

Cook, Pam.

From: Cook, Pam
Sent: Tuesday, June 28, 2016 2:46 PM
To: IG Info
Cc: Akers, Zachary
Subject: CONFLICTS OF INTEREST - CONTRACTS

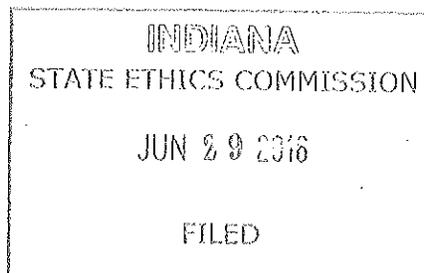
PART 1 - GENERAL INFORMATION

Name (Last): Pam
Name (First): Cook
Name (Middle):

Office Address: 140 N. Senate Ave
City: Indianapolis
Zip Code: 46204

Title or position within agency: Library tech Name of agency: Indiana State Library Office Telephone: 317-232-3739

Email Address: pcook@library.IN.gov



PART 2 - CONTRACT

List the name for each entity (i.e. vendor, contractor, consultant, subcontractor, or subconsultant) in which you have a financial interest that has a contract with a state agency. Also, list the name of the state agency the entity is contracting with (use a different form for each contract) None

Entity's business name:

Entity's business name:

This contract was:
not subject to notice and bidding requirements

Description(s) of Contract(s): (Describe the type of contract involved and the effective date and term of the contract if reasonably determinable.) DNR desires to purchase a piece of property that we own in Jacksoncounty for \$23,500. We have owned the property for 20 years and DNRhas purchased all of the property around this piece of land which sitsbeside the Muscatatuk river. They approached us with the purchaseagreement.

Description of the Financial Interest: (Describe in what manner the state officer, employee, or special state appointee expects to derive a financial interest from or otherwise has a pecuniary interest in, the above contract. State the approximate dollar value of the interest if reasonably determinable. Attach extra pages if additional space is needed.) \$23,500 to be paid for 17.41 acres which sits beside Muscatatuk river. This is not a contract but an outright purchase of property. DNR hasdetermined that this price is fair market value and we had no inputinto the price which was determined by the state. This property willbecome a portion of the state forest.

PART 3 - AGENCY CERTIFICATION

Approval of appointing authority (to be completed in the case of a contract for professional services only.) Being the (Title of Appointing Authority) of (Name of Contracting Agency)

I hereby affirm that no other state officer, employee, or special state appointee of (Name of the Contracting Agency) is available to perform those services as part of the regular duties of the state officer, employee, or special state appointee.

(Name of Appointing Authority) (Signature)

Pamela Cook *6-29-18*

PART 4 - AFFIRMATION

I submit this statement to the Inspector General pursuant to 42 IAC 1-5-7 (IC 4-2-6-10.5) to disclose my financial interest in a contract with an agency. This contract can be performed without compromising the performance of my official duties and responsibilities as a state officer, employee or special state appointee. I affirm that I do not participate in or have contracting responsibility for the contracting agency. I further affirm that the contract was made after public notice or competitive bidding, if applicable. I also affirm, under penalty of perjury, the truth and completeness of the statements made above and that I am the above named state officer, employee, or special state appointee.

Signed: Date: