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 ……...……..... $13,228.37
On June 11, 2026, Vehicle #595 was damaged by hail. Request was to cover repair costs.

This represents full and final payment, $42.35 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 4403
TOS Job # 3136

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 #595 on June 11, 2026
Department of Administrative Services
Claim dated June 25, 2026
AOS Claim ID: 4403

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		$ 13,228.37
Executive Council Allocation		$ 13,270.72
Less:		
Previous payments	$ 0.00	
This payment	13,228.37	
Total		$ 13,228.37
Remaining Executive Council allocation		$ 42.35

We recommend reimbursement be made in the amount of $13,228.37. 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: 343629 as of 09/18/2026

Claim Number	DAS Vehicle Number	State Driver	Vehicle Agency	Loss Date	Status	Total Incurred
343629	595-422603	Blake Lefler		06/11/2026	Open	12,516.37

ADMIN Only Claim Status

Overall Claim Status:	Closed	Total Loss Status:	
Overall Claim Status Date:	09/08/2026	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:	09/18/2026	Subrogation Status Date:	
Repair Status:	Closed-Repaired	TORT Status:	
Repair Status Date:	09/08/2026	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	13,270.72	12,647.21	Karl Chevrolet	21113D	Yes	✖
09/08/2026 2:05 PM	Supplemental Estimat...	581.16	581.16	Karl Chevrolet	21113D	Yes	✖
		13,851.88	**13,228.37**				

ADMIN Only Invoicing

Repair Costs

Bodyshop Repair Amount:	13,228.37
Towing Amount:	
Storage Amount:	
Other Amount:	
Final Total:	13,228.37

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

Bodyshop Payment Date:	09/08/2026
Bodyshop Name:	Karl Chevrolet
Bodyshop MA Number:	21113D
Communication Preference:	Email

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:	09/18/2026

AOS Notification Date:

Triggers Allocation Request to AOS (AON2)

Allocation Request Date: 06/25/2026

Allocation Request Amount: 13,270.72

Triggers 29C20 status update only (AON3)

AOS Recommendation date: 07/16/2026

AOS Claim Number: 4403

Reimbursement Amount Requested: 13,228.37

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:	343629	More than 1 driver involved?	
Claimant:	Blake Lefler	More than 1 vehicle involved?	
Accident Date:	06/11/2026	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:	Blake	Driver's DoB:	
Driver's Last Name:	Lefler	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:	3GCUD4EDXRG422603	Tow Required?	
DAS Vehicle Number:	595-422603	Towed by what Company?	
Vehicle License Plate Number (if different than vehicle number)	JJM511	Towed to where?	
		Vehicle Mileage:	
VIN:	3GCUD4EDXRG422603	Brief Description of Vehicle Damage:	Hail
Vehicle Year:	2024		
Vehicle Make:	CHEVROLET		
Vehicle Model:	SILVERADO		
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	
343629 Supp1.pdf	Estimates	Estimate - Supplemental		✖
343629 Final Invoice.pdf	Invoices	Invoice - Bodyshop Final		✖
Payment Request Cover Sheet.pdf	Invoices	Invoice - Payment Cover Sheet	Payment Request Cover Sheet	✖
4403 Allocation Request Letter AOS-Signed.pdf	29C20	29C20 Allocation Letter from AOS		✖
343629 Proof of Payment.png	Proof of Payment	Proof of Payment - Bodyshop		✖
29C20 Reimbursement Request Summary - 2026-07-27.pdf	29C20	29C20 Reimbursement Request Summary		✖

Key Workflow Contacts

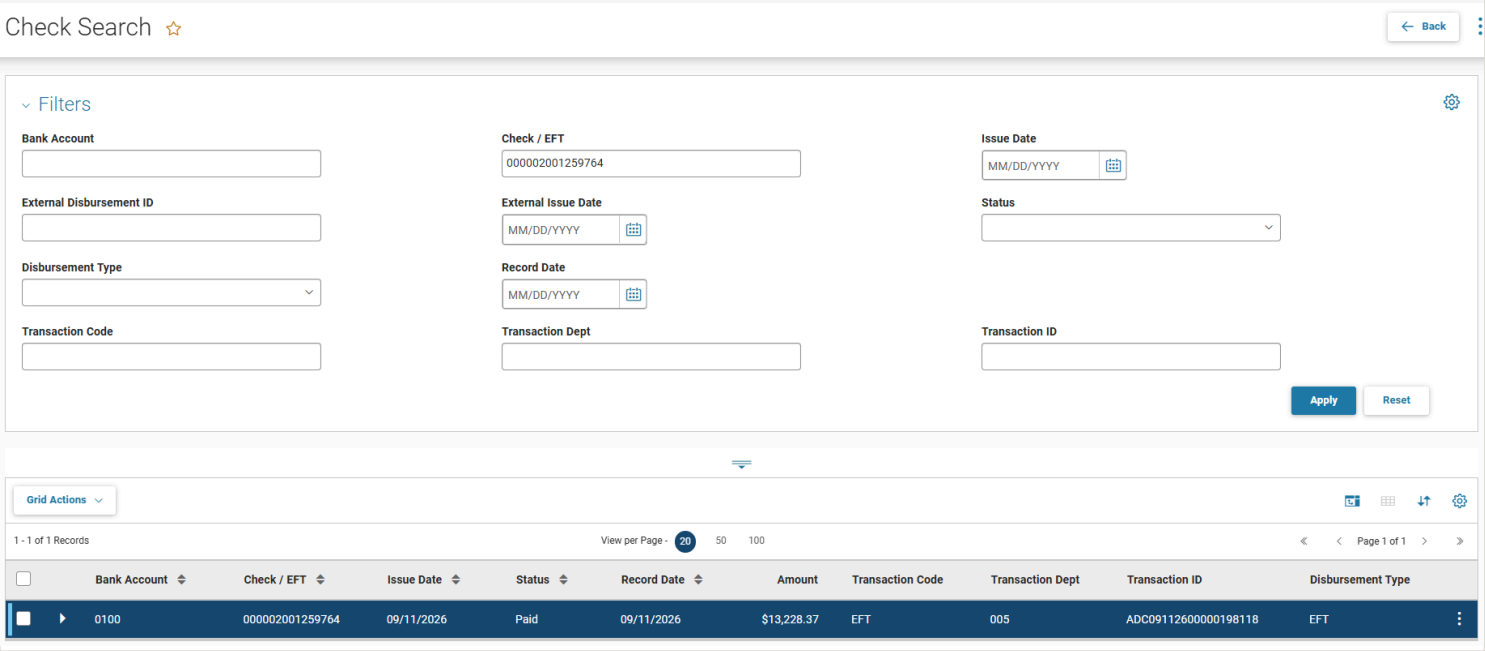
Fleet Admin MGR Contact:	Fucaloro, Mariah
Fleet Admin Contact:	Betts, Ryan
Fleet Finance Contact:	Wear, Kyle
Fleet Inbox:	Betts, Ryan
AOS 29C20 Contact:	AOS,
TOS 29C20 Contact:	ExecutiveCouncil@TOS.Iowa.Gov,
DPS Primary Contact:	Adams, Jeannie
Fleet Salvage Dispatch Contact:	Kieffer, Michelle
Fleet MA 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	09/18/2026	159kb
343629 Proof of Payment.png		Proof of Payment	Ryan Betts	09/18/2026	73kb
4403 Allocation Request Letter AOS-Signed.pdf		29C20	Ryan Betts	09/18/2026	127kb
Payment Request Cover Sheet.pdf	Payment Request Cover Sheet	Invoices	Ryan Betts	09/08/2026	43kb
343629 Final Invoice.pdf		Invoices	Ryan Betts	09/08/2026	876kb
343629 Supp1.pdf		Estimates	Ryan Betts	09/08/2026	212kb

Images

343629 Proof of Payment.png



1-35 AT EXIT 90
1101 S.E. ORALABOR
ANKENY, IOWA 50021
PHONE (515) 299-4402
TOLL FREE 1-800-622-8264

www.karlchevrolet.com

0101ICTCB659309

CELL: 712-254-0550

CUSTOMER NO.	ADVISOR	TAG NO.	INVOICE DATE	INVOICE NO.
8641	JOSEPH SINGLETON 4310	3695	08/12/26	CTCB659309

STATE OF IOWA
510 SE 12TH
DES MOINES, IA 50319

[redacted]

LABOR RATE	LICENSE NO.	MILEAGE	COLOR	STOCK NO.
		32,298	BLACK/JET B	25014

YEAR / MAKE / MODEL	DELIVERY DATE	DELIVERY MILES
24/CHEVROLET TRUCK/SILVERADO 1500/4W	10/21/24	12

VEHICLE I.D. NO.	SELLING DEALER NO.	PRODUCTION DATE
3GCUD4EDXRG422603		

F.T.E. NO.	P.O. NO.	R.O. DATE
CITY		07/15/26

COMMENTS

MO: 32298

JOB# 1 CHARGES

LABOR

J# 1 96CTZ BODY REPAIR TECH(S):4162 3698.10
REPLACE ROOF, HOOD, RT FENDER, RT TAIL LIGHT

PARTS QTY	FP	NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	
1		84610675	HOOD 8.000 N	1253.89	1090.34	1090.34
1		84502611	FENDER 8.130 N	741.77	645.02	645.02
1		84632695	PLATE 8.147 N	79.98	69.55	69.55
1		84688136	PANEL 16.585 N	1708.60	1485.74	1485.74
1		86823800	MOLDING 16.642 N	29.52	25.67	25.67
1		86823799	MOLDING 16.642 N	48.36	42.05	42.05
8		11611049	NUT 8.917 Y	8.66	7.53	60.24
1		85821131	LAMP 2.679 N	556.30	556.30	556.30
1		19354745	LABEL 8.808 N	49.37	42.93	42.93
			NON RETURNABLE 3GCUD4EDXRG422603			
-1		85821131	CORE RETURN	125.00	125.00	-125.00
					TOTAL - PARTS	3892.84

SUBLET PO#	VEND INV#	INV.DATE	DESCRIPTION	
236115		08/03/26	pdr 36	2200.00
236197	1786	08/10/26	DW2841 INV#1786	650.00
			TOTAL - SUBLET	2850.00

MISC CODE	DESCRIPTION	CONTROL NO	
1HG	HAZARDOUS AND GLASS		3.00
OSB	OTH SUPPLIES-BODY		392.43
		TOTAL - MISC	395.43

JOB# 1 TOTALS

LABOR	3698.10
PARTS	3892.84
SUBLET	2850.00
MISC	395.43
JOB# 1 JOURNAL PREFIX CTCB JOB# 1 TOTAL	10836.37

JOB# 2 CHARGES

LABOR

J# 2 96CTZ020 PAINTLESS DENT REMOV TECH(S):4310 5137 0.00
PDR RT SIDE OF VEHICLE DUE TO HAIL

MISC CODE	DESCRIPTION	CONTROL NO	
1PM	PAINT & MATERIAL		850.00
		TOTAL - MISC	850.00

JOB# 2 TOTALS

MISC	850.00
JOB# 2 JOURNAL PREFIX CTCB JOB# 2 TOTAL	850.00

JOB# 3 CHARGES

LABOR

THE SELLING DEALER MAKES NO WARRANTY OF ANY KIND WHATSOEVER AS TO THE MERCHANTABILITY OF THE PRODUCTS LISTED HEREON OR AS TO THEIR FITNESS FOR ANY PARTICULAR PURPOSE. ANY WARRANTY WHICH MAY EXIST IS AN AGREEMENT SOLELY BETWEEN THE MANUFACTURER AND THE PURCHASER.

[CONTINUED ON NEXT PAGE]

The Reynolds and Reynolds Company ERAINTINVE
SF684131 Q (12/22)

1-35 AT EXIT 90
1101 S.E. ORALABOR
ANKENY, IOWA 50021
PHONE (515) 299-4402
TOLL FREE 1-800-622-8264

www.karlchevrolet.com

0101ICTCB659309

CELL: 712-254-0550

CUSTOMER NO.	ADVISOR	TAG NO.	INVOICE DATE	INVOICE NO.
8641	JOSEPH SINGLETON 4310	3695	08/12/26	CTCB659309

STATE OF IOWA
510 SE 12TH
DES MOINES, IA 50319

[redacted]

LABOR RATE	LICENSE NO.	MILEAGE	COLOR	STOCK NO.
		32,298	BLACK/JET B	25014

YEAR / MAKE / MODEL	DELIVERY DATE	DELIVERY MILES
24/CHEVROLET TRUCK/SILVERADO 1500/4W	10/21/24	12

VEHICLE I.D. NO.	SELLING DEALER NO.	PRODUCTION DATE
3 G C U D 4 E D X R G 4 2 2 6 0 3		

F.T.E. NO.	P.O. NO.	R.O. DATE
CITY		07/15/26

COMMENTS

MO: 32298

LABOR----------
J# 3 95CTZ BODYSHOP REFINISH TECH(S):5137 1085.50
REFINISH HOOD, ROOF, RT FENDER, RT BOX SIDE

JOB# 3 TOTALS----------
LABOR 1085.50

JOB# 3 JOURNAL PREFIX CTCB JOB# 3 TOTAL 1085.50
JOB# 4 CHARGES----------

LABOR----------
J# 4 93CTZ PRE SCAN FOR CODES TECH(S):5137 37.50
PRE SCAN VEHICLE FOR CODES

JOB# 4 TOTALS----------
LABOR 37.50

JOB# 4 JOURNAL PREFIX CTCB JOB# 4 TOTAL 37.50
JOB# 5 CHARGES----------

LABOR----------
J# 5 93CTZ002 PROGRAM MODULES TECH(S):5137 299.00
PROGRAM MODULES

JOB# 5 TOTALS----------
LABOR 299.00

JOB# 5 JOURNAL PREFIX CTCB JOB# 5 TOTAL 299.00
JOB# 6 CHARGES----------

LABOR----------
J# 6+96CTZ001 BODY REPAIR TECH(S):4162 INTERNAL
Added Operation (JOSING10 @ 08/06/2026 08:27)
KARL CHEVROLET
ROOF PANEL TO 2U 3U
84688136

JOB# 6 TOTALS----------

JOB# 6 JOURNAL PREFIX CTCB JOB# 6 TOTAL 0.00
JOB# 7 CHARGES----------

LABOR----------
J# 7+96CTZ002 BODY REPAIR TECH(S):4162 120.00
Added Operation (JOSING10 @ 08/11/2026 09:48)
remove airbags

JOB# 7 TOTALS----------
LABOR 120.00

JOB# 7 JOURNAL PREFIX CTCB JOB# 7 TOTAL 120.00

COMMENTS----------
CTA

THE SELLING DEALER MAKES NO WARRANTY OF ANY KIND WHATSOEVER AS TO THE MERCHANTABILITY OF THE PRODUCTS LISTED HEREON OR AS TO THEIR FITNESS FOR ANY PARTICULAR PURPOSE. ANY WARRANTY WHICH MAY EXIST IS AN AGREEMENT SOLELY BETWEEN THE MANUFACTURER AND THE PURCHASER.

 [CONTINUED ON NEXT PAGE] 03:21pm

The Reynolds and Reynolds Company ERAINTINVE
SF684131 Q (12/22)

1-35 AT EXIT 90
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PHONE (515) 299-4402
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www.karlchevrolet.com

0101ICTCB659309

CELL: 712-254-0550

CUSTOMER NO.	ADVISOR	TAG NO.	INVOICE DATE	INVOICE NO.
8641	JOSEPH SINGLETON 4310	3695	08/12/26	CTCB659309

STATE OF IOWA
510 SE 12TH
DES MOINES, IA 50319

[redacted]

LABOR RATE	LICENSE NO.	MILEAGE	COLOR	STOCK NO.
		32,298	BLACK/JET B	25014

YEAR / MAKE / MODEL	DELIVERY DATE	DELIVERY MILES
24/CHEVROLET TRUCK/SILVERADO 1500/4W	10/21/24	12

VEHICLE I.D. NO.	SELLING DEALER NO.	PRODUCTION DATE
3 G C U D 4 E D X R G 4 2 2 6 0 3		

F.T.E. NO.	P.O. NO.	R.O. DATE
CITY		07/15/26

COMMENTS

MO: 32298

TOTALS----------

HERE AT KARL CHEVROLET INC WE APPRECIATE YOUR BUSINESS.
IF YOU ARE SATISFIED, PLEASE TELL A FRIEND. IF YOU ARE NOT
SATISFIED PLEASE TELL US.
PAYMENT METHODS:
[ ] CASH [ ] VISA/MC [ ] AMERICAN EXPRESS
[ ] CHECK W/#..... [ ] ACCT. REC.
CUSTOMER REQUIRED WHEELS RETORQUED 50-100 MILES FROM SERVICE
24 MONTH UNLIMITED MILE WARRANTY ON ALL GM PARTS INSTALLED
GSP LIFETIME WARRANTY PARTS ARE IDENTIFIED BY AN ASTERIK (*)
PARTS REPLACED DURING THE FACTORY WARRANTY PERIOD HAVE A 12
MONTH OR REMAINDER OF BUMPER TO BUMPER WHICHEVER IS GREATEST
AFTERMARKET PARTS WARRANTIES EXCLUDE LABOR
OUR SERVICE DEPARTMENT IS OPEN 6 DAYS A WEEK,
MON-THUR 6:30 AM-6 PM, FRI 6:30 AM-6 PM, SAT 7:00 AM-12PM
CERTIFIED LUBE CENTER M-FRI 6AM-6PM SAT 7AM-4PM

TOTAL LABOR....	5240.10
TOTAL PARTS....	3892.84
TOTAL SUBLET...	2850.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	1245.43
TOTAL MISC DISC	0.00
TOTAL TAX.....	0.00
TOTAL INVOICE $	**13228.37**

CUSTOMER SIGNATURE

THE SELLING DEALER MAKES NO WARRANTY OF ANY KIND WHATSOEVER AS TO THE MERCHANTABILITY OF THE PRODUCTS LISTED HEREON OR AS TO THEIR FITNESS FOR ANY PARTICULAR PURPOSE. ANY WARRANTY WHICH MAY EXIST IS AN AGREEMENT SOLELY BETWEEN THE MANUFACTURER AND THE PURCHASER.

CUSTOMER COPY

[END OF INVOICE] 03:21pm

The Reynolds and Reynolds Company ERAINTINVE
SF684131 Q (12/22)

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 16, 2026

Kristi Onstot
Executive Council

Subject: Hail Damage to Vehicle #595 on June 11, 2026
Department of Administrative Services
Claim dated June 25, 2026
AOS Claim ID: 4403

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 $13,270.72, 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

IOWA | Department of Administrative Services

KIM REYNOLDS, GOVERNOR
CHRIS COURNOYER, LT. GOVERNOR

MARK CAMPBELL, DIRECTOR

Date: September 18, 2026

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

Re: REIMBURSEMENT REQUEST - 29C20

AOS Claim #	4403
DAS Claim #	343629
Vehicle / Event	595-422603 / Hail
Event Date	06/11/2026 at
Summary	Hail
Amount Requested	13,228.37

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