



**CONFLICTS OF INTEREST – CONTRACTS FILED**  
**ETHICS DISCLOSURE STATEMENT**  
 State Form 53345 (R2 / 8-15)  
 OFFICE OF THE INSPECTOR GENERAL  
 IC 4-2-6-10.5

**APR 17 2024**  
 INDIANA STATE  
 ETHICS COMMISSION

**Mall to:**  
**OFFICE OF INSPECTOR GENERAL**  
 315 West Ohio Street, Room 104  
 Indianapolis, IN 46202  
 Telephone: (317) 232-3850  
**E-mail** scanned copy to: [info@ig.in.gov](mailto:info@ig.in.gov)

Check if you are making a correction to a previously filed statement.

A state officer, employee, or special state appointee may not knowingly have a financial interest in a contract made by an agency. The term financial interest is defined in IC 4-2-6-1. This prohibition, however, does not apply to an officer, employee, or special state appointee who (1) does not participate in or have contracting responsibility for the contracting agency and (2) meets the criteria in IC 4-2-6-10.5(b)(2) and (c)(1)-(5). One criterion is that the officer, employee, or special state appointee must file a written statement with the Inspector General before the officer, employee, or special state appointee executes the contract with the state agency.

The foregoing consists only of excerpts from IC 4-2-6-10.5. Care should be taken to review IC 4-2-6-10.5 in its entirety to ensure compliance with all criteria set forth in the statute. This disclosure will be posted on the Inspector General's website.

**PART 1 – GENERAL INFORMATION**

Last name Weber	First name Maureen	Middle initial E
Address of office (number and street, city, state, and ZIP code) 402 West Washington Street, Suite W-362, Indianapolis, IN 46207		
Title or position within agency Chair	Name of agency Early Learning Advisory Committee/Family and Social Services Administration	

**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).

Business name of entity Early Learning Indiana	Name of entity contact person (first name and last name) Jonathan Dilley
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This contract was (check one):  
 made after public notice and, if applicable, through competitive bidding; or  
 not subject to notice and bidding requirements

If the contract was not subject to notice and bidding requirements, please provide the basis for that conclusion here.

Description(s) of Contract(s): (Describe the type of contract involved and the effective date and term of the contract if reasonably determinable.)  
 Since 2016, Early Learning Indiana (ELI) has served as the coordinating organization for Indiana's Child Care Resource and Referral Network. In 2023, the State of Indiana issued a Request for Proposals (RFP23-74522) for these services. ELI submitted a responsive bid and was selected to carry out these services. There were no other responsive bidders. The contract is effective from October 1, 2023 through September 30, 2027 with renewals available at the State's option.

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.)*

I serve as President and Chief Executive Officer of Early Learning Indiana. No portion of my compensation and benefits are currently or will be paid from the proceeds of this contract.

**ONLY COMPLETE PART 3 IF CONTRACT IS FOR PROFESSIONAL SERVICES**

**PART 3 – AGENCY CERTIFICATION**

Approval of appointing authority

Being the \_\_\_\_\_ of \_\_\_\_\_  
*(Title of Appointing Authority)* *(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.

Signature of Appointing Authority	Date signed (month, day, year)
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Name of Appointing Authority
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**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.

Signature <i>Maureen Weber</i>	Date signed (month, day, year) 04/16/24
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