



**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

September 11, 2025

Kristi Onstot  
Executive Council  
L O C A L

Subject: Damages to Vehicle #1093 Due to Storms on July 28, 2025  
Department of Administrative Services  
Claim dated August 11, 2025  
AOS Claim ID: 4131

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 \$17,364.36, 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



Department of  
Administrative Services

KIM REYNOLDS, GOVERNOR  
CHRIS COURNOYER, LT. GOVERNOR

ADAM STEEN, DIRECTOR

Date: August 11, 2025

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

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

|                          |   |
|--------------------------|---|
| Vehicle / Event          | #1093 / Storm Damage  |
| Event Date               | July 28, 2025   |
| Summary                  | Vehicle 1093 - sustained storm damage (Claim # TL2602)  |
| Amount Requested         | \$15,880.73 - Estimate<br>+ \$1,483.63 - Tow, storage, and teardown fees<br>-----<br><b>\$17,364.36 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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**1093 Storm Damage**

1 message

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

Tue, Jul 29, 2025 at 8:14 AM

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

Please accept this email as initial 24 hour notification for AON, vehicle 1093 sustained storm damage on 7/28/2025. I will forward all information as soon as it is received.

*Note: The only notification we have received at this point is via phone call.*

AOS # 4131

**DAS Risk**

Central Procurement and Fleet Services Enterprise

Iowa Department of Administrative Services

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

515-281-3162 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.**



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

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**accident report vehicle #1093**

1 message

**Currie, Baylee** <Baylee.Currie@iowaagriculture.gov>  
To: "DAS.Risk@iowa.gov" <DAS.Risk@iowa.gov>  
Cc: "Potter, Lisa" <Lisa.Potter@iowaagriculture.gov>

Wed, Jul 30, 2025 at 11:00 AM

Attached is the accident report form, pictures, and diagram for vehicle #1093.

**Baylee Currie**

Livestock Inspector-Northwest Iowa



Wallace State Office Building

502 E. 9<sup>th</sup> St. Des Moines, IA 50319

Phone: (515) 333-1578

[Baylee.Currie@iowaAgriculture.gov](mailto:Baylee.Currie@iowaAgriculture.gov)

|  |  |
|--|--|
|  <b>IOWA DEPARTMENT OF<br/>AGRICULTURE &amp;<br/>LAND STEWARDSHIP</b> | <b>We're moving!</b>                         |
| <b>Beginning July 1, 2025:</b>   |  |
| Hoover State Office Building<br>1305 E Walnut St, Des Moines, IA 50319   | Phone: (515) 281-5321<br>Fax: (515) 281-4282 |

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**9 attachments**

**1093-1.jpeg**  
750K





**1093-2.jpeg**  
2553K



**1093-3.jpeg**  
5301K



**1093-4.jpeg**  
4129K



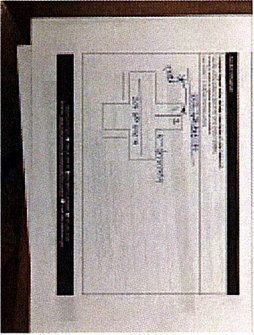
**1093-5.jpeg**  
2838K



**1093-6.jpeg**  
2727K



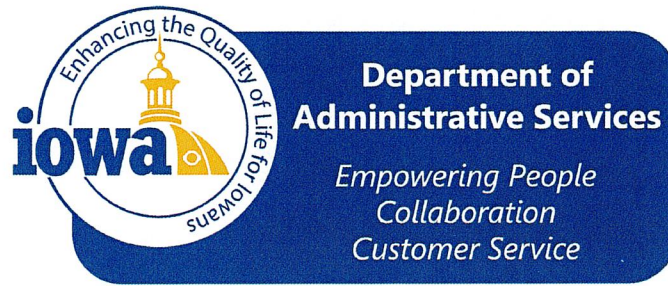
**1093-7.jpeg**  
4168K



**Diagram for acciden report.jpeg**  
2908K



**AccidentReportForm 7.28.25 Baylee Currie.pdf**  
230K



Department of Administrative Services  
DAS Fleet Services- Risk Management  
109 SE 13th St  
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 |
| 7/28/25                     | 9:45pm | 1               |
| County                      | State  |                 |
| Sioux                       | Iowa   |                 |

### Vehicle 1 (State vehicle)

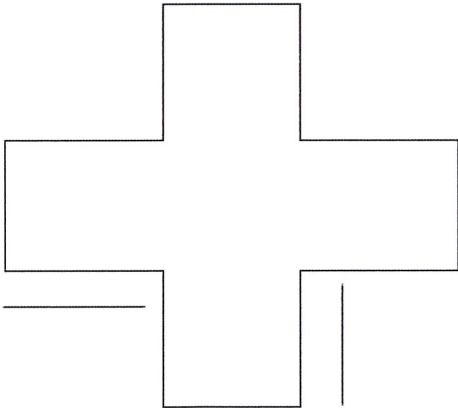
|                            |                   |  |              |
|----------------------------|-------------------|--|--------------|
| Driver's Name              |                   | Work Street Address  |              |
| Baylee Currie              |                   | 207 6th Ave N  |              |
| Driver's License No./State |                   | City, State, Zip   |              |
| 448AS5426/Iowa             |                   | Hospers, IA 51238  |              |
| Date of Birth              | Department        | Work Phone   | Home Phone   |
| 10/04/1995                 | IDALS             | 515-333-1578   | 918-315-9080 |
| License Plate No.          | VIN               | Year, Make, Model  |              |
| 1093                       | 1G1ZC5STXRF146590 | 2024 Chevy Malibu  |              |
| Estimate (\$) of Damage    |                   | Description of Damage  |              |
|                            |                   | Shattered back windsheild<br>Trunk dented<br>driver side tail light gone |              |

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

|                            |            |                  |                   |
|----------------------------|------------|------------------|-------------------|
| Driver's Name              |            | Street Address   |                   |
|                            |            |                  |                   |
| 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                  |
| Baylee Currie, 207 6th Ave N, Hospers IA 918-315-9080         | Tree branch through roof of house and now inside |
| Injured Persons (attach additional sheets if necessary)       |  |
| Vehicle No. 1/ Name and Address                               | Describe Injuries                                |
|   |  |
| Vehicle No. 2/ Name and Address                               | Describe Injuries                                |
|   |  |
| Witness   |  |
| Name  | Address/Phone                                    |
|   |  |
| Name  | Address/Phone                                    |
|   |  |

| Accident Diagram   |
|--|
| <p><b>Complete diagram below, include a description of what happened.</b></p> <p>Use the outline below to sketch the scene of your accident, writing in street or highway names or numbers.</p> <p>Use number 1 to indicate the State vehicle.</p> |
|   |

## Accident Information Exchange Sheet

### Other Vehicle information

|                                     |  |
|-------------------------------------|--|
| Driver's Name                       |  |
| 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              |  |
| Driver's License No./State |  |
| Vehicle Plate No.          |  |
| Vehicle year, make, model  |  |
| VIN                        |  |

The State of Iowa is self-insured.  
If you have any questions regarding an accident, please contact  
DAS Fleet Services at 515-281-3162 of [DAS.Risk@iowa.gov](mailto:DAS.Risk@iowa.gov)

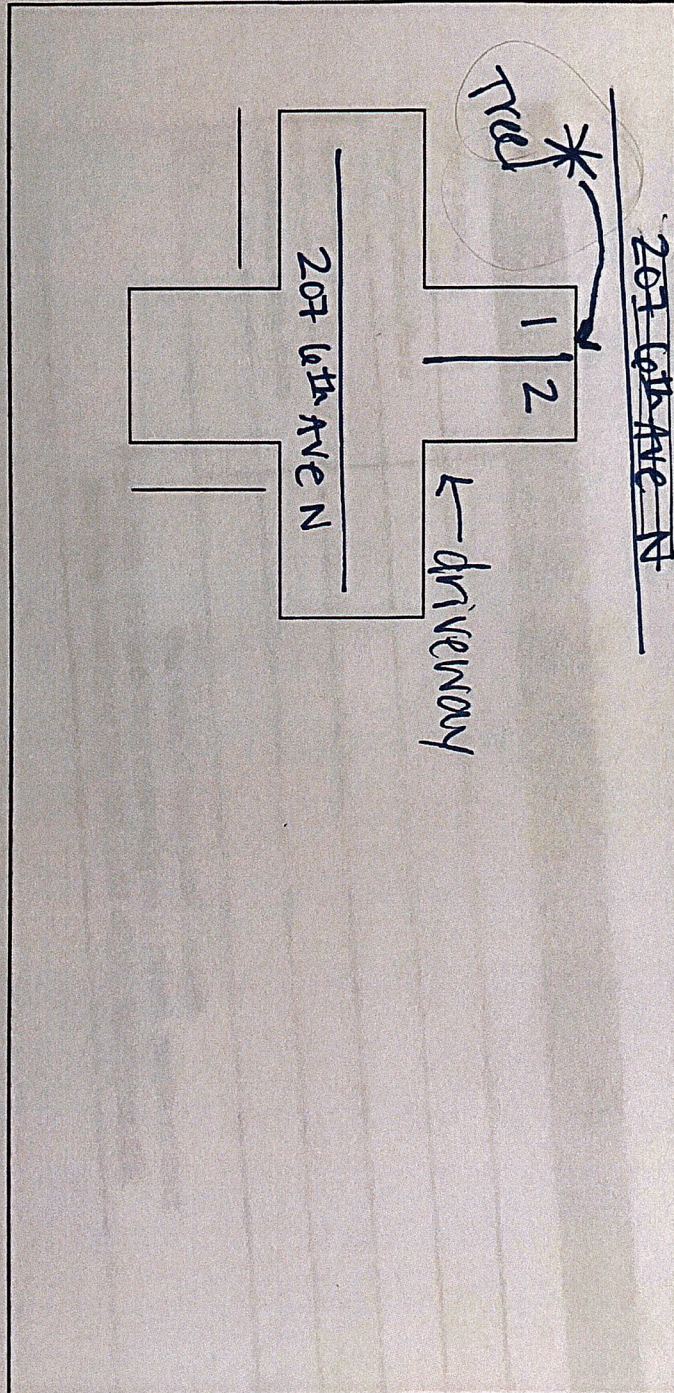


## Accident Diagram

Complete diagram below, include a description of what happened.

Use the outline below to sketch the scene of your accident, writing in street or highway names or numbers.

Use number 1 to indicate the State vehicle.



DAS Fleet Services ● 109 S.E. 13th St. ● Des Moines, IA 50319 ● 515-281-3162  
Website: <https://das.iowa.gov/procurement/fleet-services> ● Email: [das.risk@iowa.gov](mailto:das.risk@iowa.gov)





## American Collision

2222 6th Street, Sioux City, IA 51101  
Phone: (712) 255-1895

Workfile ID: 08deabc5  
Federal ID: 46-1606758  
State ID: IA

### Preliminary Estimate

**RO Number: 51573**

Written By: LIEF JETTON

Insured: Iowa department of Agriculture  
Type of Loss:  
Point of Impact:

Policy #:  
Date of Loss:

Claim #:  
Days to Repair: 0

**Owner:**  
Iowa department of Agriculture  
(515) 281-5713 Business

**Inspection Location:**  
American Collision  
2222 6th Street  
Sioux City, IA 51101  
Repair Facility  
(712) 255-1895 Business

**Insurance Company:**

### VEHICLE

2024 CHEV Malibu LS (Fleet) 4D SED 4-1.5L Turbocharged Gasoline Direct Injection

VIN: 1G1ZC5STXRF146590  
License:  
State: IA

Interior Color:  
Exterior Color:  
Production Date:

Mileage In:  
Mileage Out:  
Condition:

Vehicle Out:  
Job #:

#### TRANSMISSION

Automatic Transmission

#### POWER

Power Steering

Power Brakes

Power Windows

Power Locks

Power Mirrors

#### DECOR

Dual Mirrors

#### CONVENIENCE

Air Conditioning

Intermittent Wipers

Tilt Wheel

Cruise Control

Rear Defogger

Keyless Entry

Alarm

Message Center

Steering Wheel Touch Controls

Telescopic Wheel

Backup Camera

#### RADIO

AM Radio

FM Radio

Stereo

Search/Seek

Auxiliary Audio Connection

#### SAFETY

Drivers Side Air Bag

Passenger Air Bag

Anti-Lock Brakes (4)

4 Wheel Disc Brakes

Front Side Impact Air Bags

Head/Curtain Air Bags

Communications System

Hands Free Device

Lane Departure Warning

#### SEATS

Cloth Seats

Bucket Seats

#### WHEELS

Aluminum/Alloy Wheels

#### PAINT

Clear Coat Paint

#### OTHER

Traction Control

Stability Control



# Preliminary Estimate

RO Number: 51573

2024 CHEV Malibu LS (Fleet) 4D SED 4-1.5L Turbocharged Gasoline Direct Injection

| Line | Oper                               | Description                      | Part Number | Qty | Extended Price \$ | Labor        | Paint      |
|------|------------------------------------|----------------------------------|-------------|-----|-------------------|--------------|------------|
| 1    | #                                  | TOWING +35%                      |             | 1   | 361.13            |              |            |
| 2    | #                                  | glass clean up                   |             | 1   | 480.00            |              |            |
| 3    | <b>PILLARS, ROCKER &amp; FLOOR</b> |                                  |             |     |                   |              |            |
| 4    | *                                  | Repl RT Uniside assy             | 23388050    | 1   | 1,708.10 s        | 31.0         | <u>4.0</u> |
| 5    | *                                  | Add for Clear Coat               |             |     |                   |              | 1.6        |
| 6    | *                                  | Repl LT Uniside assy             | 23388049    | 1   | 1,708.10 s        | 30.5         | <u>4.0</u> |
| 7    |                                    | Overlap Major Non-Adj. Panel     |             |     |                   |              | -0.2       |
| 8    | *                                  | Add for Clear Coat               |             |     |                   |              | 0.8        |
| 9    |                                    | Deduct for Rear Bumper R&I       |             |     |                   | -1.8         |            |
| 10   |                                    | Deduct for Back Glass R&I        |             |     |                   | -2.6         |            |
| 11   | <b>BACK GLASS</b>                  |                                  |             |     |                   |              |            |
| 12   |                                    | Repl Back glass GM               | 84461616    | 1   | 591.38            | Incl.        |            |
| 13   | <b>REAR BODY &amp; FLOOR</b>       |                                  |             |     |                   |              |            |
| 14   |                                    | Repl Pkg tray panel              | 23382027    | 1   | 75.70             | 5.2          | 0.9        |
| 15   |                                    | Repl Rear reinf                  | 22987020    | 1   | 457.33            | Incl.        | 0.9        |
| 16   |                                    | Overlap Minor Panel              |             |     |                   |              | -0.2       |
| 17   |                                    | Repl Pkg tray trim black         | 84175627    | 1   | 196.87            | Incl.        |            |
| 18   |                                    | R&I Floor mat black diamond      |             |     |                   | 0.1          |            |
| 19   |                                    | R&I RT Trunk side trim           |             |     |                   | Incl.        |            |
| 20   |                                    | R&I LT Trunk side trim           |             |     |                   | Incl.        |            |
| 21   |                                    | R&I Rear panel trim              |             |     |                   | 0.2          |            |
| 22   | *                                  | R&I Support                      |             |     |                   | <u>Incl.</u> |            |
| 23   |                                    | R&I Jack carrier from 11/30/2016 |             |     |                   | 0.2          |            |
| 24   | <b>TRUNK LID</b>                   |                                  |             |     |                   |              |            |
| 25   |                                    | Repl Trunk lid w/o spoiler       | 84538677    | 1   | 1,553.38          | 2.3          | 2.4        |
| 26   |                                    | Overlap Major Non-Adj. Panel     |             |     |                   |              | -0.2       |
| 27   | *                                  | Add for Clear Coat               |             |     |                   |              | 0.4        |
| 28   |                                    | Add for Underside(Complete)      |             |     |                   |              | 1.2        |
| 29   |                                    | Add for Clear Coat               |             |     |                   |              | 0.2        |
| 30   |                                    | Repl RT Hinge                    | 84765069    | 1   | 113.57            | 0.5          | 0.5        |
| 31   |                                    | Overlap Minor Panel              |             |     |                   |              | -0.2       |
| 32   |                                    | Repl LT Hinge                    | 84765068    | 1   | 113.57            | 0.5          | 0.5        |
| 33   |                                    | Overlap Minor Panel              |             |     |                   |              | -0.2       |
| 34   |                                    | Repl Weatherstrip                | 84136794    | 1   | 80.00             | 0.3          |            |
| 35   |                                    | Repl Emblem gold                 | 84479457    | 1   | 70.44             | 0.2          |            |
| 36   | <b>REAR LAMPS</b>                  |                                  |             |     |                   |              |            |
| 37   |                                    | R&I RT Backup lamp assy          |             |     |                   | Incl.        |            |
| 38   |                                    | Repl LT Tail lamp assy           | 84882377    | 1   | 531.03            | Incl.        |            |
| 39   |                                    | R&I RT Tail lamp assy            |             |     |                   | Incl.        |            |
| 40   |                                    | Repl LT Backup lamp assy         | 84595946    | 1   | 495.63            | Incl.        |            |
| 41   | <b>REAR BUMPER</b>                 |                                  |             |     |                   |              |            |
| 42   | *                                  | Rpr Bumper cover w/o park assist |             |     |                   | <u>1.0</u>   | 3.2        |
| 43   |                                    | Add for Clear Coat               |             |     |                   |              | 1.3        |

**Preliminary Estimate**

**RO Number: 51573**

2024 CHEV Malibu LS (Fleet) 4D SED 4-1.5L Turbocharged Gasoline Direct Injection

|                  |     |                  |                 |             |
|------------------|-----|------------------|-----------------|-------------|
| 44               | R&I | R&I bumper cover |                 | Incl.       |
| <b>SUBTOTALS</b> |     |                  | <b>8,536.23</b> | <b>67.6</b> |
|                  |     |                  |                 | <b>20.9</b> |

**ESTIMATE TOTALS**

| Category             | Basis    |   |  | Rate         | Cost \$          |
|----------------------|----------|---|--|--------------|------------------|
| Parts                |          |   |  |              | 8,536.23         |
| Body Labor           | 67.6 hrs | @ |  | \$ 70.00 /hr | 4,732.00         |
| Paint Labor          | 20.9 hrs | @ |  | \$ 70.00 /hr | 1,463.00         |
| Paint Supplies       | 20.9 hrs | @ |  | \$ 55.00 /hr | 1,149.50         |
| Subtotal             |          |   |  |              | 15,880.73        |
| <b>Grand Total</b>   |          |   |  |              | <b>15,880.73</b> |
| Deductible           |          |   |  |              | 0.00             |
| <b>CUSTOMER PAY</b>  |          |   |  |              | <b>0.00</b>      |
| <b>INSURANCE PAY</b> |          |   |  |              | <b>15,880.73</b> |

**MyPriceLink Estimate ID / Quote ID:**

1379811829508743168 / 146829020

**REPAIR AUTHORIZATION- DIRECTION TO PAY- WARRANTY**

PART PRICES SUBJECT TO INVOICE-----AUTHORIZED AND ACCEPTED: You are hereby authorized to make repairs. In understand that payment in full will be due upon release of vehicle, including additional supplemental damage charges and hereby grant up and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. I accept responsibility for any attorney or or collection fees related to the collection of unpaid balances. You will not be held responsible for loss or damage to vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, accident, or any other cause beyond your control. Old parts removed from vehicle will be junked unless otherwise instructed! I authorize any and all supplements payable direct to you. I authorize you to act as power of attorney to sign insurance checks to pay for damages to the vehicle.

Authorized by \_\_\_\_\_ Date: \_\_\_\_\_

**WARRANTY**

Craft Auto Body, Inc. will warranty the workmanship of it's employees on the repairs to your vehicle for as long as you own the vehicle. We use PPG paint, which carries a life of the vehicle warranty. There is NO Warranty on rust repair.

**RO Number: 51573**

2024 CHEV Malibu LS (Fleet) 4D SED 4-1.5L Turbocharged Gasoline Direct Injection

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide DR1CP16, CCC Data Date 08/01/2025, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (\*) or Double Asterisk (\*\*) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2024 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

**SYMBOLS FOLLOWING PART PRICE:**

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category.  
X=Miscellaneous Non-Taxed charge category.

**SYMBOLS FOLLOWING LABOR:**

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category.  
M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

**OTHER SYMBOLS AND ABBREVIATIONS:**

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel.  
CAPA=Certified Automotive Parts Association. CFC=Carbon Fiber.  
D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. STS=Stainless Steel. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Solutions Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.



# American Collision

2222 6th Street, Sioux City, IA 51101  
Phone: (712) 255-1895

Workfile ID: 08deabc5  
Federal ID: 46-1606758

## Final Bill

### RO Number: 51573

|                                |            |             |              |             |
|--------------------------------|------------|-------------|--------------|-------------|
| Customer:                      | Insurance: | Adjuster:   | Estimator:   | LIEF JETTON |
| Iowa department of Agriculture |            | Phone:      | Create Date: | 7/30/2025   |
|                                |            | Claim:      |              |             |
|                                |            | Loss Date:  |              |             |
| (515) 281-5713                 |            | Deductible: |              |             |

2024 CHEV Malibu LS (Fleet) 4D SED 4-1.5L Turbocharged Gasoline Direct Injection

|                        |                  |              |              |
|------------------------|------------------|--------------|--------------|
| VIN: 1G1ZC5STXRF146590 | Interior Color:  | Mileage In:  | Vehicle Out: |
| License:               | Exterior Color:  | Mileage Out: |              |
| State: IA              | Production Date: | Condition:   | Job #:       |

| Line | Ver | Operation      | Description               | Qty | Extended Price \$ | Part Type | Labor | Type | Paint |
|------|-----|----------------|---------------------------|-----|-------------------|-----------|-------|------|-------|
| 1    | TTL | Remove/Replace | Crash wrap (per opening   | 1   | 25.00             |           | 1.0   | Body |       |
| 2    | TTL | Sublet         | Gate Fee                  | 1   | 100.00            | Sublet    |       |      |       |
| 3    | TTL | Sublet         | Admin fee                 | 1   | 247.50            | Sublet    |       |      |       |
| 4    | TTL |                | Storage (outside) per day | 2   | 200.00            | Other     |       |      |       |
| 5    | TTL | Remove/Replace | Clean up glass            | 1   | 480.00            |           |       |      |       |
| 6    | TTL |                | towing                    | 1   | 361.13            | Other     |       |      |       |

| Estimate Totals      | Discount \$ | Markup \$ | Rate \$ | Total Hours | Total \$        |
|----------------------|-------------|-----------|---------|-------------|-----------------|
| Parts                |             |           |         |             | 386.13          |
| Sublet/Miscellaneous |             |           |         |             | 347.50          |
| Labor, Body          |             |           | 70.00   | 1.0         | 70.00           |
| Miscellaneous        |             |           |         |             | 680.00          |
| <b>Subtotal</b>      |             |           |         |             | <b>1,483.63</b> |
| Sales Tax            |             |           |         |             | 0.00            |
| <b>Grand Total</b>   |             |           |         |             | <b>1,483.63</b> |
| <b>Net Total</b>     |             |           |         |             | <b>1,483.63</b> |

| Estimate Version | Total \$  |
|------------------|-----------|
| Original         | 15,880.73 |
| Supplement TTL   | 1,483.63  |

|                                |          |
|--------------------------------|----------|
| Insurance Total \$:            | 1,483.63 |
| Received from Insurance \$:    | 0.00     |
| Balance due from Insurance \$: | 1,483.63 |
| Customer Total \$:             | 0.00     |
| Received 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



RO Number: 51573

2024 CHEV Malibu LS (Fleet) 4D SED 4-1.5L Turbocharged Gasoline Direct Injection

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