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 ……...……..... $2,420.80
On June 11, 2026, Vehicle #2544 was damaged by hail. Request was to cover repair costs.

This represents full and final payment, $63.80 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 4407
TOS Job # 3139

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 17, 2026

Kristi Onstot
Executive Council

Subject: Hail Damage to Vehicle #2544 on June 11, 2026
Department of Administrative Services
Claim dated June 19, 2026
AOS Claim ID: 4407

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		$ 2,420.80
Executive Council Allocation		$ 2,484.60
Less:		
Previous payments	$ 0.00	
This payment	2,420.80	
Total		$ 2,420.80
Remaining Executive Council allocation		$ 63.80

We recommend reimbursement be made in the amount of $2,420.80. 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: 342944 as of 08/24/2026

Claim Number	DAS Vehicle Number	State Driver	Vehicle Agency	Loss Date	Status	Total Incurred
342944	2544-183322	Trish Eivins		06/12/2026	Open	1,708.80

ADMIN Only Claim Status

Overall Claim Status	Closed	Total Loss Status	
Overall Claim Status Date	07/10/2026	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	08/24/2026	Subrogation Status Date	
Repair Status	Closed-Repaired	TORT Status	
Repair Status Date	07/10/2026	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	400 - Health and Human Services
Object Struck Description		Driver's Agency Number	400
Contributing Circumstances		Driver's Agency Name	HHS
		Driver's Agency Email	brenda.stish@hhs.iowa.gov
Accident Description ADMIN	Hail	Vehicle's Agency	
		Vehicle's Agency Number	400
Incident Review Date		Vehicle's Agency Name	HHS
	Populating this field will send an alert to the Driver's Agency Fleet contact that an accident has occurred	Vehicle's Agency Email	brenda.stish@hhs.iowa.gov

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	2,484.60	2,420.80	LTs Auto Body and Repair		Yes	✖
		2,484.60	**2,420.80**				

ADMIN Only Invoicing

Repair Costs

Bodyshop Repair Amount	2,420.80
Towing Amount	
Storage Amount	
Other Amount	
Final Total	2,420.80

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

Bodyshop Payment Date	
Bodyshop Name	Other
Bodyshop MA Number	
Communication Preference	Phone Call

ADMIN Only 29C20

Triggers Initial Notification to AOS from the Incident Form!!

Claim Type	Hail
AOS Notification Date	

Triggers Allocation Request to AOS (AON2)

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

Reimbursement Request Date	08/24/2026
Reimbursement Amount Requested	2,420.80

Allocation Request Date 06/19/2026
Allocation Request Amount 2,484.60

Triggers 29C20 status update only (AON3)

AOS Recommendation date 07/16/2026
AOS Claim Number 4407

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 Department Name
CRS Claimants

CRS Claim Created
CRS Claim Type
CRS Fee 0.00

CRS Date of Loss

CRS Reviewed

CRS Review Notes

Accident Details

Claim Number	342944
Claimant	Trish Eivins
Accident Date	06/12/2026
Accident Time	
Accident Street/Location	
Accident City	
Accident State	
Accident Postal	
Accident County	
Incident Contact Email Address	
DSP Incident?	

More than 1 driver involved?	
More than 1 vehicle involved?	
Accident Description Quick	
Accident Description Full	

Click **Edit Collision Diagram** below to complete an a diagram of the accident.

State Driver Details

Driver's First Name	Trish
Driver's Last Name	Eivins
Drivers License Number	
Drivers License State	

Driver's DoB	
Driver's Phone Number	

Other Driver Details

Driver 2 First Name	
Driver 2 Last Name	
Driver 2 License Number	
Driver 2 License State	

Driver 2 DoB	
Driver 2 Phone Number	
Driver 2 Email Address	

State Vehicle Details

Vehicle	2C4RDGBG4GR183322
DAS Vehicle Number	2544-183322
Vehicle License Plate Number (if different than vehicle number)	
VIN	2C4RDGBG4GR183322
Vehicle Year	2016
Vehicle Make	DODGE
Vehicle Model	GRAND CARAVAN
Fund Source	

Tow Required?	
Towed by what Company?	
Towed to where?	
Vehicle Mileage	
Brief Description of Vehicle Damage	Hail

Other Vehicle Details

Vehicle 2 License Plate Number	
Vehicle 2 VIN	
Vehicle 2 Year	
Vehicle 2 Make	
Vehicle 2 Model	
Vehicle 2 Require Tow	
Vehicle 2 Towed by what Company?	
Vehicle 2 Towed to where?	
Vehicle 2 Mileage	
Vehicle 2 Description of Damage	

Other Vehicle Insurance Information

Insurance Company Name	
Address	
City	
State	
Zipcode	
Agent's Name	
Agent's Phone	
Agent's Email	
Policy #	

Conditions

Location Type	
Weather Conditions	

Surface Conditions	
Vision Obscured	

Light Conditions

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
4407 Allocation Request Letter AOS-Signed.pdf	29C20	29C20 Allocation Letter from AOS	
342944 - 2544 Final Invoice (1).pdf	Invoices	Invoice - Bodyshop Final	
Proof of Payment 342944.png	Proof of Payment	Proof of Payment - Bodyshop	
29C20 Reimbursement Request Summary - 2026-07-27.pdf	29C20	29C20 Reimbursement Request Summary	

Key Workflow Contacts

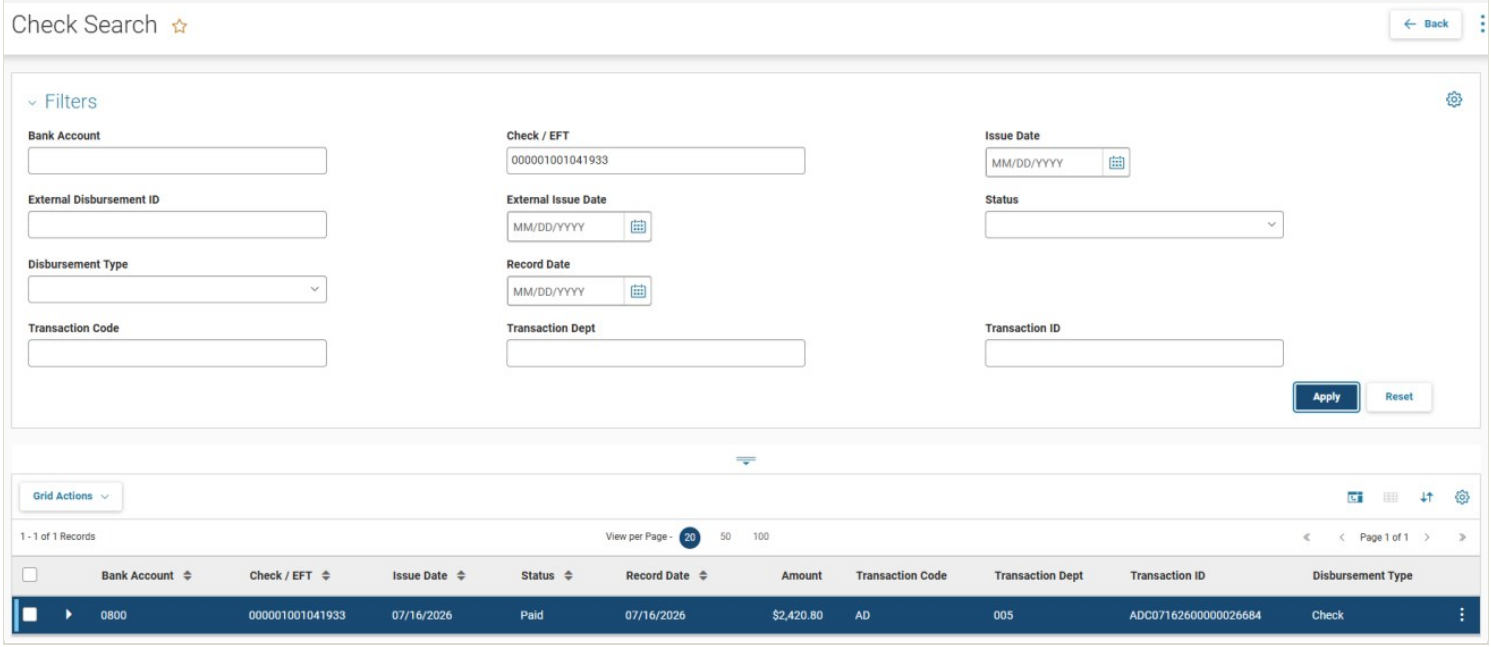
Fleet Admin MGR Contact	Fucaloro, Mariah
Fleet Admin Contact	Betts, Ryan
Fleet Finance Contact	Wear, Kyle
Fleet Inbox	Betts, Ryan
AOS 29C20 Contact	AOS,
TOS 29C20 Contact	ExecutiveCouncil@TOS.Iowa.Gov,
DPS Primary Contact	Adams, Jeannie
Fleet Salvage Dispatch Contact	Kieffer, Michelle
Fleet MA Contact	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	08/24/2026	158kb
Proof of Payment 342944.png		Proof of Payment	Ryan Betts	08/24/2026	72kb
342944 - 2544 Final Invoice (1).pdf		Invoices	Ryan Betts	08/24/2026	77kb
4407 Allocation Request Letter AOS-Signed.pdf		29C20	Ryan Betts	08/24/2026	127kb

Images

Proof of Payment 342944.png



OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
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State Capitol Building
Des Moines, Iowa 50319-0006

Telephone (515) 281-5834

July 16, 2026

Kristi Onstot
Executive Council

Subject: Hail Damage to Vehicle #2544 on June 11, 2026
Department of Administrative Services
Claim dated June 19, 2026
AOS Claim ID: 4407

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 $2,484.60, 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

INVOICE

AUTO BODY & REPAIR LLC.

506 NW. Vine St.
Decatur, IA 50067
641-446-3200

DATE 7-7-26
INVOICE # 1251

BILL TO:
Clarke State of Iowa

Description	QTY	Price	Amount
Parts			1,560.00
Paint + Materials			270.40
Labor			590.40
		Subtotal	
		Tax	Exempt
		Total	$2,420.80

Date: August 24, 2026

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

Re: REIMBURSEMENT REQUEST - 29C20

AOS Claim #	4407
DAS Claim #	342944
Vehicle / Event	2544-183322 / Hail
Event Date	06/12/2026 at
Summary	Hail
Amount Requested	2,420.80

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