZC5ST3PF124184 |

The State of Iowa is self-insured.  
If you have any questions regarding an accident, please contact  
DAS Fleet Services at 515-281-8008 or [DAS.Risk@iowa.gov](mailto:DAS.Risk@iowa.gov)



# Karl Chevrolet Collision Center Ankeny

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

Workfile ID: 45ad40d8  
Federal ID: 42-1092272

## Estimate

### RO Number:

|                     |               |             |              |                |
|---------------------|---------------|-------------|--------------|----------------|
| Customer:           | Insurance:    | Adjuster:   | Estimator:   | Joe Kevin Gift |
| DEPT OF AGRICULTURE | STATE OF IOWA | Phone:      | Create Date: | 2/4/2026       |
| 2222 265TH ST       |               | Claim:      |              |                |
| BEDFORD, IA 50833   |               | Loss Date:  |              |                |
| (417) 545-1442      |               | Deductible: |              |                |

2023 CHEV Malibu LS (Fleet) 4D SED 4-1.5L Turbocharged Gasoline Direct Injection WHITE

|                        |                          |                     |              |
|------------------------|--------------------------|---------------------|--------------|
| VIN: 1G1ZC5ST3PF124184 | Interior Color: BLACK    | Mileage In: 116,125 | Vehicle Out: |
| License: 1639          | Exterior Color: WHITE    | Mileage Out:        |              |
| State: IA              | Production Date: 10/2022 | Condition: Fair     | Job #:       |

| Line | Ver | Operation      | Description                   | Qty | Extended Price \$ | Part Type | Labor | Type | Paint |
|------|-----|----------------|-------------------------------|-----|-------------------|-----------|-------|------|-------|
| 1    | E01 |                | <b>REAR DOOR</b>              |     |                   |           |       |      |       |
| 2    | E01 | Remove/Install | LT R&I door assy              |     |                   |           | 0.0   | Body |       |
| 3    | E01 | Remove/Replace | LT Door panel                 | 1   | 749.10            | OEM       | 5.9   | Body | 2.0   |
| 4    | E01 |                | Add for Clear Coat            |     |                   |           |       |      | 0.8   |
| 5    | E01 |                | Add for Edging                |     |                   |           |       |      | 0.5   |
| 6    | E01 |                | Add for Clear Coat            |     |                   |           |       |      | 0.1   |
| 7    | E01 |                | Add for Inside                |     |                   |           |       |      | 0.5   |
| 8    | E01 |                | Add for Clear Coat            |     |                   |           |       |      | 0.1   |
| 9    | E01 |                | Seam sealer                   | 1   | 50.00             | Other     | 1.0   | Body |       |
| 10   | E01 | Remove/Install | LT Door w'strip               |     |                   |           | 0.0   | Body |       |
| 11   | E01 | Remove/Install | LT Belt molding               |     |                   |           | 0.0   | Body |       |
| 12   | E01 | Remove/Install | LT Applique rear              |     |                   |           | 0.0   | Body |       |
| 13   | E01 | Remove/Install | LT Applique front             |     |                   |           | 0.0   | Body |       |
| 14   | E01 | Remove/Install | LT Reveal molding             |     |                   |           | 0.3   | Body |       |
| 15   | E01 | Remove/Install | LT Door glass GM              |     |                   |           | 0.0   | Body |       |
| 16   | E01 | Remove/Install | LT Run w'strip                |     |                   |           | 0.0   | Body |       |
| 17   | E01 | Remove/Install | LT Handle, outside w/o chrome |     |                   |           | 0.0   | Body |       |
| 18   | E01 | Remove/Install | LT R&I trim panel             |     |                   |           | 0.0   | Body |       |
| 19   | E01 | Remove/Install | LT Upper trim                 |     |                   |           | 0.1   | Body |       |
| 20   | E01 |                | <b>QUARTER PANEL</b>          |     |                   |           |       |      |       |
| 21   | E01 | Remove/Install | LT Wheelhouse liner           |     |                   |           | 0.4   | Body |       |
| 22   | E01 | Repair         | LT Quarter panel              |     |                   |           | 7.0   | Body | 2.7   |
| 23   | E01 |                | Overlap Major Adj. Panel      |     |                   |           |       |      | (0.4) |
| 24   | E01 |                | Add for Clear Coat            |     |                   |           |       |      | 0.5   |
| 25   | E01 |                | Add for Edging                |     |                   |           |       |      | 0.8   |

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:

2023 CHEV Malibu LS (Fleet) 4D SED 4-1.5L Turbocharged Gasoline Direct Injection WHITE

|    |     |                |                                                               |   |        |       |     |      |
|----|-----|----------------|---------------------------------------------------------------|---|--------|-------|-----|------|
| 26 | E01 |                | Add for Lock Pillar                                           |   |        |       |     | 0.5  |
| 27 | E01 | Remove/Replace | LT Quarter glass GM                                           | 1 | 593.97 | Glass | 1.6 | Body |
| 28 | E01 | Remove/Install | LT Rear trim black                                            |   |        |       | 0.2 | Body |
| 29 | E01 |                | <b>REAR LAMPS</b>                                             |   |        |       |     |      |
| 30 | E01 | Remove/Install | LT Tail lamp assy                                             |   |        |       | 0.4 | Body |
| 31 | E01 |                | <b>REAR BUMPER</b>                                            |   |        |       |     |      |
| 32 | E01 | Remove/Install | R&I bumper cover                                              |   |        |       | 1.0 | Body |
| 33 | E01 |                | <b>MISCELLANEOUS OPERATIONS</b>                               |   |        |       |     |      |
| 34 | E01 |                | Hazardous Waste Removal                                       | 1 | 3.00   | Other |     |      |
| 35 | E01 |                | Feather, edge, prime, block<br>NOTE: Time goes to the painter |   |        |       | 0.5 | Body |
| 36 | E01 |                | De-nib, sand, buff<br>NOTE: Time goes to the painter          |   |        |       | 0.5 | Body |
| 37 | E01 |                | Disconnect Battery                                            |   |        |       | 0.1 | Body |
| 38 | E01 |                | Pre-scan                                                      |   |        |       | 0.5 | Mech |
| 39 | E01 |                | Post scan                                                     |   |        |       | 0.5 | Mech |
| 40 | E01 | Sublet         | LT Qtr glass replacement - *SUBJECT TO<br>INVOICE*            |   |        |       |     |      |

| Estimate Totals    | Discount \$ | Markup \$ | Rate \$ | Total Hours | Total \$        |
|--------------------|-------------|-----------|---------|-------------|-----------------|
| Parts              | (149.82)    |           |         |             | 1,246.25        |
| Labor, Body        |             |           | 63.00   | 19.0        | 1,197.00        |
| Labor, Refinish    |             |           | 115.00  | 8.1         | 931.50          |
| Labor, Mechanical  |             |           | 75.00   | 1.0         | 75.00           |
| <b>Subtotal</b>    |             |           |         |             | <b>3,449.75</b> |
| Sales Tax          |             |           |         |             | 0.00            |
| <b>Grand Total</b> |             |           |         |             | <b>3,449.75</b> |
| <b>Net Total</b>   |             |           |         |             | <b>3,449.75</b> |

| Estimate Version | Total \$ |
|------------------|----------|
| Original         | 3,449.75 |

|                                |          |
|--------------------------------|----------|
| Insurance Total \$:            | 3,449.75 |
| Received from Insurance \$:    | 0.00     |
| Balance due from Insurance \$: | 3,449.75 |

|                               |      |
|-------------------------------|------|
| Customer Total \$:            | 0.00 |
| Received from Customer \$:    | 0.00 |
| Balance due from Customer \$: | 0.00 |

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Image Report

|            |                   |               |                     |                |                   |                  |         |
|------------|-------------------|---------------|---------------------|----------------|-------------------|------------------|---------|
| Owner:     | DEPT OF           | Insurance:    | STATE OF IOWA       | Estimator:     | Joe Kevin Gift    | Vehicle Out:     |         |
| RO Number: |                   | Claim Number: |                     |                |                   |                  |         |
| Year:      | 2023              | Color:        | WHITE               | License Plate: | 1639              | Production Date: | 10/2022 |
| Make:      | CHEV              | Body Style:   | 4D SED              | State:         | IA                | Mileage In:      | 116,125 |
| Model:     | Malibu LS (Fleet) | Engine:       | 4-1.5L Turbochar... | VIN:           | 1G1ZC5ST3PF124184 | Condition:       | Fair    |



2/4/2026  
Comments:



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Image Report

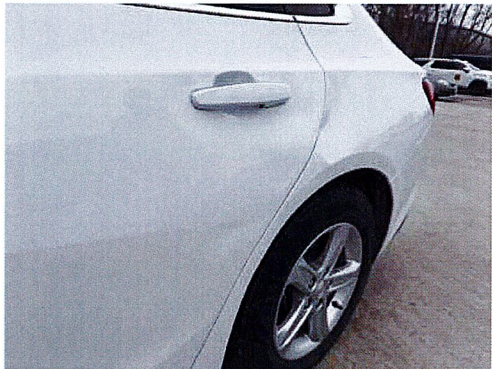
|            |                   |               |                     |                |                   |                  |         |
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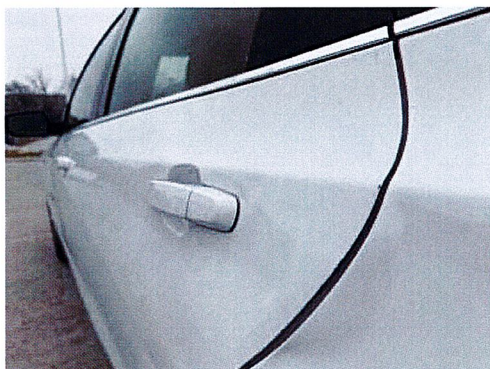


2/4/2026  
Comments:



### Image Report

|            |                   |               |                     |                |                   |                  |         |
|------------|-------------------|---------------|---------------------|----------------|-------------------|------------------|---------|
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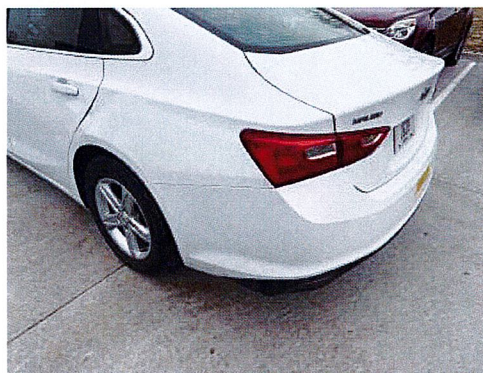
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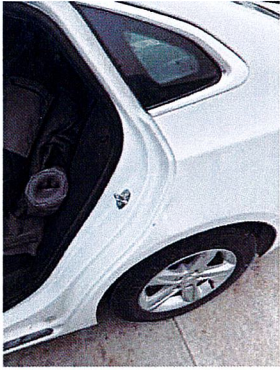


2/4/2026  
Comments:



### Image Report

|            |                   |               |                     |                |                   |                  |         |
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