



**ETHICS DISCLOSURE STATEMENT
CONFLICTS OF INTEREST - DECISIONS AND VOTING**
State Form 55860 (R / 10-15)
OFFICE OF THE INSPECTOR GENERAL
IC 4-2-6-9

FILED

JUN 29 2023

INDIANA STATE
ETHICS COMMISSION

In accordance with IC 4-2-6-9, you must file your disclosure with the State Ethics Commission no later than seven (7) days after the conduct that gives rise to the conflict. You must also include a copy of the notification provided to your agency appointing authority and ethics officer when filing this disclosure. This disclosure will be posted on the Inspector General's website.

Name (last) STRACK	Name (first) PAUL	Name (middle) CHARLES
Name of office or agency NATIVE AMERICAN INDIAN COMMISSION		Job title COMMISSIONER
Address of office (number and street) 100 North Senate Ave, Room N300		City Indianapolis
Office telephone number (202) 341-5134		ZIP code 46204
Office e-mail address (required) R2ETOWN@FACENTIER.COM		
Describe the conflict of interest: I am a commissioner for the Indiana Native American Indian Affairs Commission's (INAIAC) board. THE LIMITED EDITION PENNSYLVANIA BLANKET THAT THE INDIANA NATIVE AMERICAN INDIAN AFFAIRS COMMISSION WANTS TO AWARD TO MR JOHN VAN AUSSALL TO HONOR HIS COMMITMENT TO INDIANA NATIVE AMERICANS BELONGS TO ME. I DECIDED TO SELL IT TO THE COMMISSION FOR \$200.-		

Describe the screen established by your ethics officer. (Attach additional pages as needed.)

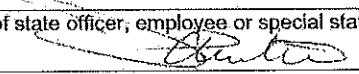
Paul Strack is a commissioner on the Indiana Native American Indian Affairs Commission (INAIAC).

Any funding proposals, possible voting, and approval of funding detailed above would be a conflict of interest for me and would require screening. I will be prohibited from participating in any decisions or votes, or matters related to decisions or votes in which I have a financial interest. In the event I learn funding for the interest detailed above will be discussed by the INAIAC, I will file a Conflict of Interest - Contract Disclosure Statement prior to the funding request and INAIAC awarding any funds in order to fully comply with Ind. Code. §4-2-6-10.5. Further, I will work with the Indiana Civil Rights Commission's Ethics Officer and INAIAC's Director to ensure this established screen is followed.

AFFIRMATION

Your signature below affirms that your disclosures on this form are true, complete, and correct to the best of your knowledge and belief. In addition to this form, you have attached a copy of your written disclosure to your agency appointing authority and ethics officer.

Signature of state officer, employee or special state appointee



Date signed (month, day, year)

6.6.23

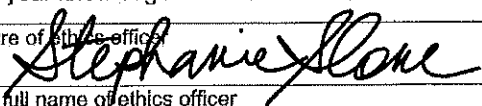
Printed full name of state officer, employee or special state appointee

PAUL C. STRACK

FOR ETHICS OFFICER USE ONLY

Your signature below affirms that you have reviewed this disclosure form and that it is true, complete, and correct to the best of your knowledge and belief. You also attest that your agency has implemented the screen described above.

Signature of ethics officer



Date signed (month, day, year)

6/29/2023

Printed full name of ethics officer
Stephanie Stone

Baker, Nathaniel P

From: Slone, Stephanie N
Sent: Thursday, June 29, 2023 3:14 PM
To: IG Info
Cc: Wilson, Gregory L
Subject: Conflicts of Interest - Decisions and Voting
Attachments: INAIAC Paul Strack Conflict of Interest Form.pdf

Please find INAIAC Commissioner Strack's ethics disclosure statement.
Thanks,
Stephanie

Stephanie Slone, Esq.

Deputy Director
Internal/External Programming
Indiana Civil Rights Commission
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