

UNIFORM CONFLICT OF INTEREST DISCLOSURE STATEMENT

State Form 54266 (R2 / 9-24) / Form 236 STATE BOARD OF ACCOUNTS

"A public servant who knowingly or intentionally (1) has a pecuniary interest in; or (2) derives a profit from; a contract or purchase connected with an action by the governmental entity served by the public servant commits conflict of interest, a Level 6 Felony." Ind. Code 35-44.1-1-4(b).

As defined by IC 35-31.5-2-261, "public servant" means a person who:

- (1) is authorized to perform an official function on behalf of, and is paid by, a governmental entity;
- (2) is elected or appointed to office to discharge a public duty for a governmental entity; or
- (3) with or without compensation, is appointed in writing by a public official to act in an advisory capacity to a governmental entity concerning a contract or purchase to be made by the entity.

A public servant has a pecuniary interest in a contract or purchase if the contract or purchase will result or is intended to result in an ascertainable increase in the income or net worth of the public servant or a dependent of the public servant. IC 35-44.1-1-4(a)(3).

A "dependent" means the spouse of a public servant; a child, stepchild, or adoptee of a public servant who is unemancipated and less than eighteen (18) years of age; or an individual more than one-half of whose support is provided during a year by the public servant. IC 35-44.1-1-4(a)(1).

Complete this form in its entirety. Legal counsel should be consulted.

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1.	Full	name and address of public servant submitting this form: Flother hokt			
2.	a.	Job title: Administrative Assistant			
	b.	Governmental entity: Yark Cemetery			
	c.	County: Hancock			
FO	R C	ONTRACTS, PLEASE COMPLETE SECTION 3.			
FOR PURCHASES OF GOODS OR SERVICES (WITHOUT A CONTRACT), COMPLETE SECTION 4.					
3.	lde	ntify and describe the contract involved (complete a separate Disclosure Form for each contract):			
	a.	Full legal name and address of contractor: C+H Heating and Cooling, LLC 5873 W. Old National KO Knightstown, The Hulls			
	b.	Full name and address of "dependent" (if applicable): Casey Short			
	υ.				
	C.	Identify the governmental entity that is a party to the contract:			
	d.	Relationship of public servant to contractor.			

	e.	Specific ownership interest (and/or job title) of the public servant (or the public servant's dependent) in contractor:
	f.	Start date and end date of contract:
	g.	Total dollar amount of contract:
	h.	Specific financial interest (and/or dollar amount) derived by the public servant (or the public servant's dependent) as a result of the contract:
	i.	Date of the public meeting and the name of the governmental entity that accepted the contract (Note: this date MUST be prior to any final action on the contract or purchase):
4.	Ide	entify and describe each purchase of goods or services (which does not involve a contract) in which public servant has a pecuniary interest:
	a.	Describe the good or service purchased: HVAC Equip / Parts
	b.	State the total dollar amount of each purchase:
	c. d.	Full legal name of vendor: CtH Heating and Cooling LLC Name of governmental entity making the purchase of goods or services:
	e.	Specific ownership interest (and/or job title) of the public servant (or the public servant's dependent) in vendor:
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	f.	Full name and address of "dependent" (if applicable):
	g.	Purchase date:
	h.),	Specific financial interest (and/or dollar amount) derived by the public servant (or the public servant's dependent) as a result of the purchase:
		- Frank weeks
	i.	Date of the public meeting and the name of the governmental entity that accepted the purchase of goods or services (Note: this date MUST be prior to any final action on the contract or purchase):

IF PUBLIC SERVANT IS APPOINTED, COMPLETE SECTION 5

ALL OTHER PUBLIC SERVANTS, COMPLETE SECTION 6

5.	Approval of elected public servant or boarc of trustees of a state supported college or university that appointed the public servant:				
	I / WE hereby approve this Conflict of Interest Form concerning the public servant for the contract or purchase described herein on this day:				
	Date of Appointment:				
	Date of Approval of Conflict of Interest:				
	Signature Printed Name, Job Title				
	Signature Printed Name, Job Title				
6.	Approval by governmental entity at public meeting				
	a. Date this Conflict of Interest was submitted to the governmental entity:				
	b. Date of the public meeting this Conflict of Interest Form was accepted by the public entity (Note: this date MUST be prior to any final action on the contract or purchase):				
7.	Affirmation of Public Servant:				
	This disclosure was submitted to and accepted by the governmental entity in a public meeting (identified above) prior to final action on the contract or purchase.				
	I affirm, under penalty of perjury, the truth and completeness of the statements made above.				
	Signed: Mathely NOT				
	Printed Name: Heather Short				
	Date: 1-22-25				
	Email Address: <u>heatherdaunshoete</u> me. com				
8.	Filing Requirement				
	Within fifteen (15) days after final action on the contract or purchase, copies of this statement must be filed with both:				
	1. The Indiana State Board of Accounts by uploading at https://gateway.ifionline.org/sboa_coi/; and				

2. The Clerk of the Circuit Court of the county where the governmental entity took final action on the

contract or purchase.