

JAN 16 2020



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

Indiana Office of Inspector General

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) <i>Rockensuss</i>		Name (first) <i>Brian</i>		Name (middle) <i>Charles</i>	
Name of office or agency <i>Indiana Department of Environmental Management</i>			Job title <i>Chief of Staff</i>		
Address of office (number and street) <i>100 N. Senate Avenue</i>			City <i>Indianapolis</i>		ZIP code <i>46204</i>
Office telephone number <i>(317) 233-2550</i>		Office e-mail address (required) <i>brockens@idem.in.gov</i>			
Describe the conflict of interest: <i>I am a board member of the non-profit organization, Fountains of Hope, International. Fountains of Hope is an organization that provides safe drinking water to communities in countries that are suffering from a disaster. Fountains of Hope is a United Way organization that can be chosen for by an agency for the SECC Campaign. At IDEM the decision on which organization we support is decided by the Commissioner. In 2019 the Commissioner decided to support the Fountains of Hope.</i>					

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

My I will be screened from my decisions relating to the support of Fountains of Hope through the SEEC campaign.

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)



1/16/20

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


Brian Rockness

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)



1/16/2020

Printed full name of ethics officer

Kathleen Mills

Baker, Nathaniel P

Subject: RE: Ethics Disclosure

From: MILLS, KATHLEEN

Sent: Thursday, January 16, 2020 1:44 PM

To: Cooper, Jennifer <JCooper@ig.IN.gov>

Cc: Rockensuess, Brian <BRockens@idem.IN.gov>; PIGOTT, BRUNO <BPIGOTT@idem.IN.gov>

Subject: Ethics Disclosure

Jennifer,

I have attached to this email an Ethics Disclosure statement from IDEM's Chief of Staff Brian Rockensuess. Mr. Rockensuess is a board member of the non-profit organization Fountains of Hope.

IDEM Commissioner Bruno Pigott decided that IDEM would support Fountains of Hope during the latest SECC campaign.

Although Mr. Rockensuess did not participate in that decision, I thought it best that Mr. Rockensuess file this disclosure statement. The fact that an organization for which he is a board member received a financial boost from IDEM might cause an individual, who did not know the situation, to think that IC 4-2-6-9 had been violated.

Mr. Rockensuess will be screened from any further financial matters regarding Fountains of Hope. I've also sent this email to the Commissioner as notification of this disclosure.