



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

January 9, 2024

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:

Board of Regents - University of Iowa.....\$75,890.29
On December 31, 2020, a failed steam valve caused damages at the College of Public Health. Request was to cover repair costs.

This represents full and final payment.

EXECUTIVE COUNCIL OF IOWA

Victoria Newton

Victoria Newton
Executive Secretary

cc: John Nash, Director of Facilities, Board of Regents
Camille Walters Gott, Risk Management Administrator, University of Iowa
Andrea Anania, Board of Regents
Aimee Claeys, Board of Regents
Linda Leto, Department of Management

AOS Claim ID 2055
TOS Job # 2480



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 Fax (515) 281-6518

December 28, 2023

Victoria Newton
Executive Council
L O C A L

Subject: Damages at College of Public Health Building due to Failed Steam Valve
on December 31, 2020
University of Iowa – Board of Regents
Claim dated July 27, 2023
AOS Claim ID: 2055

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

Documented request		\$	<u>75,890.29</u>
Executive Council Allocation		\$	75,890.29
Less:			
Previous payments	\$	0.00	
This payment		<u>75,890.29</u>	
Total			<u>\$ 75,890.29</u>
Remaining Executive Council allocation		\$	<u>0.00</u>

We recommend reimbursement be made in the amount of \$75,890.29. This represents full and final payment of the loss.

Sincerely,

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

cc: John Nash, Director of Facilities, Board of Regents
Camille Walters Gott, Risk Management Claims Manager, University of Iowa



Business Services

Risk Management, Insurance and Loss Prevention

University of Iowa
202 Plaza Centre One
Iowa City, Iowa 52242-2501
319-335-0010
Fax 319-353-1893

November 7, 2023

Executive Council of Iowa
Office of Treasurer of State
State Capitol Building
Des Moines, IA 50319

Re: Formal Loss Report - University of Iowa – College of Public Health Building Steam Valve Failure (12/31/2020)

Dear Executive Council,

On December 31, 2020, a steam valve failed at the College of Public Health Building located at 145 North Riverside Drive, Iowa City, Iowa. The original loss notice was provided to the Executive Council, State Auditors and Board of Regents on January 4, 2021, and a Preliminary Loss Report was submitted on July 27, 2023.

The purpose of this letter is to provide the final expense details for this claim which are:

- **Remediation and Building Repairs: \$75,890.29.**

Please see the attached summary of claim expenses and copies of all invoices and proof of payments. Based on the information provided herein, The University of Iowa respectfully requests an award of **\$75,890.29** from the State of Iowa Executive Council, pursuant to Chapter 29C:20, Contingent Fund, Code of Iowa.

We appreciate your review and look forward to your response. Please feel free to contact me with any questions.

Sincerely,

Camille Walters Gott
Risk Management Claims Manager

cc: Tammy Hollingsworth
John Nash
Debby Zumbach
Josey Bathke

Walters Gott, Camille S

From: camille-walters@uiowa.edu
Attachments: COPH Steam Valve Photos.pdf

From: Walters, Camille <camille-walters@uiowa.edu>

Sent: Monday, January 4, 2021 8:05 AM

To: executivecouncil@tos.iowa.gov; John Nash (john.nash@iowaregents.edu) <john.nash@iowaregents.edu>; Tammy Hollingsworth <Tammy.Hollingsworth@AOS.IOWA.GOV>

Cc: Josey Bathke <josephine-bathke@uiowa.edu>; Debby Zumbach (deborah-zumbach@uiowa.edu) <deborah-zumbach@uiowa.edu>

Subject: University of Iowa College of Public Health Building - Property Loss Notice

Hello,

Risk Management was notified on 1/4/2021 of an incident at the College of Public Health Building, located at 145 North Riverside Drive, Iowa City, Iowa. During the overnight hours on 12/31/2020, a steam valve failed. When the steam valve failed, the force of the vibration eliminator on the heating hot water pump was very strong and blew out a wall on the Mechanical Room. We are investigating the incident at this time but the estimated damages will exceed \$5,000. I have attached photos of the damages.

We will submit a preliminary loss report once we have a better estimate.

Please feel free to contact me with any questions or concerns.

Thank you

Camille

[Fdp loh#Z dwhuv](#)

University of Iowa, Risk Management

430 Plaza Centre One, 125 S Dubuque St, Iowa City, IA 52242

Phone 319-335-5357



Business Services

Risk Management, Insurance and Loss Prevention

University of Iowa
202 Plaza Centre One
Iowa City, Iowa 52242-2501
319-335-0010
Fax 319-353-1893

July 27, 2023

Executive Council of Iowa
Office of Treasurer of State
State Capitol Building
Des Moines, IA 50319

Re: University of Iowa – College of Public Health Building Steam Valve Failure Facility – Preliminary Loss Report (12/31/2020)

Dear Executive Council,

On December 31, 2020, a steam valve failed at the College of Public Health Building located at 145 North Riverside Drive, Iowa City, Iowa causing damage to the building by blowing out a wall in the Mechanical Room.

The purpose of this Preliminary Loss Report is to notify you of our current damage estimate and to request allocation of funds for clean-up and repair/replacement of the damaged building components and equipment. Our damage estimate is approximately **\$75,890.29**. A Formal Loss Report and supporting documentation will be provided.

Please feel free to contact me with any questions or concerns.

Sincerely,

Camille Walters Gott
Risk Management Claims Manager

cc: Tammy Hollingsworth
John Nash
Debby Zumbach
Josey Bathke



Department of Risk Management
Insurance & Loss Prevention
 202 Plaza Centre One (PCO)
 Iowa City, IA 52242-2500
 Phone 319-335-0010
 Fax 319-353-1893

General Fund 29C:20 Property Claim Costs - College of Public Health Building Steam Explosion

Building: College of Public Health Building		Date of Loss: 12/31/2020			
Department: Facilities Management		Completed by: Camille Walters Gott			
		UI Claim #: PR-21370-SUI			
Category	Reference #	Vendor	PO	Voucher	29C:20 Claim Costs
Building	1B	Servpro - Job 21-687657	1002394039	83723134	\$ 10,899.18
Building	2B	FM Stores Materials - Job 21-687657	N/A	Ticket 68037	\$ 117.62
Building	3B	Schimberg Company - Job 21-687657	C000576860	83718370	\$ 892.72
Building	4B	Schimberg Company - Job 21-687657	C000576860	83747333	\$ 400.86
Building	5B	Shive Hattery - Project 0881401	CS4267	83764757	\$ 1,500.00
Building	6B	McComas Lacina - Project 0881401	CT8660	83760268	\$ 59,850.00
Building	7B	McComas Lacina - Project 0881401	CT8660	83801427	\$ 1,606.00
Building	8B	ITS Materials - Project 0881401	N/A	SO202113067	\$ 623.91
Building Total					\$ 75,890.29
Equipment	None				\$ -
Equipment	None				\$ -
Equipment Total					\$ -
GRAND TOTAL					\$ 75,890.29



Fire & Water - Cleanup & Restoration™

SERVPRO® of Iowa City/Coralville SERVPRO® of Ottumwa/Oskaloosa
SERVPRO® of Grinnell & Pella SERVPRO® of Marshall
SERVPRO® of Des Moines SW SERVPRO® of Columbia
SERVPRO® of Des Moines East SERVPRO® of Sedalia

Independently Owned and Operated

INVOICE

20196648

DATE: 01/07/2021

TERMS: Due upon receipt
Past Due Invoices Subject to Finance Charges
Returned Check Fee \$50

BILL TO:

University of Iowa Facilities Managemen
U of I Facilities Mgt
Plaza Centre One
125 S Dubuque Street
Iowa City, IA 52240

SERVICE ADDRESS:

U of I - College of Public Health
145 S Riverside Drive
Iowa City, IA 52242

Project Mgr: Mike Raffensperger **Insurance Co:** Selfpay **Claim / P.O. #** 1002394039 **Work Order #**

SERVICE TYPE	DESCRIPTION	AMOUNT
Water Remed	Water Restoration: CPHB, DOL 1/1/21 PO#1002394039	10,763.73
Debris Hauling	Debris hauling subcontracted.	135.45

SALES TAX	
TOTAL	10,899.18
PAYMENT	
TOTAL DUE	\$10,899.18

REVIEW US!

Your feedback is important to us. Please take a moment to review us online. Thank you for choosing SERVPRO.



Remit payment to: SERVPRO
615 Hwy 1 West
Iowa City, IA 52246

If you would like to pay by credit card, please call our office at (844) 965-0001. All major credit cards accepted.



SERVPRO ICC LLC

Iowa Franchise # 9784 / 10071 / 10619 / 10618
11087
Missouri Franchise # 11148 / 11149 / 11150
615 Hwy 1 West
Iowa City, Ia 52246
844-965-0001
Tax ID # 27-0863347

Client: U of I College of Public Health
Property: 145 N Riverside Drive
Iowa City, IA 52242

Operator: JANE

Estimator: Billy Lopez
Position: General Manager
Company: SERVPRO
Business: 615 Highway 1 West
Iowa City , IA 52246

Business: (844) 965-0001
E-mail: Blopez@servpro.me

Reference: Jane Rose
Position: Quality Coordinator
Company: Jane Rose
Business: 615 Hwy 1 West
Iowa City, IA 52246

Business: (319) 338-8550
E-mail: jrose@servpro.me

Type of Estimate: Water Damage
Date Entered: 1/5/2021

Date Assigned:

Price List: IACR8X_DEC20
Labor Efficiency: Restoration/Service/Remodel
Estimate: PUBLUCHEALTH-WTR_IP

Dear U of I College of Public Health ,
I am sorry to hear about your recent Water Damage loss. Attached you will find an estimate for the associated costs related to the mitigation. The total of the estimate is \$10,899.18. Note this is purely an estimate. Throughout the mitigation phase challenges arise which may require additional work to be performed. Please feel free to contact me with any questions or concerns.

Building Code: CPHB
DOL: 1/1/2021
PO: 1002394039

Regards,
Billy Lopez

Blopez@servpro.me



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 Iowa City, Ia 52246
 844-965-0001
 Tax ID # 27-0863347

PUBLICHEALTH-WTR_IP

Labor

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
1. Project Manager - HOLIDAY - Mike Raffensperger 1/1/21 - 5 hours	5.00 HR	0.00	165.00	0.00	825.00
2. Restoration Technician - HOLIDAY - Jeremy Faulkner 1/1/21 - 5 hours	5.00 HR	0.00	90.00	0.00	450.00
3. Restoration Technician - HOLIDAY - Levi Chapman 1/1/21 - 5 hours	5.00 HR	0.00	90.00	0.00	450.00
4. Restoration Supervisor - Hunter Cook 1/3/21 - 2 hours 1/4/21 - 2 hours 1/5/21 - 2.5 hours	6.50 HR	0.00	56.00	0.00	364.00
5. Restoration Technician - Matt Funk 1/3/21 - 2 hours	2.00 HR	0.00	45.00	0.00	90.00
6. Restoration Technician - Tiffany Shull 1/3/21 - 2 hours 1/4/21 - 2 hours 1/5/21 - 2.5 hours	6.50 HR	0.00	45.00	0.00	292.50
7. Restoration Technician - Zeb Vrchoticky 1/4/21 - 2 hours	2.00 HR	0.00	45.00	0.00	90.00
8. Project Administration / Clerical - Jane Rose 1/5/21 - 1 hour 1/6/21 - 2 hours	3.00 HR	0.00	37.00	0.00	111.00
9. Small Tools 3% of Labor	1.00 EA	0.00	80.18	0.00	80.18
Totals: Labor				0.00	2,752.68

Consumables

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
10. Bags, Trash Environmental	13.00 EA	0.00	1.96	0.00	25.48



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 Missouri Franchise # 11148 / 11149 / 11150
 615 Hwy 1 West
 Iowa City, Ia 52246
 844-965-0001
 Tax ID # 27-0863347

CONTINUED - Consumables

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
11. Disinfectant / Biocide	3.00 GL	0.00	43.95	0.00	131.85
12. Filter - Hepa for Air Scrubber	1.00 EA	0.00	155.95	0.00	155.95
13. Filter CVAC for Hepa Vacuum	1.00 EA	0.00	185.60	0.00	185.60
14. Mop bucket and Wringer Assembly	1.00 EA	0.00	144.00	0.00	144.00
15. Mop head and Handle	1.00 EA	0.00	32.36	0.00	32.36
16. Hard Surface Cleaner	1.00 GL	0.00	24.07	0.00	24.07
Totals: Consumables				0.00	699.31

Equipment

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
17. Air Mover	102.00 DA	0.00	32.50	0.00	3,315.00
1/1/21 - 37					
1/2/21 - 37					
1/3/21 - 22					
1/4/21 - 6					
18. Dehumidification Unit	15.00 DA	0.00	75.50	0.00	1,132.50
1/1/21 - 4					
1/2/21 - 4					
1/3/21 - 4					
1/4/21 - 3					
19. HEPA filtration Unit / Air Scrubber	4.00 DA	0.00	140.00	0.00	560.00
1/1/21 - 1					
1/2/21 - 1					
1/3/21 - 1					
1/4/21 - 1					
20. Extraction Unit (Portable)	2.00 DA	0.00	125.00	0.00	250.00
1/1/21 - 2					
21. Van, Cargo	4.00 DA	0.00	115.00	0.00	460.00
1/1/21 - 1					
1/3/21 - 1					
1/4/21 - 1					
1/5/21 - 1					
22. Company Owned Vehicle	1.00 DA	0.00	95.00	0.00	95.00
1/1/21 - 1					



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 844-965-0001
 Tax ID # 27-0863347

CONTINUED - Equipment

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
23. Vacuum, Hepa 1/5/21 - 1	1.00 HR	0.00	115.00	0.00	115.00
24. Equipment decontamination charge - per piece of equipment 37 air movers, 4 dehumidifiers, 1 air scrubber, 1 hepa vacuum, 2 portable extraction units (wand, hose tank)	52.00 EA	0.00	26.62	0.00	1,384.24
Totals: Equipment				0.00	7,311.74

Sub Contractor

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
25. Haul debris - per pickup truck load - including dump fees	1.00 EA	135.45	0.00	0.00	135.45
Totals: Sub Contractor				0.00	135.45
Line Item Totals: PUBLUCHEALTH-WTR_IP				0.00	10,899.18



SERVPRO ICC LLC

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11087
Missouri Franchise # 11148 / 11149 / 11150
615 Hwy 1 West
Iowa City, Ia 52246
844-965-0001
Tax ID # 27-0863347

Summary for Dwelling

Line Item Total	10,899.18
Replacement Cost Value	\$10,899.18
Net Claim	\$10,899.18

Billy Lopez
General Manager

AP/PO PeopleSoft Web Applications

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Payment details for voucher: 83723134

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83723134	0000639859	002	Servpro	\$10,899.18	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH: 774828 Dt: 02/03/2021 Amt: \$41,660.21	20196648	01/07/2021	Detail	\$10,899.18

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68037

Counter Release
68037

Counter Release Summary

Counter Release			
Description:	204		
Released By:	TKNOTTNERUS (TERRY KNOTTNERUS)	Release Date:	Jan 22, 2021 12:32 PM
Released To:	BPARIZEK (BRENT PARIZEK)	Reference:	
Warehouse:	MAINT (MAINTENANCE STORES WAREHOUSE (MAIN))	Total Cost:	\$117.62

Line Items

Line	Part:	0231900 (UNISTRUT, SLOTTED 1 1/2" X 1 1/2" GALVANIZED 12GA. MINIMUM 10 FT/LGH)	Unit Cost:	\$2.44
1 RELEASE	Bin:	MAINT-0231900 (UNISTRUT, SLOTTED 1 1/2" X 1 1/2" GALVANIZED 12GA. 10 FT/LGH)	UOM:	FT
	Equipment:		Qty on Hand:	50.00
	Work Order:	21-687657 (CPHB-1/1/21---1:38:13 AM--Steam Room S023 Sump Pump 1 in Alarm Check at once! Kris Kober also got called by DPS 1/1/21 @ 01:53:13--steam leak burst causing wall damage and relocation, standing water by exposed electrical. Fire Safety called in. (MORE))		
	Phase:	005 (CPHB-1/1/21---1:38:13 AM--Steam Room S023 Sump Pump 1 in Alarm Check at once! Kris Kober also got called by DPS 1/1/21 @ 01:53:13--steam leak burst causing wall damage and relocation, standing water by exposed electrical. For 204 Electricians.)		
			Quantity:	30.00
	Pick Ticket:	Line Item:	SubTotal:	\$73.34

Line	Part:	0232600 (UNISTRUT, POST BASE SQ 1 5/8" ANVAIL GAL PS3033 SQ)	Unit Cost:	\$16.76
2 RELEASE	Bin:	MAINT-0232600	UOM:	EA
	Equipment:		Qty on Hand:	5.00
	Work Order:	21-687657 (CPHB-1/1/21---1:38:13 AM--Steam Room S023 Sump Pump 1 in Alarm Check at once! Kris Kober also got called by DPS 1/1/21 @ 01:53:13--steam leak burst causing wall damage and relocation, standing water by exposed electrical. Fire Safety called in. (MORE))		
	Phase:	005 (CPHB-1/1/21---1:38:13 AM--Steam Room S023 Sump Pump 1 in Alarm Check at once! Kris Kober also got called by DPS 1/1/21 @ 01:53:13--steam leak burst causing wall damage and relocation, standing water by exposed electrical. For 204 Electricians.)		
			Quantity:	2.00
	Pick Ticket:	Line Item:	SubTotal:	\$33.52

Line	Part:	0232100 (UNISTRUT, ANGLE 3 HOLE B-LINE B374, UNISTRUT P1346)	Unit Cost:	\$5.38
3 RELEASE	Bin:	MAINT-0232100	UOM:	EA
	Equipment:		Qty on Hand:	13.00
	Work Order:	21-687657 (CPHB-1/1/21---1:38:13 AM--Steam Room S023 Sump Pump 1 in Alarm Check at once! Kris Kober also got called by DPS 1/1/21 @ 01:53:13--steam leak burst causing wall damage and relocation, standing water by exposed electrical. Fire Safety called in. (MORE))		
	Phase:	005 (CPHB-1/1/21---1:38:13 AM--Steam Room S023 Sump Pump 1 in Alarm Check at once! Kris Kober also got called by DPS 1/1/21 @ 01:53:13--steam leak burst causing wall damage and relocation, standing water by exposed electrical. For 204 Electricians.)		
			Quantity:	2.00
	Pick Ticket:	Line Item:	SubTotal:	\$10.76

University of Iowa Transaction Detail Report Accounting Period 07, Fiscal Year 2021 JANUARY 2021 Report ID: 5897858

TDR User Manual | SA3 Report | Balance Sheet | Download in Excel Format | Subscribe | WhoKey Admin

Quick Jump

acctg prd 07, FY 2021 / JANUARY 2021

Change

Fund: 660 Casualty Losses **Grant:** 65003885 CPHB Steam Valve Failure **WhoKey:** 660-05-0308-00000-65003885-00-
Org: 05 VP Finance and Operations **Function:** 00 Not Assigned **WhoKey Descr:** CPHB Steam Valve Failure
Dept: 0308 Risk Management Office **BRF:** **WhoKey Status:** Open
Sdept: 00000 Risk Management Office **Owner/PI:** Josey Bathke (BATHKE)
Reviewer: Yokoi Tsoi (TSOI)



This report has been marked as reconciled.
BATHKE @ 09/08/2021 10:20:22

Reconciliation buttons are located at the bottom of the report.

Secondary Reviewers: Debby Zumbach (DZUMBACH)
Camille Walters Gott (WALTERSC)
WhoKey Purpose: steam valve CPHB claim

6260	000	00000	0075	10375FSGWR (?)	\$1,010.34	01/31/2021	J21-687657
MATERIALS CPHB-1/1/21---1:38:1							
Min Comments							

The University of Iowa
Facilities Management
AiM Work Request Details With Phases

AiM Summary Report

21-687657 - CPHB-1/1/21---1:38:13 AM--Steam Room S023 Sump Pump 1 in Alarm Check at once! Kris Kober also got called by DPS 1/1/21 @ 01:53:13--steam leak burst causing wall damage and relocation, standing water by exposed electrical. Fire Safety called in. (MORE)

Funding Code:	Current Month	Total
050 05 0370 00120 00000000 6260 000 000000 70 0075	0.00	0.00
660 05 0308 00000 65003885 6260 000 000000 00 0075	0.00	19,859.63
Total	\$ 0.00	\$ 19,859.63

Fund	<input type="text" value="660"/>	Org	<input type="text" value="05"/>	Dept	<input type="text" value="0308"/>	Sdept	<input type="text" value="000000"/>	Grant/Program	<input type="text" value="65003885"/>	Iacct	<input type="text" value="6260"/>	Oacct	<input type="text" value="000"/>	Dacct	<input type="text" value="000000"/>	Fn	<input type="text" value="00"/>	Cctr	<input type="text" value="0075"/>
Submit <input type="button" value="Reset"/>																			
Date (optional): <input type="text" value=""/> <small>(mm/dd/yyyy)</small>																			

Result: Valid - Valid MFK

Chartfield Descriptions:

Fund: Casualty Losses
Org: VP Finance and Operations
Dept/Sdept: Risk Management Office
Grant/Program: CPHB Steam Valve Failure
Iacct: Repair Maint Bldg and Land Imp
Fn: Not Assigned
Cctr: College Of Public Hlth Bldg



Remit To: 1106 Shaver Road NE
 Cedar Rapids, IA 52402
 Ph: 319-365-9421 Toll Free: 800-728-9421
 Omaha, NE 68127
 Ph: 402-881-4300 Toll Free: 888-486-0010
 Decatur, IL 62526
 Ph: 217-877-2177 Toll Free: 866-977-2177
 N Sioux City, SD 57049
 Ph: 605-217-3835 Toll Free: 866-951-9907
 Wichita, KS 67226
 Ph: 316-630-0353 Toll Free: 844-487-5503

SCHIMBERG CO.

1106 Shaver Road NE
 Cedar Rapids, IA 52402
 Ph: 319-365-9421 Toll Free: 800-728-9421
 www.schimberg.com

Order Date	Invoice Date	Invoice #
01/04/21	01/05/21	8032206-00
Outside Rep	PO #	
118	C000576860	
Placed By	Taken By	
tony	Jeff Ketelsen	

THANK YOU!

Bill To: 198	UNIVERSITY OF IOWA ACCOUNTS PAYABLE/TRAVEL 202 PCO IOWA CITY, IA 52242
------------------------	--

Ship To: 1100	U OF I DENTAL SCIENCE BLDG 801 NEWTON ROAD ATTN TONY DLOUGHY S-187 IOWA CITY, IA 52242
-------------------------	--

EMAIL: acntpays@uiowa.edu

Terms	Ship Point	Ship Via	Shipped	Tax Jurisdiction
2%10D N30	** Drop Ship **	***UPS RED**	01/05/21	US,IA,JOHNSON

Line #	Product And Description	Quantity Ordered	Quantity Shipped	Quantity B/O	Qty U/M	Unit Price	Ext. Price
1	n635 6" x 9" 150# flanged ms2 flex conn neoprene	4	4	0	EACH	166.00	664.00

1 Lines Total	Total	664.00
	FREIGHT IN	242.00
	Invoice Total	906.00

SALESPERSON CONTACT INFORMATION
 Jeff Ketelsen
 Jketelsen@schimberg.com

3B Invoice - Page 3 of 3

Terms Discount 13.28 If Paid By 01/15/21

Product Warranty: Published warranty of manufacturer only, no other warranty or liability assumed by this supplier.
ALL ACCOUNTS ARE SUBJECT TO A FINANCE CHARGE OF 1 1/2% PER MONTH, OR 18% PER ANNUM, WHEN 30 DAYS OR MORE PAST DUE. MINIMUM FINANCE CHARGE OR \$.50 PER MONTH

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Payment details for voucher: 83718370

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83718370	0000121210	002	Schimberg Company	\$906.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH: 771293 Dt: 01/13/2021 Amt: \$892.72	8032206-00	01/05/2021	Detail	\$892.72

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 Cedar Rapids, IA 52402
Ph: 319-365-9421 Toll Free: 800-728-9421
 Omaha, NE 68127
 Ph: 402-881-4300 Toll Free: 888-486-0010
 Decatur, IL 62526
 Ph: 217-877-2177 Toll Free: 866-977-2177
 N Sioux City, SD 57049
 Ph: 605-217-3835 Toll Free: 866-951-9907
 Wichita, KS 67226
 Ph: 316-630-0353 Toll Free: 844-487-5503

SCHIMBERG CO.

1106 Shaver Road NE
 Cedar Rapids, IA 52402
Ph: 319-365-9421 Toll Free: 800-728-9421
 www.schimberg.com

<i>Order Date</i>	<i>Invoice Date</i>	<i>Invoice #</i>
02/08/21	02/08/21	8042856-00
<i>Outside Rep</i>	<i>PO #</i>	
118	C000576860	
<i>Placed By</i>	<i>Taken By</i>	
tony	Mary Zieser	

THANK YOU!

<i>Bill To:</i> 198	UNIVERSITY OF IOWA ACCOUNTS PAYABLE/TRAVEL 202 PCO IOWA CITY, IA 52242
------------------------	---

<i>Ship To:</i> 1100	U OF I DENTAL SCIENCE BLDG 801 NEWTON ROAD ATTN TONY DLOUGHY S-187 IOWA CITY, IA 52242
-------------------------	---

EMAIL: acntpay@uiowa.edu

<i>Terms</i>	<i>Ship Point</i>	<i>Ship Via</i>	<i>Shipped</i>	<i>Tax Jurisdiction</i>
2%10D N30	SCHIMBERG CEDAR RAPIDS	***UPS RED**	01/05/21	US,IA,,JOHNSON

Line #	Product And Description	Quantity Ordered	Quantity Shipped	Quantity B/O	Qty U/M	Unit Price	Ext. Price
	ADDITIONAL FREIGHT FROM ORIGINAL INVOICE 8032206-00						
1	FRT FREIGHT CHARGE	1	1	0	EACH	0.00	0.00

1 Lines Total	Total	0.00
	FREIGHT IN	400.86
	Invoice Total	400.86

SALESPERSON CONTACT INFORMATION
 Mary Zieser
 mzieser@schimberg.com

Product Warranty: Published warranty of manufacturer only, no other warranty or liability assumed by this supplier.
ALL ACCOUNTS ARE SUBJECT TO A FINANCE CHARGE OF 1 1/2% PER MONTH, OR 18% PER ANNUM, WHEN 30 DAYS OR MORE PAST DUE. MINIMUM FINANCE CHARGE OR \$.50 PER MONTH

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Payment details for voucher: 83747333

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83747333	0000121210	002	Schimberg Company	\$400.86	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH: 781676 Dt: 03/10/2021 Amt: \$576.81	8042856-00	02/08/2021	Detail	\$400.86

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THE UNIVERSITY OF IOWA
DESIGN PROFESSIONAL PAY APPLICATION REQUEST

Application/Invoice Date: 02/25/2021

Net 0	
Contract #:	CS4267
Invoice No.:	1211350-1-FINAL
Line 1 =	\$1,500.00
Line 2 =	\$0.00
	thausafu

To: University of Iowa
 FM-Business & Financial Services
 Attn: Capital Accounting
 200 USB
 Iowa City, IA 52242

From: Shive Hattery Incorporated
 2839 Northgate Drive,
 Iowa City, IA 52245

Project Title: 0881401 - College of Public Health Building - Repair Damage Caused by 1/1/2021 Cashco Valve Failure

PAY APPLICATION PERIOD FROM:	02/22/2021	TO:	02/24/2021
Basic Services Fee:	\$1,500.00		
Amendments:	\$0.00		
Total Fee:	\$1,500.00		
Reimbursable Expense Limit:	\$0.00		
Amendments:	\$0.00		
Total Reimbursable Expense Limit	\$0.00		

Description	Approved Amount	Current Balance	Current Requested
CONSTRUCTION DOCUMENT	\$1,500	\$0	\$1,500
Agreement:	\$1,500.00	\$0.00	\$1,500.00
Reimbursable:	\$0.00	\$0.00	\$0.00

Amount Due this Invoice	\$1,500.00
--------------------------------	-------------------

Tasks/Deliverables During this Pay Application Period (see attached back-up)

This undersigned Design Professional certifies that to the best of the Design Professional's knowledge, information and belief the Work covered by this application for payment has been completed in accordance with the Agreement, that all amounts have been paid by the Design Professional for Services for which previous Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Respectfully submitted,

Mike St. John

 Project Coordinator

AP/PO PeopleSoft Web Applications

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Payment details for voucher: 83764757

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83764757	0000121619	002	Shive Hattery Incorporated	\$1,500.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH: 780902 Dt: 03/04/2021 Amt: \$16,425.00	1211350-1-FINAL	02/25/2021	Detail	\$1,500.00

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FACILITIES MANAGEMENT
Design & Construction

CONTRACTOR PAY APPLICATION REQUEST

Application/Invoice Date: 02/16/2021
Application No.: 001-R001
Invoice No.: 2532-01
Contract #: CT8660
Payment terms: Net Zero

To:

University of Iowa
 Design & Construction
 200 USB
 Iowa City, IA 52242

From Contractor:

McComas Lacina Construction Company Incorporated
 1310 Highland Court,
 Iowa City, IA 52240-4525

Project Title and Number:

College of Public Health Building - Repair Damage Caused by 1/1/2021 Cashco Valve Failure
 Project # 0881401

PAY APPLICATION PERIOD FROM: 01/08/2021 **TO:** 01/31/2021

1. ORIGINAL CONTRACT SUM:			\$63,000.00
Change Order Summary	<u>ADDITIONS</u>	<u>DEDUCTIONS</u>	
Total changes approved in previous pay periods by owner	\$0.00	\$0.00	
Total approved this pay period	\$0.00	\$0.00	
TOTALS	\$0.00	\$0.00	
2. NET CHANGE BY CHANGE ORDERS:			\$0.00
3. CONTRACT SUM TO DATE: (Line 1 + 2)			\$63,000.00
4. TOTAL COMPLETED & STORED TO DATE:			\$63,000.00
5. RETAINAGE: (Completed Work & Stored Material)			\$3,150.00
6. TOTAL EARNED LESS RETAINAGE: (Line 4 less Line 5 Total)			\$59,850.00
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate)			\$0.00
8. CURRENT PAYMENT DUE:			\$59,850.00
9. BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less Line 6)			\$3,150.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for payment were issued and payments received from the Owner, and the current payment shown herein is now due.

Mashell Zimmerman

HR

Feb 25, 2021, 9:56 AM

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Payment details for voucher: 83760268

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83760268	0000115392	002	McComas Lacina Construction Company	\$59,850.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH: 779590 Dt: 02/26/2021 Amt: \$59,850.00	2532-01	02/16/2021	Detail	\$59,850.00

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FACILITIES MANAGEMENT
Design & Construction

CONTRACTOR PAY APPLICATION REQUEST

Application/Invoice Date: 04/06/2021
Application No.: 002
Invoice No.: 2532-02FINAL
Contract #: CT8660
Payment terms: Net Zero

To:
 University of Iowa
 Design & Construction
 200 USB
 Iowa City, IA 52242

From Contractor:
 McComas Lacina Construction Company Incorporated
 1310 Highland Court,
 Iowa City, IA 52240-4525

Project Title and Number:
 College of Public Health Building - Repair Damage Caused by 1/1/2021 Cashco Valve Failure
 Project # 0881401

PAY APPLICATION PERIOD FROM: 02/01/2021 **TO:** 03/31/2021

1. ORIGINAL CONTRACT SUM:			\$63,000.00
Change Order Summary	<u>ADDITIONS</u>	<u>DEDUCTIONS</u>	
Total changes approved in previous pay periods by owner	\$0.00	\$0.00	
Total approved this pay period	\$0.00	\$1,544.00	
TOTALS	\$0.00	\$1,544.00	
2. NET CHANGE BY CHANGE ORDERS:			(\$1,544.00)
3. CONTRACT SUM TO DATE: (Line 1 + 2)			\$61,456.00
4. TOTAL COMPLETED & STORED TO DATE:			\$61,456.00
5. RETAINAGE: (Completed Work & Stored Material)			\$0.00
6. TOTAL EARNED LESS RETAINAGE: (Line 4 less Line 5 Total)			\$61,456.00
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate)			\$59,850.00
8. CURRENT PAYMENT DUE:			\$1,606.00
9. BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less Line 6)			\$0.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for payment were issued and payments received from the Owner, and the current payment shown herein is now due.

Mashell Zimmerman

 HR

Apr 15, 2021, 10:32 AM

TO: University of Iowa-Facilities Management
 Design & Construction
 200 University Services Building
 Iowa City, Iowa 52242

Project: College of Public Health Building
 Repair Damage Caused by 1/1/21
 Cashco Valve Failure (0881401)

Application No.: 2532-01
 Period Ending: 1/31/2021
 Project No.: 0881401
 Contract Number: CT8660

Contractor: McComas-Lacina Construction LC
 1310 Highland Court
 Iowa City, Iowa 52240

Architect/Owner: Design & Construction
 Facilities Management

Contractor's Application for Payment

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Application is made for payment, as shown below, in connection with the Contract Continuation Sheet is Attached.

- 1. Original Contract Sum \$63,000.00
- 2. Net Change by Change Orders \$0.00
- 3. Contract Sum to Date \$63,000.00
- 4. Total Completed and Stored to Date \$0.00
- 5. Retainage
 - a. 5 % of Completed Work \$0.00
 - b. 0 % of Stored Materials \$0.00
 Total Retainage \$0.00
- 6. Total Earned less Retainage \$0.00
- 7. Less Previous Certificates for Payment \$0.00
- 8. Current Payment Due \$0.00
- 9. Balance to Finish Including Retainage \$63,000.00

Contractor: _____ Date: _____
 By: _____

State of: Iowa
 County of: Johnson
 Subscribed and sworn to before
 me this _____ day of _____

Notary Public: _____
 My Commission expires: _____

CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of their knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents and the Contractor is entitled to payment in the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ _____
 By: _____ Date: _____
 By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

Change Order Summary	Additions	Deductions
Total Changes Approved Previous Months by Owner		
Approved This Month		
No. Date Approved		
Totals	\$0.00	\$0.00
Net Changes by Change Order	\$0.00	\$0.00

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Payment details for voucher: 83801427

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
83801427	0000115392	002	McComas Lacina Construction Company	\$1,606.00	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH: 788765 Dt: 04/16/2021 Amt: \$1,606.00	2532-02FINAL	04/06/2021	Detail	\$1,606.00

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8B Invoice - Page 1 of 1 Service Desk Order - Total Charges with BOM

SO202113067

Default	260.05.0375.00400.51000001.6270.447.08814.00.0000
Usage	260.05.0375.00400.51000001.6275.447.08814.00.0000
One-Time	260.05.0375.00400.51000001.6275.447.08814.00.0000

LABOR

Workgroup	Description	Labor Type	Worker	Hours	Amount	Cost	Billable	Charge
IS Labor		Regular	toyne	01h 00m	95.00	75.00	Y	75.00
IS Labor		Regular	bellna	01h 00m	95.00		N	0.00
								75.00

Action #	Status	SDC	Service ID	Service Catalog	Description
2	Billed	IS - Project		IS - Project	IS - Project
Default	260.05.0375.00400.51000001.6270.447.08814.00.0000				
Usage	260.05.0375.00400.51000001.6275.447.08814.00.0000				
One-Time	260.05.0375.00400.51000001.6275.447.08814.00.0000				

EQUIPMENT

BOM Item Nbr	Description	BOM Serial Nbr	Bin	Picked Up By	Quantity	Amount	Cost	Billable	Charge
JZ337A	Aruba AP-535 (US) Unified AP			bellna	1	598.00	598.00	Y	598.00
QUAM#140727	QUAM SSB-1900/NB CUSTOM FOR U OF IOWA. INCLUDES MUD RING			bellna	1	13.51	13.51	Y	13.51
R1C72A	AP-MNT-MP10-E AP mount bracket 10-pack E			bellna	1	12.40	12.40	Y	12.40
								623.91	

Materials	623.91
Labor	75.00
Total S.O. Charges	698.91
Assets	0.00
Total Project Cost	698.91

University of Iowa Transaction Detail Report Accounting Period 09, Fiscal Year 2021 MARCH 2021 Report ID: 5982820

TDR User Manual | SA3 Report | Balance Sheet | Download in Excel Format | Subscribe | WhoKey Admin

Quick Jump Change

Fund: 660 Casualty Losses **Grant:** 65003885 CPHB Steam Valve Failure **WhoKey:** 660-05-0308-00000-65003885-00-
Org: 05 VP Finance and Operations **Function:** 00 Not Assigned **WhoKey Descr:** CPHB Steam Valve Failure
Dept: 0308 Risk Management Office **BRF:** **WhoKey Status:** Open
Sdept: 0000 Risk Management Office **Owner/PI:** Josey Bathke (BATHKE)
Reviewer: Yoko Tsoi (TSOI)



This report has been marked as reconciled.
TSOI @ 08/31/2021 08:19:30

Reconciliation buttons are located at the bottom of the report.

Secondary Reviewers: Debby Zumbach (DZIMBACH)
Camille Walters Gott (WALTERSC)
WhoKey Purpose: steam valve CPHB claim

IACT	OACT	DACT	CCTR	Journal ID	Amount	Eff Dt	SLID/SLAC
6260	000	00000	0075	1033070BS1 (?)	\$2,198.91	03/31/2021	10681401
FM PROJECT Repair Damage Cause							

GL Payments Detail

0881401 - College of Public Health Building - Repair Damage Caused by 1/1/2021 Cashco Valve Failure

Total \$ 698.91

GL Key	Description	Effect Date	Amount	Sub Code
10 260 05 0375 00400 51000001 6275	WAP MATERIALS	3/31/21	\$ 623.91	447
10 260 05 0375 00400 51000001 6275	INFRASTRUCTURE LABOR	3/31/21	\$ 75.00	447

Fund **Org** **Dept** **Sdept** **Grant/Program** **Iacct** **Oacct** **Dacct** **Fn** **Cctr**

Date (optional): (mm/dd/yyyy)

Result: Valid - Valid MFK

Chartfield Descriptions:

Fund: Casualty Losses
Org: VP Finance and Operations
Dept/Sdept: Risk Management Office
Grant/Program: CPHB Steam Valve Failure
Iacct: Repair Maint Bldg and Land Imp
Fn: Not Assigned
Cctr: College Of Public Hlth Bldg