#### Invoice

### Governor's Office Capitol Building Des Moines, Iowa 50319 515-242-6165

Date:

July 1, 2020

To:

Iowa Department of Revenue

Attention: Matt Bender

Re:

Memorandum of Understanding between the Office of the Governor of Iowa and

the Iowa Department of Revenue

100% of Joel Anderson's salary/benefits from August 12, 2019 – March 13, 2020 (Pay Periods 4 - 19) \$86,204.90

Please process reimbursement upon receipt by CDE or JV1 using the following accounting codes:

Fund: 0001

Department: 350

Unit: 1000

Object/Expense Codes: 1100 \$65,583.60; 1311 \$4,709.00; 1312 \$6,191.16; 1317 \$17.40;

1318 \$93.00; 1323 \$243.72; and 1349 \$9,367.02

## MEMORANDUM OF UNDERSTANDING BETWEEN THE OFFICE OF THE GOVERNOR OF IOWA AND

#### THE IOWA DEPARTMENT OF REVENUE

#### SECTION 1. IDENTITY OF THE PARTIES

- The Office of the Governor of Iowa is authorized to enter into this Memorandum of Understanding ("MOU"). The Office of the Governor's address is State Capitol, 1007 East Grand Avenue, Des Moines, Iowa 50319.
- 1.2 The Iowa Department of Revenue ("Department") is authorized to enter into this MOU. The Department's address is 1305 East Walnut Street, Hoover State Office Building, Des Moines, Iowa 50319.

#### SECTION 2. PURPOSE

The purpose of this MOU is to generally state the division of costs for salary and benefits for a position in the Office of the Governor occupied by Joel Anderson from the pay period beginning on July 1, 2019 and continuing through March 14, 2020.

#### SECTION 3. SCOPE OF SERVICES

Mr. Anderson shall provide strategic support for the Department as agreed to by the Office of the Governor and the Department.

#### SECTION 4. COMPENSATION

The Office of the Governor shall invoice the Department. The Department will use the accounting codes provided on the invoice to pay for the services covered by this MOU.

The Department will be invoiced based on 100 percent of the combined salary and benefit costs of the position from July 1, 2019 through March 14, 2020. Should any change in salary and benefit costs occur after July 1, 2019, the Department will continue to be invoiced 100 percent of the costs of salary and benefits.

#### SECTION 5. PARTIES' RESPONSIBILITIES

The Office of the Governor shall provide information to the Department for transfer of the costs. The Department shall complete all required activity to ensure the timeliness of processing the transfer.

#### SECTION 6. IOWA LAW

The parties acknowledge and agree that lowa law sets forth the duties and powers of both agencies. They further acknowledge and agree that this MOU does not affect those duties and powers. Finally, the parties acknowledge and agree that lowa law controls and takes precedence over this MOU.

#### SIGNATURES:

Office of the Governor

Department of Revenue

Kraig Paulsen, Director Department of Revenue

June 30, 2020 Date.

Correction Document Expenditure(CDE) Dept: 625 ID: 625232019205 Ver.: 1 Function: New Phase: Final

Modified by xyoung, 07/10/2020

Accounting L	ine Line Amount	Line Closed Amount	Line Open Amount	Referenced Line Amount	Event Ty
1	\$65,583.60	\$0.00	\$65,583.60	\$0.00	GA89
2	(\$65,583.60)	\$0.00	(\$65,583.60)	\$0.00	GA89
3	\$4,709.00	\$0.00	\$4,709.00	\$0.00	GA89
4	(\$4,709.00)	\$0.00	(\$4,709.00)	\$0.00	GA89
5	\$6,191.16	\$0.00	\$6,191.16	<b>≈</b> \$0.00	GA89
6	(\$6,191.16)	\$0.00	(\$6,191.16)	\$0.00	GA89
7	\$17,40	\$0.00	\$17.40	\$0.00	GA89
8	(\$17.40)	\$0.00	(\$17.40)	\$0.00	GA89
9	\$93.00	\$0.00	\$93.00	\$0.00	GA89
10	(\$93.00)	\$0.00	(\$93.00)	\$0.00	GA89

Service Dates Additional Amounts General Information Reference Fund Accounting Detail Accounting Budget FY: Event Type: 2020 GA89 Fiscal Year: **Accounting Template:** 2020 Period: Line Description: Reimburse J Anderson salary -13 period 8/12/19 - 3/13/20 per Bank: Governor's Office MOU 0000 Vendor Invoice Number: Line Amount: \$65,583,60 Vendor Invoice Line: Line Closed Amount: \$0.00 Line Closed Date: Vendor Invoice Date: Line Open Amount: Tracking Date: \$65,583.60 Referenced Line Amount: **Check Description:** \$0.00 Interest Ineligible: Payment Type: Special Instructions Code: Interest Amount From IPR: Disbursement Category: PY Accrual/Clearing %: Extension Reason: **Extension Description:** Invoice Acceptance/Sign-Off Date: Billing Profile: After Accounts Payable Period: Percentage Completed Before: Percentage Completed Now:

#### Invoice

## Governor's Office Capitol Building Des Moines, Iowa 50319 515-242-6165

Date:

July 1, 2020

To:

Iowa Department of Human Services

Attention: Jean Slaybaugh

Re:

Memorandum of Understanding between the Office of the Governor of Iowa and

the Iowa Department of Human Services

100% of Elizabeth Matney's salary/benefits from July 1, 2019 – March 13, 2020 (Pay Periods 1 – 19) \$113,600.49

Please process reimbursement upon receipt by CDE or JV1 using the following accounting codes:

Fund:-0001

Department: 350

Unit: 1000

Object/Expense Codes: 1100 \$86,160.72; 1311 \$6,462.77; 1312 \$8,133.58; 1317 \$25.81;

1318 \$137.95; 1323 \$323.96; and 1349 \$12,355.70

Thank you

## MEMORANDUM OF UNDERSTANDING BETWEEN THE OFFICE OF THE GOVERNOR OF IOWA AND

## THE IOWA DEPARTMENT OF HUMAN SERVICES

#### SECTION 1. IDENTITY OF THE PARTIES

- 1.1 The Office of the Governor of Iowa is authorized to enter into this Memorandum of Understanding ("MOU"). The Office of the Governor's address is State Capitol, 1007 East Grand Avenue, Des Moines, Iowa 50319.
- 1.2 The lowa Department of Human Services ("Department") is authorized to enter into this MOU. The Department's address is 1305 East Walnut Street, Hoover State Office Building, Des Moines, Iowa 50319.

#### SECTION 2. PURPOSE

The purpose of this MOU is to generally state the division of costs for salary and benefits for a position in the Office of the Governor occupied by Elizabeth Matney from the pay period beginning July 1, 2019 and continuing through March 14, 2020.

#### SECTION 3. SCOPE OF SERVICES

Ms. Matney shall provide strategic support for the Department as agreed to by the Office of the Governor and the Department.

#### SECTION 4. COMPENSATION

The Office of the Governor shall invoice the Department. The Department will use the accounting codes provided on the invoice to pay for the services covered by this MOU.

The Department will be invoiced based on 100 percent of the combined salary and benefit costs of the position from July 1, 2019 through March 14, 2020. Should any change in salary and benefit costs occur after July 1, 2019, the Department will continue to be invoiced 100 percent of the costs of salary and benefits.

#### SECTION 5. PARTIES' RESPONSIBILITIES

The Office of the Governor shall provide information to the Department for transfer of the costs. The Department shall complete all required activity to ensure the timeliness of processing the transfer.

#### SECTION 6. IOWA LAW

The parties acknowledge and agree that lowa law sets forth the duties and powers of both agencies. They further acknowledge and agree that this MOU does not affect those duties and powers. Finally, the parties acknowledge and agree that lowa law controls and takes precedence over this MOU.

SIGNATU	RE	S
---------	----	---

The Office of the Governor of Iowa

By:

Sara Graig, Chief of Staff Office of the Governor Date: <u>U 30 20</u>

Department of Human Services

By:

Kelly Gardia, Director

Department of Human Services

Date: June 30, 2020

Standard Journal Voucher(JV1) Dept: 401 ID: 401AL 07212020001 Ver.: 1 Function: New Phase: Final

Modified by xyoung, 07/22/2020

Accounting Line	Posting Code	Posting Code Name	Debit Amount	Credit Amount
to the control of the	D014	External Cash Expenditure/Expense	\$113,600.49	\$0.0
	D014	External Cash Expenditure/Expense	\$0.00	\$86,160.7
	D014	External Cash Expenditure/Expense	\$0.00	\$6,462.7
n.::::::::::::::::::::::::::::::::::::	D014	External Cash Expenditure/Expense	\$0.00	\$8,133.
A constitution of the second contraction of	D014	External Cash Expenditure/Expense	\$0.00	\$323.
	D014	External Cash Expenditure/Expense	\$0.00	\$12,355.
16	D014	External Cash Expenditure/Expense	\$0.00	\$25.
10	D014	External Cash Expenditure/Expense	\$0.00	\$137.

General Information Reference Fund Accounting Detail Accounting Budget FY: Event Type: 2020 GA23 Posting Pair: Fiscal Year: 2020 Posting Pair Name: Period: 13 Posting Code: Bank: D014 Posting Code Name: External Cash Expenditure/Expense Accounting Template: Line Description: Elizabeth (Liz) Matney Debit Amount: \$113,600.49 Credit Amount: \$0.00

#### Invoice

### Governor's Office Capitol Building Des Moines, Iowa 50319 515-242-6165

Date:

July 1, 2020

To:

Iowa Economic Development Authority

Attention: Terry Roberson

Re:

Memorandum of Understanding between the Office of the Governor of Iowa and

Iowa Economic Development Authority

100% of Daniel Wolter's salary/benefits from August 5, 2019 – March 13, 2020 (Pay Periods 3-19)

\$94,894.61

Please process reimbursement upon receipt by CDE or JV1 using the following accounting codes:

Fund: 0001

Department: 350

Unit: 1000

Object/Expense Codes: 1100 \$76,928.00; 1311 \$5,770.56; 1312 \$7,262.08; 1317 \$17.40;

1318 \$93.00; 1322 \$515.00; 1323 \$181.35; and 1349 \$4,127.22

Thank you.

# MEMORANDUM OF UNDERSTANDING BETWEEN THE OFFICE OF THE GOVERNOR OF IOWA AND

## IOWA ECONOMIC DEVELOPMENT AUTHORITY

## SECTION 1. IDENTITY OF THE PARTIES

- 1.1 The Office of the Governor of Iowa is authorized to enter into this Memorandum of Understanding ("MOU"). The Office of the Governor's address is State Capitol, 1007 East Grand Avenue, Des Moines, Iowa 50319.
- 1 2 Iowa Economic Development Authority ("Authority") is authorized to enter into this MOU. The Authority address is 1963 Bell Avenue, Suite 200, Des Moines, Iowa 50315.

#### SECTION 2. PURPOSE

The purpose of this MOU is to generally state the division of costs for salary and benefits for a position in the Office of the Governor occupied by Daniel Wolter from the pay period beginning July 1, 2019 and continuing through March 14, 2020.

#### SECTION 3. SCOPE OF SERVICES

Mr. Wolter shall provide strategic support for the Authority as agreed to by the Office of the Governor and the Authority.

#### SECTION 4. COMPENSATION

The Office of the Governor shall invoice the Authority. The Authority will use the accounting codes provided on the invoice to pay for the services covered by this MOU.

The Authority will be invoiced based on 100 percent of the combined salary and benefit costs of the position from July 1, 2019 through March 14, 2020. Should any change in salary and benefit costs occur after July 1, 2019, the Authority will continue to be invoiced 100 percent of the costs of salary and benefits.

#### SECTION 5. PARTIES' RESPONSIBILITIES

Iowa Economic Development Authority

The Office of the Governor shall provide information to the Authority for transfer of the costs. The Authority shall complete all required activity to ensure the timeliness of processing the transfer.

#### SECTION 6. IOWA LAW

SIGNATURES:

The parties acknowledge and agree that Iowa law sets forth the duties and powers, of both agencies. They further acknowledge and agree that this MOU does not affect those duties and powers. Finally, the parties acknowledge and agree that Iowa law controls and takes precedence over this MOU.

₩.	A TA 3 C NOT V 2 NOW THE .			
The	Office of the Governor of Iowa  Sara Craig, Chief of Staff Office of the Governor	Date: _	6/30/20	
lowa	a Economic Development Authority			
Ву:	Debi Durham	Date: _	6/30/2020	
	Debi Durham, Director			

Correction Document Expenditure(CDE) Dept: 269 ID: 20JBCDE844 Ver.: 1 Function: New Phase: Final

Modified by xyoung , 07/21/2020

Accounting Line	Line Amount	Line Closed Amount	Line Open Amount	Referenced Line Amount	Event T
1	(\$76,928.00)	\$0.00	(\$76,928.00)	\$0.00	GA89
2	(\$5,770.56)	\$0.00	(\$5,770.56)	\$0,00	GA89
3	(\$7,262.08)	\$0.00	(\$7,262.08)	\$0.00	GA89
. 4	(\$17.40)	\$0.00	(\$17.40)	\$0.00	GA89
5	(\$93.00)	\$0.00	(\$93.00)	\$0.00	GA89
6	(\$515.00)	\$0.00	(\$515.00)	\$0.00	GA89
7	(\$181.35)	\$0.00	(\$181.35)	\$0.00	GA89
8	(\$4,127.22)	\$0.00	(\$4,127.22)	\$0.00	GA89
9	\$94,894.61	\$0.00	\$94,894.61	\$0.00	GA89

General Information F	teference Fur	nd Accounting	Detail Accounting	Service Dates	Additional Amounts	
Event Type:		Budget FY:				
GA89		2020				
Accounting Template:		Fiscal Year: 2020				
Line Description:		Period: 13				
	and the same of th	Bank:				
	in the second	0000				
Line Amount:		Vendor Invoice	Number:			
(\$76,928.00)		# Professional States				
Line Closed Amount:		Vendor Invoice				
\$0.00						
Line Closed Date:		Vendor Invoice	Date:			
Line Open Amount:		Totalian Detail				
(\$76,928.00)		Tracking Date:				
Referenced Line Amount: \$0.00		Check Descrip	tion:	" .		•
Interest Ineligible:				<b>*</b>		
			Pag.	55		
Payment Type:		Special Instruc	tions Code	end.		
		The state of the s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Interest Amount From IPF	::	Disbursement	Category:			
		la ta dalla				
PY Accrual/Clearing %:		Extension Rea	son:			
		. :				
		Extension Des	cription:			
		Invoice Accep	tance/Sign-Off Date:			
		Billing Profile:				
		After Account	s Payable Period:			
		Percentage Co	mpleted Before:			
		والمعالمة والمستعلقات				
		Percentage Co	mpleted Now:			
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			