IOWA HOUSE OF REPRESENTATIVES

CANDIDATE FINANCIAL DISCLOSURE FORM

The following form shall be used for disclosure of economic interests under House Ethics rules and section 68B.35 of the Iowa Code.

STATEMENT OF ECONOMIC INTERESTS

Name: E	me: Brammer-Smith		Brenda			A.	
3/2	(Last)		(First)			(Middle Initial)	
Address	3044 Garst St	•					
	(Street Address, Apartment Number or P.O. Box)						
	Woodburn	lowa	lowa			50275	
	(City)		(State)			(Zip)	
Phone:	(Home) 641 /4	14 8029 (Bus	iness) <u>641</u>	,414	8029	_	

This form is due 30 days after the deadline for filing nomination papers, 68B.35(5) of the lowa Code. File with the Chief Clerk of the lowa House of Representatives.

In completing this form, if sufficient space is not provided for your answer, you may include additional information/answers by attaching them to this form, using a full-size sheet of paper.

Division I. Business, Occupation, Profession.

List each business, occupation, or profession in which you are engaged, the nature of the business if not evident, and your position or job title. No income threshold or time requirement applies.

Examples:

If you are employed by an individual, state the name of the individual employer, the nature of the business, and your position.

If you are self-employed and are not incorporated or are not doing business under a particular business name, state that you are self-employed, the nature of the business, and your position.

If you own your own corporation, are employed by a corporation, or are doing business under a particular business name, state the name and nature of the business or corporation and your position.

I am a Special Education Consultant for Heartland Area Education Agency (AEA).

NA
D. Real Estate: State the general nature of real estate interests that generate more than \$1,000 of gross income annually, e.g., residential leasehold interest or farm leasehold interest. The size or location of the property interest is no required to be listed. Conservation Reserve Program (CRP) yearly payment
E. Retirement Systems: State the name of each pension plan or other corporation or company that pays you more tha \$1,000 annually in retirement benefits. NA
F. Other Income Categories Specified in State and Federal Income Tax Regulations. NA
Bleude Mammon - Moth 4-8-24 (Date)

Mail to: Chief Clerk's Office, IA House of Representatives, 1007 E. Grand Ave, Des Moines, IA 50319