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. MICHAEL L. NAIG SECRETARY OF AGRICULTURE SEAL SEAL

Executive Council of Iowa

CAPITOL BUILDING DES MOINES, IOWA 50319 PHONE: 515 281-5368

September 5, 2023

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

The Executive Council, in a meeting held on today's date, approved the Department of Public Safety's request for a supplemental emergency allocation in the amount of \$7,177.48. On July 4, 2022, Vehicle #383 was damaged by a deer. Request was to cover repair costs.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton Executive Secretary

cc: Jeannie Adams, Iowa State Patrol, Department of Public Safety Mariah Flowers, Fleet Services Manager, Department of Administrative Services Joel Lunde, Department of Management



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 Facsimile (515) 281-6518

August 22, 2023

Victoria Newton Executive Council L O C A L

Subject: Damage to Vehicle #383 Due to Hitting a Deer on July 4, 2022 Department of Public Safety – Iowa State Patrol Claim dated July 27, 2023 AOS Claim ID: 2330

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 Public Safety – Iowa State Patrol is covered by Chapter 29C.20 of the Code of Iowa. Therefore, we recommend an Executive Council allocation in the amount of \$7,177.48, subject to an audit of <u>actual</u> invoices.

Sincerely,

Ernest H. Ruben, Jr., CPA Deputy Auditor of State

cc: Jeannie Adams, Iowa State Patrol, Department of Public Safety Mariah Flowers, Fleet Services Manager, Department of Administrative Services Joel Lunde, Department of Management



Governor Kim Reynolds Lt. Governor Adam Gregg

Adam Steen, Director

Date: July 27, 2023

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: ALLOCATION REQUEST - 29C20 Claim for Executive Council Consideration

Vehicle / Event	#383/Deer
Event Date	July 4, 2022
Summary	Vehicle 383 struck a deer. (240703)
Amount Requested	\$7,177.48 - Estimate
Supporting Documentation	29C20 Email Notification, Accident Report, Repair Estimate(s), Photos

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

Thank you,

Mariah Flowers, Fleet Manager DAS Fleet Services <u>Mariah.Flowers@iowa.gov</u> 515-414-6582



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

FW: State vehicle damage due to an act of nature/deer. 7-4-22 5:08 AM. 24 hour reporting.

1 message

Adams Jeannie <jadams@dps.state.ia.us> To: "ExecutiveCouncil [TOS]" <ExecutiveCouncil@tos.iowa.gov>, Tammy Hollingsworth <Tammy.Hollingsworth@aos.iowa.gov> Cc: "Risk, DAS (das.risk@iowa.gov)" <das.risk@iowa.gov>

Tue, Jul 5, 2022 at 8:26 AM

Good morning Please accept this as out 24 hour notification for 383, Trp. Wiltfang. While on duty July 4th Trp. Wiltfang hit a deer. (our offices were closed yesterday)

Thank you

Jeannie Adams ISP Fleet & Supply, Fleet Asset Manager Department of Public Safety 30 N.E. 48th Place Des Moines, Iowa 50313 Direct #: 515-725-0643 Cell Phone: 515-204-3019 Shop: 515-281-3277 Fax: 515-242-6321 Email: jadams@dps.state.ia.us<mailto:jadams@dps.state.ia.us>

[jobs]<https://dps.iowa.gov/divisons/administrative-services/dps-careers/47th-basic-academy>

From: Burns Frank <burns@dps.state.ia.us> Sent: Monday, July 4, 2022 10:30 PM To: DAS.Risk (DAS.Risk@iowa.gov) <DAS.Risk@iowa.gov>; vehicledamage <vehicledamage@dps.state.ia.us>; post11sup <post11sup@dps.state.ia.us> Subject: State vehicle damage due to an act of nature/deer. 7-4-22 5:08 AM. 24 hour reporting.

All-

Please see the attached items. Trooper Aadam Wiltfang #383 hit a deer at 5:08 AM this morning, 7-04-2022.

I am sending this to meet the 24 hour notification requirements for vehicle damage due to an act of nature.

Trooper Wiltfang will be contacting Premier Automotive in North Liberty Iowa tomorrow morning to arrange for an estimate.

I will forward that estimate when it is completed.

I have sent the Line of Duty Certification to the DOT.

Thank you,

Frank

183 Sergeant Frank J. Burns #183 Iowa State Patrol Post 11 5400 16th Ave SW Cedar Rapids, IA 52404 burns@dps.state.ia.us<mailto:burns@dps.state.ia.us> Office 319.396.1944 *NOTICE* This email message (including any file attachments transmitted with it) is for the sole use of the intended recipient(s) and may contain confidential and legally privileged information. Any unauthorized use or disclosure of this email by an unintended recipient is prohibited. If you have received this e-mail in error please notify the sender by return e-mail and destroy all copies of the original message. No representation is made that this email or any attachments are free of viruses. Virus scanning is recommended and is the responsibility of the recipient.

9 attachments



ISP 383 Vehicle damage pic #1.jpg 596K



ISP 383 Vehicle damage pic #2.jpg 422K



ISP 383 Vehicle damage pic #3.jpg 548K



ISP 383 Vehicle damage pic #4.jpg 525K

6/27/23, 11:17 AM



ISP 383 Vehicle damage pic #5.jpg 741K

image001.png

92K



DPSCAPEEPS COM

- 383 Crash Report-Deer-2022016774.pdf 90K
- 383 State vehicle damage report 7-04-22.doc
 97K

State Vehicle Damage Report

Attach this completed form to an email along with the items identified below and send to: *vehicledamage@dps.state.ia.us*; *das.risk@iowa.gov*

> One Repair Estimate from Approved State Bid Shop

- > DOT MARS Report (if reportable)
- > Memo from the Driver of the State Vehicle
- > 3-4 photos of the vehicle damage

***Sworn Officers only: Complete a Line of Duty Form #432037 and send to DOT if 10-50 was reportable!!!

STATE VEHICE	_ . ("	lark il Act of i	Valuices OAOL #.	2022010114			
Date:	7-04	-2022	Time:	5:08 AM			
(Month/Day/Year)			(Time plus a.m./p.m.)				
Vehicle Plate #:	383		Vehicle Mileage:	81,253			
Vehicle							
Description: (Yr/Make/Model/ & Vin#)	201	9 Dodge Char	ger/Silver. VIN# 2C30	CDXKT5KH622758			
Assigned To:	Aad	am Wiltfang	Badge #	383			
Driven By:	Aad	am Wiltfang	Badge #	383			
Driver's Lic #:	141	AC3722	Damage:	5,000			
Vehicle Towed: (Yes / No)	NO		Towed By:	NA			
Towed To:	Driv	en home	Towing Cost:	\$NA			
Seat Belt: (Yes / No)	YES	5	Type of Vehicle: (Marked/Semi /Unmarked)	Marked			
Injured/Injuries:		Uninjured					
Occupants: (Other than driver)		None					

STATE VEHICLE: (Mark if Act of Nature⊠) CASE #: 2022016774

VEHICLE #2:

DL #:	NA	State:	
Vehicle Lic. #		State:	
Driver's Name:			
Driver's Address:			
Owner's Name:			
Owner's Address:			

Owner's Phone:		
Insurance Info: (Carrier/Policy #/Phone)		
Veh Description: (Yr/Make/Model & Vin#)		
Damage:	\$	Seat Belt: (Yes / No)
Injured/Injuries:		
Occupants: (Other than driver)		
Occupant(s) Weari	ng Seat Belt: (Yes/No)

OTHER INFORMATION:

Witnesses:	
Accident Location: (Street/Hwy)	
County:	
Weather/Road Conditions:	
Property Damage other than Vehicles:	None
Cost:	\$
Citations Issued To: (List Charge(s) and Statute Code(s))	

Investigating Officer:

VEHICLE #3: (If needed) (For more vehicles, please make extra copies of this portion)

DL #:	State:	
Vehicle Lic. #	State:	
Driver's Name:		
Driver's Address:		
Owner's Name:		

Owner's Address:						
Owner's Phone:						
Insurance Info: (Carrier/Policy #/Phone)						
Veh Description: (Yr/Make/Model & Vin#)						
Damage:	\$	Seat Belt: (Yes / No)	Yes			
Injured/Injuries:		· · · · · · · · · · · · · · · · · · ·				
Occupants: (Other than driver)						
Insurance Info: (Carrier/Policy #/Phone) Veh Description: (Yr/Make/Model & Vin#) Damage: \$ Seat Belt: (Yes / No) Yes Injured/Injuries: Occupants:						

Form 4433003 (11-13)

INVESTIGATING OFFICER'S REPORT OF MOTOR VEHICLE ACCIDENT

Sheet 1 of 3

Law Enforcement Case Number: 2022016774

MAIL REPORTS TO: Iowa Department of Transportation, Office of Driver Services, P.O. Box 9204, Des Moines, Iowa 50306-9204

Date	e of Accident	Time	of Accid	ent Co	ounty				,1.0.00			ccurred v			rate limi	ts of (city)	1						
07/0	4/2022	05:08		rs. 10	WA -	48				_														
U	Driver's Nam	ne - Las	st							First								Midd						
N	Address									_	AADAM City							EDW						
ï	5400 16TH	AVE SV	v							1 .	CEDAR RAPIDS					State Zip IA 52404								
T	Date of Birth		Driver	's Licen	se Nu	mber		CDL	Cit							1000	Charge 2							
1	02/05/1985		141A													onarge								
Ľ.	Male Femal	e Stat	e Clas	s Endo	rsem	ents	Restrictio	ns Yes	Cit	ation Cl	narge	3				c	itation	Charge 4						
	\odot \bigcirc	IA	_				В	O	\odot								-							
	Alcohol Test	Given:	Test	Results	:	Drug	Test Giver	n: Test	Result:	Re-e	xam:	Yes No		Reason	for Re-	Exam	Reque	st:						
	1 Owner's Nar					1				First		\bigcirc	21											
	STATE OF I									First								Midd	le					
	Address							City								State	Zip)						
	109 SE 13 S	т.									MOIN	IES						IA		319				
	License Plate	e No.	State	Year	VIN:						r	2010	Ţ	rear	Make			Mode	I Style			е		
	383		IA	2022			T5KH6227	58		SIL			1	2019	DODG			CHAI	RGEF	2	PO		RUISE	
	Trailer Plate No. State Year VIN:								Tow	To	w #			Towed	То						air or Rep	lace		
	Insurance Co	Insurance Company Name						10			1 Insurance Co. Phone Number			Incurren		aliau M			,000.0	00				
	STATE OF IOWA									396-		e N	umber	Insurat SELF			umber							
	Initial Travel	Directio	on Veh	Act.	Veh. (Config.	Cargo B	ody Type	Veh.			t of Initial	Imp	act M				Extent	of Da	mage	Tota	Occ.	in Veh.	
				1	98		01														1			
	Special Veh.		-	•					Vision	n Obscured Contributing Circumstances D 88					s Driver (up to two) Driver Dist					istractions Speed Limit				
	Traffic Controls Horizontal Alignment Vertical Alignment SEQUENC OF EVENT									irst Ev	ent	Sec	ond Eve	ent Thi	rd Ev	ent	Fourt	h Eve	nt N	/lost H	armful	Event		
c	Carrier Name/Lessee																							
C	Street Address								Loin.			_						1-1-1						
0 M	Street Addre	55								City State Zip Code														
M	Number of A	xles	Gro	oss Veh	icle W	/eight	Rating			US D	US DOT Number MC Number					Underride/Override								
E																								
R C	Haz Mat Invo	olvemer	nt Ha	z Mat P	acard	Pla	card Numb	ber Haz	. Mat Re	Released Haz Mat Class Haz Mat Name														
A	Trailer Plate:		Sta	te Ye	ar	VIN											ction	ent			ed	port	route	
L	Trailer Plate:		Sta	te Ye	ar	VIN									Seating Position	Status	Occupant Protection	Airbag Deployment		on Path	Trapped/extricated	Source of Transport	at scene/enroute	
	Converter Do	olly	Do	ly Plate	:	Stat	te Plate Y	'ear VIN						Sex	teating	lnjury S	occupa	irbag I	Ejection	Ejectior	rapped	ource	Died at	
					- 252	Pho	ne Numbe	er: (319)	396-194	14				1	0	-	0	4	ш	<u> </u>		01	01	
Ρ	DRIN	/ER C)F UN	T 1			nsported to									Trans	ported	by:	1	1	E. Car	<u> </u>		
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ERSONN	Name							Phone N	umber	F1-5-		DOB:							1					
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JI UT	Name Phone Number							1		DOB:							1			Γ				
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	Address									Transp	ported	to:				Trans	ported	by:		L				

Form 4433003 (11-13)

INVESTIGATING OFFICER'S REPORT

Sheet 2 of 3

MA	IL REPORTS TO: lowa	Departme	ent of Transp	ortation, Offi	ce of Drive				LE ACCI							Law E 20220			nt Cas	se Nu	mber	:
	Date of Accident 07/04/2022		Accident	County IOWA - 48					ent occurred			ate li	mits o	f (city)	Legal Interv		n? [Private Prope		
000	Literal Description 110TH ST .5 MILE	S EAST														Count 48				Route	-	
A T	If accident occurre city limits show get	d outside	of		NN		SE S S	w w	\cap						_	X Coc						
0	On Road, Street of					At Intersection with:						596222.625 Y Coordinate:										
N	Note: Unless accid	lent occu	rred at an i	ntersection	which is	hich is completely described above, use the space below to give the exact							4633462									
	location from a mil		E E SE			W NW N N NE E SE S SW W NW (C							If Divided Highway, Provide Route (Cardinal) Travel Direction NB SB EB WB									
	Milepost	00) () () Definabl	e intersecti	<u>OC</u> ion,								NB					WB C)			
-	Number		bridge, c	or railroad o	crossing													<u> </u>				
Locat	ion of First Harmful Eve			Conditions (u	up to two)				ances Enviror							() ()				nces		
	Name 001				Roadway Type of Roadway Junction/Feature					<u>e</u>					,be	o impac	crash)		IJ	cumstai	port	nroute
Light	Conditions		Sunace C	onutions		FRA No	1.0	Inction/F	eature				y Unit h	atus	torist Ty	i (prior t	(prior to	Ę	quipme	ting Cir	of Trans	scene/e
First 31	Harmful Event (Cra	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes No	Ac	tivity L	ocation	Туре	Worke	rs Pres	sent	Sex	Struck by Unit No	Injury Status	Non-Motorist Type	Location (prior to impact)	Action ()	Condition	Safety Equipment	Contributing Circumstances	Source of Transport	Died at scene/enroute
N	Name 001					Ph	one Numb	er		DOB:												
O N M	Address:								Alcohol Te	st Give	en Te	st Re	sults:	Drug	g Te	st Giv	en F	Result	Ch	argeo	Yes	No
O T	Transported to:								Transporte	ed by:			<u></u>									\sim
O R	Name					Ph	one Numb	er		DOB:												
I S	Address:								Alcohol Te	st Give	en Te	st Re	sults:	Drug	g Te	st Give	en F	Result	Ch	arged	Yes	No
T S	Transported to:								Transporte	d by:				<u> </u>								
N P O R	If Property other the vehicles damaged		Object Da	amaged					1									Est	imate	e of D	amag	e
N O V P	Owner's Last Name	9			F	irst Name	э	Middle Name						Phone Number								
	Address			1 (10-30)	C	ity				Stat	e Z	ip Co	de			Was owner or tenant notified? 1 = Yes 2 = No 9 = Unknown						
I T	If Property other that vehicles damaged	an explain	Object Da	maged														_		e of Da		e
U L D	Owner's Last Name				F	irst Name	9			Midd	dle Nar	ne				Pho	ne Ni	umbe	r			
	Address		11		c	lity				Stat	e Z	ip Co	de							it noti Jnkno		
w	Last Name		First Nam	e	Addre	ISS				City			-	Stat	e	Zip Co				Num	5669/0000	
I T	Last Name		First Name	e	Addre	SS				City				Stat	e	Zip Co	de	PI	none	Num	per	
N E	Last Name		First Name	e	Addre	SS				City			_	Stat	e Z	Zip Co	de	PI	none	Numt	ber	
SS	Last Name		First Name	e	Addre	SS				City				Stat	eŻ	Zip Co	de	PI	none	Numt	per	-
-	Last Name		First Name	e	Addre	SS				City				Stat	e Z	Zip Co	de	PI	none	Numb	ber	
ls Th Y	is a Secondary Cras	sh?	Type of P	rimary Incid	dent						Roadv 07/04/			L nce D	ate			ent Cl		nce D	ate	
Signa	ature of Officer GEANT F BURNS		I		Badge 183	Number	Time Off 05:08	icer No	tified of Acc	05.00					Incid	ent Cl		nce Ti				
Nam	e of Agency	DIST 11			Date of 07/04/2			icer Arr	Hrs. ived At Sce	ne	05:08 Hrs. Total Roadway Clearance									ïme		
11-1-1-1-1	rt Reviewed By					Review	Investiga	ition ma	Hrs. ade at scene		000:00 T.I. No			0	ther	Techr	000:0 nical		igatir	ng Ag	ency	-
							YC	/	N 🔘													

Form 4433003 (11-13)

INVESTIGATING OFFICER'S REPORT OF MOTOR VEHICLE ACCIDENT

Sheet 3 of 3

Law Enforcement Case Number:

2022016774

MAIL REPORTS TO: Iowa Department of Transportation, Office of Driver Services, P.O. Box 9204, Des Moines, Iowa 50306-9204

	REPORTS TO: IOwa Department of mansportation, Onice of Driver Services, P.O. Box 3204, Des Molines, Iowa 30300-3204
DIAGRAM	10th SL 5 miles East of Y Ave.
N A	Unit 1 was traveling east on 110th St5 miles east of Y Ave when it struck a deer crossing the roadway. Marked Iowa State Patrol car ISP #383 **** Explain the Vehicle Configuration for Unit 1
R R A T	•
R A	
R A T I V	

Printed Date: 2/17/2023

PREMIER AUTOMOTIVE INC 2 LIONS DR NORTH LIBERTY, IA 52317

NORTH LIBERTY, IA 52317 (319) 626-7725, (319) 626-7729 (fax)

Est: Jordan Stick

INVOICE

RO #: 30945

STATE OF IOWA	19 DODG Charger Police AWD (Flee	et)
	Color:	OWNER PAY
	Type: PC 4D SED	Adjustor:
1	VIN: 2C3CDXKT5KH622758	Phone:
Home:	Prod Date: Plate:	Claim #: Deductible: 0
Work:	Odometer:	Loss Type:
Cell:	Engine: 8-5.7L Gasoline Sequ	
		P = Who Pays? (I = Insurance, C = Customer)

	T	1	T	<u> </u>		Pays?	I = Ins	urance, C		
Qty	Туре	Description	Part #	Amount	Sup #	Labor	Ор	Labor Units	Paint Units	Ρ
		FRONT BUMPER & GRILLE								1
	Parts Other	Bumper cover				Body	Rpr	4.0	2.5	1
		Add for Clear Coat							1.0	1
		2-TONE ON FRONT BUMPER		2			Ref		1.5	1
1	Parts New	RT Air duct -5%	68214812AA	53.06		Body	n Rep I			1
1	Parts New	Impact bar (UHS) -5%	68100209AF	362.90		Body	Rep	0.7		1
1	Parts New	REAR AIR DUCT -5%	68230702AB	47.17		Body	1			1
1	Parts AM	A/M CAPA Closure panel -5%	CH1224101C	157.70		Body	Rep	0.1		1
		FRONT LAMPS					1			1
	Parts Other	LT R&I headlamp assy		-14		Body	R&I	0.3		1
1	Parts AM	A/M CAPA RT Headlamp assy halogen -5%	CH2503337C	,696.16		Body	Rep I	0.4		I
1	Dente AM	Aim headlamps				Body	Rep	0.5		1
1	Parts AM	A/M CAPA RT Side marker lamp -5%	CH2551133C	31.59		Body	I	0.2		1
1	Parts AM	RADIATOR SUPPORT A/M CAPA Radiator support -5%	01140050000	070 45			Rep			1
'	Faits Aw		CH1225280C	276.45		Body	1	1.0	1.0	1
		Evacuate & recharge Refrigerant recovery HOOD				Mech Mech		1.4 0.4		
1	Parts AM	A/M CAPA Hood (ALU)	CH1230305P	908.82		Body	Rep	1.5	3.0	
		Add for Clear Coat A Add for Underside(Complete) FENDER					1		1.2 1.5	1
	Parts Other	LT Fender					Blnd		1.0	1
1	Parts AM	A/M CAPA RT Fender	CH1241282P	306.00		Body	Rep	1.6	2.0	1
		Overlap Major Adj. Panel Add for Clear Coat B Add for Edging	Ρ	a.		,			-0.4 0.3 0.5	-
	Parts Other	LT Fender liner 3.6, 5.7 liter				Body	R&I	0.3		Î
1	Parts AM	A/M CAPA RT Fender liner 3.6, 5.7 liter PILLARS, ROCKER & FLOOR	CH1249171C	112.10		Body	Rep I			1
	Parts	RT Aperture panel				Body	Rpr	1.0	2.0	1
	Other	Overlap Major Adj. Panel A		1		Douy	Nhi	1.0	2.0 -0.4	

Printed Date: 2/17/2023

Qty	Туре	Description	Part #	Amount	Sup #	Labor	Ор	Labor Units	Paint Units	
		Add for Clear Coat C FRONT DOOR						01113	0.3	
	Parts Other	RT Door shell (HSS)				Body	Rpr	8.0	2.1	
		Overlap Major Adj. Panel B Add for Clear Coat D							-0.4 0.3	1
	Parts Other	RT Frame molding				Body	R&I	0.3		
	Parts Other	RT Applique				Body	R&I	0.2		1
	Parts Other	RT Power mirror w/o heat, w/o memory, w/				Body	R&I	0.5		1
	Parts Other Parts	RT Handle, outside black				Body	R&I	0.4		1
	Other	RT R&I trim panel				Body	R&I	0.5		1
1	Parts New	RT Front w'strip	68040048AC	40.14		Body	Rep	0.2		1
	Deste	REAR DOOR					1			1
	Parts Other	RT Door shell (HSS) A					Bind		1.0	1
	Parts Other	RT Belt w'strip				Body	R&I	0.3		1
	Parts Other	RT Applique A				Body	R&I	0.2		h
	Parts Other	RT Frame molding A				Body	R&I	0.3		1
	Parts Other Parts	RT Handle, outside black A				Body	R&I	0.4		1
	Other	RT R&I trim panel A				Body	R&I	0.5		1
	Haz	PUSH BUMPER Hazardous waste removal		6.00		Body Body	R&I Subl	2.0		
		DECALS				Body	Rep	2.0		1
1	Parts Other	Cover Car		5.00		Body	Rep	0.2		1
1	Pnt/Mat Tx	Flex additive		5.00		Body	Rep			1
1	Parts Other	SEAM SEAL NEW HOOD		20.00		Body	·	2.0		1
		Repair puch bumper extention				Frame		2.0		1
1	Parts Other	shipping		20.89		Body				1
	oulo:	Add to r&i mech components				Mech		0.9		1
Parts Labor Additional Costs Frame Repair									150	.50
					SubT Taxe				7,177 0	.48
					Gran	d Total			7,177	.48

Due from	Insurance	Due from Customer		
SubTotal	7,177.48	SubTotal	0.00	
Tax	0.00	Tax	0.00	
Total	7,177.48	Total	0.00	

Printed Date: 2/17/2023

Total Amount	7,177.48

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