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

October 5, 2026

Accounting Department
Office of the Treasurer
Lucas Building
321 E 12th Street
Des Moines, IA, 50319

The Executive Council, in a meeting held on this date, approved payment of the following cost item:

Department of Administrative Services ……...……..... $5,417.83
On May 16, 2026, Vehicle #78 was damaged by hail. Request was to cover repair costs.

This represents full and final payment, $88.00 will be reverted and this allocation closed.

EXECUTIVE COUNCIL OF IOWA

Kristi Onstot

Kristi Onstot
Executive Secretary

cc: Kyle Wear, DAS Fleet Chief Financial Officer
Ryan Betts, Fleet Services Risk Program Manager
Matt Bender, Department of Management
Heather Hackbarth, Department of Management

AOS Claim ID 4387
TOS Job # 3103

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

State Capitol Building
Des Moines, Iowa 50319-0006

Telephone (515) 281-5834
www.auditor.iowa.gov

Rob Sand
Auditor of State

September 23, 2026

Kristi Onstot
Executive Council

Subject: Hail Damage to Vehicle #78 on May 16, 2026
Department of Administrative Services
Claim dated June 1, 2026
AOS Claim ID: 4387

In accordance with Executive Council policy, we have examined the invoices and supporting documentation for final payment related to the damages and have found the items to be in order as shown below:

Documented request		$ 5,417.83
Executive Council Allocation		$ 5,505.83
Less:		
Previous payments	$ 0.00	
This payment	5,417.83	
Total		$ 5,417.83
Remaining Executive Council allocation		$ 88.00

We recommend reimbursement be made in the amount of $5,417.83. This represents full and final payment of the loss. The remaining allocation should be reverted to the State Treasury.

Sincerely,

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

Claim: 341118 as of 09/04/2026

Claim Number	DAS Vehicle Number	State Driver	Vehicle Agency	Loss Date	Status	Total Incurred
341118	78-528633	Luke Olesen		05/17/2026	Open	4,705.83

ADMIN Only Claim Status

Overall Claim Status:	Closed	Total Loss Status:	
Overall Claim Status Date:	08/21/2026	Total Loss Status Date:	
Overall Incident Status:		Restitution Status:	
Overall Incident Status Date:		Restitution Status Date:	
29C20 Status:	Reimbursement Requested	Subrogation Status:	
29C20 Status Date:	09/04/2026	Subrogation Status Date:	
Repair Status:	Closed-Repaired	TORT Status:	
Repair Status Date:	08/21/2026	TORT Status Date:	

ADMIN Only

Notification Date:	07/12/2026 2:22 PM	Potential Tort?	No
Entry User:	System Process	29C20 Claim?	Yes
Historical Claim?	Yes	Subrogation?	No
Group ID:		Restitution?	No
		Total Loss?	No
Accident Type:	Hail	SOI Driver at Fault?	No
Accident Type Description:	Hail		
Object Struck:		Driver's Agency:	595-1 - Public Safety - Administrative Services
Object Struck Description:		Driver's Agency Number:	595
Contributing Circumstances:		Driver's Agency Name:	DPS
		Driver's Agency Email:	jadams@dps.state.ia.us
Accident Description ADMIN:	Hail	Vehicle's Agency:	
		Vehicle's Agency Number:	595
Incident Review Date:		Vehicle's Agency Name:	DPS
	Populating this field will send an alert to the Driver's Agency Fleet contact that an accident has occurred	Vehicle's Agency Email:	jadams@dps.state.ia.us

Estimate Approvals

Add Estimate

Entry Date	Estimate Type	Initial Estimate Amount	Approved Estimate Amount	Body Shop Name	MA Number	CRS Claim?	
07/13/2026 5:48 PM	Initial Estimate	5,505.83	5,039.83	Craft Auto Body		Yes	✖
08/21/2026 10:42 AM	Supplemental Estimat...	378.00	378.00	Craft Auto Body		Yes	✖
		5,883.83	**5,417.83**				

ADMIN Only Invoicing

Repair Costs

Bodyshop Repair Amount:	5,417.83
Towing Amount:	
Storage Amount:	
Other Amount:	
Final Total:	5,417.83

Triggers creation/email of Payment Request Cover Sheet (REP5)

Bodyshop Payment Date:	08/21/2026
Bodyshop Name:	Craft Auto Body
Bodyshop MA Number:	
Communication Preference:	Phone Call

ADMIN Only 29C20

Triggers Initial Notification to AOS from the Incident Form!!

Claim Type:	Hail

Triggers Reimbursement Request to AOS (AON4-Standard or AON5-Total Loss)

Reimbursement Request Date:	09/04/2026

AOS Notification Date:

Triggers Allocation Request to AOS (AON2)

Allocation Request Date: 06/01/2026

Allocation Request Amount: 5,505.83

Triggers 29C20 status update only (AON3)

AOS Recommendation date: 07/01/2026

AOS Claim Number: 4387

Reimbursement Amount Requested: 5,417.83

Triggers 29C20 Status update only (AON6)

Reimbursement Letter Received Date:

Other Information

29C20 Notes:

ADMIN Only Total Loss

Triggers ACV Request (TL1)

Total Loss NADA Amount:

Total Loss ACV Request Date:

Triggers Vehicle Prep email to DPS or Driver (TL2)

Is equipment teardown needed?

Vehicle Prep Request Date:

Does the Vehicle have a GPS Unit?

Triggers Dispatch to Auction email (TL3)

Has the Inspection Report been completed?

Dispatched to Auction Date:

Current Vehicle Location Name:

Current Vehicle Location Address:

Current Vehicle Location City:

Current Vehicle Location State:

Current Vehicle Location Zipcode:

Current Vehicle Location Phone:

Triggers tasks for any special handling (TL5)

Total Loss ACV Amount: 0.00

Total Loss Salvage Amount:

Total Loss Vehicle Sold Date:

Other Information

Special Instructions:

› Admin Only - Tort Claims

› Admin Only - Restitution

⌄ ADMIN Only Subrogation

Triggers Subrogation Request email to Insurance Company (SUB2)

Subrogation Request Date:

Total Subrogation Demand: 0.00

Subrogation Vehicle Owner:

Subrogation Insurance:

Triggers Subrogation Acceptance email to Insurance Company (SUB3)

Subrogation Acceptance Date:

Subrogee Claim Number:

Accepted Subrogation amount: 0.00

Other Information

Subrogation Notes:

ADMIN Only CRS Info

CRS Claim Created:		CRS Claim Created:	
CRS Department Name:		CRS Claim Type:	
CRS Claimants:		CRS Fee:	0.00
CRS Date of Loss:		CRS Reviewed:	
		CRS Review Notes:	

Accident Details

Claim Number:	341118	More than 1 driver involved?	
Claimant:	Luke Olesen	More than 1 vehicle involved?	
Accident Date:	05/17/2026	Accident Description Quick:	
Accident Time:		Accident Description Full:	
Accident Street/Location:			
Accident City:		Click **Edit Collision Diagram** below to complete an a diagram of the accident.	
Accident State:			
Accident Postal:			
Accident County:			
Incident Contact Email Address:			
DSP Incident?			

State Driver Details

Driver's First Name:	Luke	Driver's DoB:	
Driver's Last Name:	Olesen	Driver's Phone Number:	
Drivers License Number:			
Drivers License State:			

Other Driver Details

Driver 2 First Name:		Driver 2 DoB:	
Driver 2 Last Name:		Driver 2 Phone Number:	
Driver 2 License Number:		Driver 2 Email Address:	
Driver 2 License State:			

State Vehicle Details

Vehicle:	2C3CDXKG0MH528633	Tow Required?	
DAS Vehicle Number:	78-528633	Towed by what Company?	
Vehicle License Plate Number (if different than vehicle number)		Towed to where?	
		Vehicle Mileage:	
VIN:	2C3CDXKG0MH528633	Brief Description of Vehicle Damage:	Hail
Vehicle Year:	2021		
Vehicle Make:	DODGE		
Vehicle Model:	CHARGER		
Fund Source:			

Other Vehicle Details

Vehicle 2 License Plate Number:		**Other Vehicle Insurance Information**	
Vehicle 2 VIN:		Insurance Company Name:	
Vehicle 2 Year:		Address:	
Vehicle 2 Make:		City:	
Vehicle 2 Model:		State:	
Vehicle 2 Require Tow:		Zipcode:	
Vehicle 2 Towed by what Company?		Agent's Name:	
		Agent's Phone:	
Vehicle 2 Towed to where?		Agent's Email:	

Vehicle 2 Mileage:
Vehicle 2 Description of Damage:
Policy #

Conditions

Location Type:
Weather Conditions:
Light Conditions:
Surface Conditions:
Vision Obscured:
Apparent Driver Conditions:
Other Comments from Driver:

Was anyone Injured?

Were you Injured?
Was anyone else injured?

Where there any Witnesses?

Were there any Witnesses?
If yes, were you able to collect their information?
If you weren't able to collect their information, why not?

Witness List

Was any Property Damaged other than the Vehicles listed above?

Was any property damaged:

Attach photos or other incident related documents.

Upload File

File Name	Folder	Document Type	Description	
APDSOI0341118-001_QCSReview_SUPP1.pdf	Estimates	Estimate - Supplemental		✖
341118 Final Invoice.pdf	Invoices	Invoice - Bodyshop Final		✖
Payment Request Cover Sheet.pdf	Invoices	Invoice - Payment Cover Sheet	Payment Request Cover Sheet	✖
341118 Proof of Payment.png	Proof of Payment	Proof of Payment - Bodyshop		✖
4387 Request for Allocation Letter AOS-Signed.pdf	29C20	29C20 Allocation Letter from AOS		✖
29C20 Reimbursement Request Summary - 2026-07-27.pdf	29C20	29C20 Reimbursement Request Summary		✖

Key Workflow Contacts

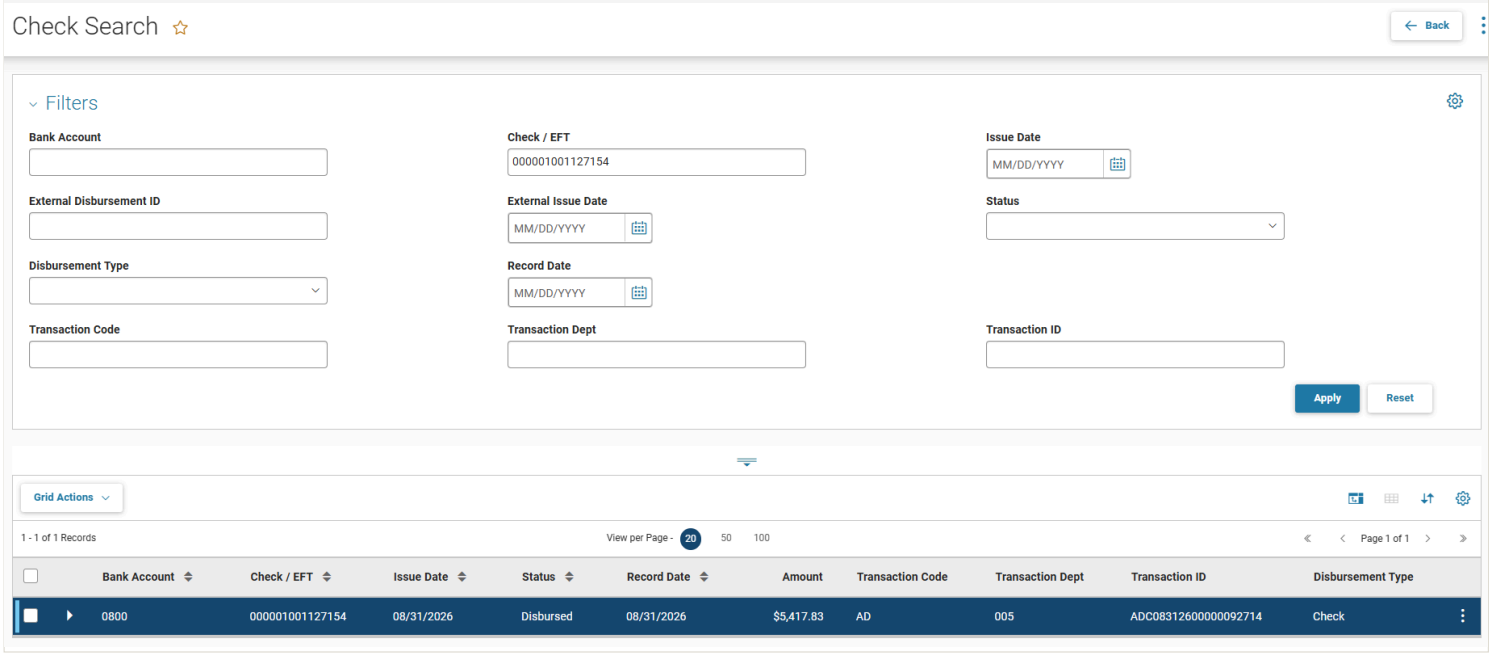
Fleet Admin MGR Contact: Fucaloro, Mariah
Fleet Admin Contact: Betts, Ryan
Fleet Finance Contact: Wear, Kyle
Fleet Inbox: Betts, Ryan
AOS 29C20 Contact: AOS,
TOS 29C20 Contact: ExecutiveCouncil@TOS.Iowa.Gov,
DPS Primary Contact: Adams, Jeannie
Fleet Salvage Dispatch Contact: Kieffer, Michelle
Fleet MA Contact: Rudawski, Michael
Finance Invoice Payment Contact: DAS, Finance
Environment:

Files

File	Description	Folder	Attached By	Attach Date	Size
29C20 Reimbursement Request Summary - 2026-07-27.pdf		29C20	Ryan Betts	09/04/2026	159kb
4387 Request for Allocation Letter AOS-Signed.pdf		29C20	Ryan Betts	09/04/2026	147kb
341118 Proof of Payment.png		Proof of Payment	Ryan Betts	09/04/2026	74kb
Payment Request Cover Sheet.pdf	Payment Request Cover Sheet	Invoices	Ryan Betts	08/21/2026	43kb
341118 Final Invoice.pdf		Invoices	Ryan Betts	08/21/2026	103kb
APDSOI0341118-001_QCSReview_SUPP1.pdf		Estimates	Ryan Betts	08/21/2026	558kb

Images

341118 Proof of Payment.png



Craft Auto Body Inc.

524 Chambers St, Sioux City, IA 51101
Phone: (712) 258-4086
FAX: (712) 258-4866

Workfile ID: 36410223
Federal ID: 46-1606758

Final Bill

RO Number: 35465

Customer:		Insurance:		Adjuster:		Estimator:	Drake Craft
Iowa State Patrol		QUALITY CLAIMS SERVICE		Phone:		Create Date:	5/21/2026
				Claim:	APDSOI0341118-001		
				Loss Date:			
(712) 229-0149				Deductible:			

2021 DODG Charger Police AWD (Fleet) 4D SED 6-3.6L Gasoline Sequential MPI

VIN:	2C3CDXKG0MH528633	Interior Color:		Mileage In:		Vehicle Out:	7/2/2026
License:		Exterior Color:		Mileage Out:			
State:	IA	Production Date:		Condition:		Job #:	

Line	Ver	Operation	Description	Qty	Extended Price $	Part Type	Labor	Type	Paint
1	E01		Vehicle#78						
2	E01		**HOOD**						
3	E01	Remove/Install	R&I hood assy				0.6	Body	
4	E01	Sublet	Hood (ALU)	1	375.00	Sublet			
5	E01	Remove/Install	Insulator				0.3	Body	
6	E01		**FENDER**						
7	E01	Remove/Install	RT Fender liner 3.6, 5.7 liter				0.3	Body	
8	E01	Sublet	RT Fender w/o wide body	1	175.00	Sublet			
9	E01		**ROOF**						
10	E01	Remove/Install	R&I headliner				3.4	Body	
11	E01	Sublet	Roof panel w/o sunroof	1	475.00	Sublet			
12	E01	Remove/Install	all cop lights and Antennas				7.0	Body	
13	E01		**PILLARS, ROCKER & FLOOR**						
14	E01	Repair	RT Aperture panel w/o wide body						2.0
15	E01		Add for Clear Coat						0.8
16	E01		**FRONT DOOR**						
17	E01	Sublet	RT Door shell (HSS)	1	225.00	Sublet			
18	E01	Remove/Install	RT Power mirror				0.5	Body	
19	E01	Remove/Install	RT Handle, outside black				0.4	Body	
20	E01	Remove/Install	RT R&I trim panel				0.5	Body	
21	E01	Remove/Replace	RT Belt w'strip	1	171.00	OEM	0.3	Body	
22	E01	Remove/Replace	RT Applique	1	163.00	OEM	0.2	Body	
23	E01	Remove/Replace	RT Frame molding	1	166.00	OEM	0.3	Body	
24	E01		**REAR DOOR**						
25	S01	Blend	RT Door shell w/o wide body (HSS)						2.8

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: 35465

2021 DODG Charger Police AWD (Fleet) 4D SED 6-3.6L Gasoline Sequential MPI

26	E01	Remove/Replace	RT Frame molding	1	189.00	OEM	0.3	Body	
27	E01	Remove/Replace	RT Applique	1	147.00	OEM	0.2	Body	
28	E01	Remove/Replace	RT Belt w'strip	1	160.00	OEM	0.3	Body	
29	E01	Remove/Install	RT Handle, outside black				0.4	Body	
30	E01	Remove/Install	RT R&I trim panel				0.5	Body	
31	S01	PDR	RT Door shell w/o wide body (HSS)	1	225.00	Other			
32	E01		**QUARTER PANEL**						
33	E01	Repair	RT Quarter panel w/o wide body				3.0	Body	2.6
34	E01		Overlap Major Adj. Panel						(0.4)
35	E01		Add for Clear Coat						0.4
36	E01		**TRUNK LID**						
37	E01	Sublet	Trunk lid all PDR	1	225.00	Sublet			
38	E01	Remove/Install	R&I trunk lid				0.8	Body	
39	E01		**REAR LAMPS**						
40	E01	Remove/Install	RT Tail lamp assy				0.3	Body	
41	E01	Remove/Install	LT Tail lamp assy				0.3	Body	
42	E01		**MISCELLANEOUS OPERATIONS**						
43	E01		Hazardous waste removal	1	3.00	Other			
44	E01		Cavity Wax	1	51.83	Other	0.4	Body	
45	E01		Corrosion protection primer	1	15.00	Other	0.3	Body	

Estimate Totals	Discount $	Markup $	Rate $	Total Hours	Total $
Parts					1,065.83
Labor, Body			75.00	20.6	1,545.00
Labor, Refinish			75.00	8.2	615.00
Material, Paint					492.00
Miscellaneous					1,700.00
Subtotal					**5,417.83**
Sales Tax					0.00
Grand Total					**5,417.83**
Net Total					**5,417.83**

Estimate Version	Total $
Original	5,039.83
Supplement S01	378.00

Insurance Total $:	5,417.83
Received from Insurance $:	0.00
Balance due from Insurance $:	5,417.83
Customer Total $:	0.00
Received from Customer $:	0.00
Balance due from Customer $:	0.00

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

OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0006

Telephone (515) 281-5834

July 8, 2026

Kristi Onstot
Executive Council

Subject: Hail Damage to Vehicle #78 on May 16, 2026
Department of Administrative Services
Claim dated June 1, 2026
AOS Claim ID: 4387

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-mentioned 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 $5,505.83, subject to an audit of actual invoices.

Sincerely,

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: September 4, 2026

To: AOS, Auditor of State
Executive Council, Treasurer of State

Re: REIMBURSEMENT REQUEST - 29C20

AOS Claim #	4387
DAS Claim #	341118
Vehicle / Event	78-528633 / Hail
Event Date	05/17/2026 at
Summary	Hail
Amount Requested	5,417.83

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.

Ryan Betts
Fleet Services Risk Program Manager
Iowa Department of Administrative Services
510 E 12th Street, Des Moines, IA 50319
(515) 281-8008
das.risk@das.iowa.gov