

FILED

JUN 11 2024

INDIANA STATE
ETHICS COMMISSION



**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

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) Davidson	Name (first) Harold	Name (middle)
Name of office or agency Indiana Department of Homeland Security		Job title Commission Member
Address of office (number and street) 302 West Washington Street, Room E-208		City Indianapolis
Office telephone number (317) 232-2222		ZIP code 46204
Office e-mail address (required) buildingcommission@dhs.in.gov		

Describe the conflict of interest:
I serve as a member of the Fire Prevention and Building Safety Commission ("Commission"). I am employed by the State of Indiana, specifically the Department of Labor. The Commission, in part, reviews variance requests to codes it has adopted. When a variance is filed with the Indiana Department of Homeland Security ("Department") it may make a determination on a variance request. If the Department defers its authority to make a determination on a variance request, it is presented to the Commission to make the determination.

At the June 4, 2024 Commission meeting, variance request 24-05-44, North American Cold Storage, was presented. North American Cold Storage is a customer of the Indiana Department of Labor. Indiana Department of Labor employees have been on site at North American Cold Storage for a safety and health visit/consultation. I felt it prudent to recuse myself from this variance.

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

I attended the June 4, 2024 meeting in person. When the variance was considered, I recused myself from the matter and left the room. I was not present for any discussion or vote. I did not return to the room until someone informed me the Commission was finished with that agenda item.

✓ ID

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)

[Handwritten Signature]

6-10-24

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

HAROLD DAVIDSON

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)

[Handwritten Signature]

6-11-24

Printed full name of ethics officer

Kristi Shote

Baker, Nathaniel P

From: Shute, Kristi
Sent: Tuesday, June 11, 2024 9:06 AM
To: Thacker, Joel
Cc: Davidson, Harold G
Subject: Conflict of Interest-Decisions and Voting Disclosure-Harold Davidson
Attachments: Decisions and Voting disclosure-Davidson, Harold 06042024 meeting signed.pdf

Good morning, Executive Director Thacker,

To comply with IC 4-2-6-9, a special state appointee who identifies a potential conflict of interest must notify their appointing authority and either request an advisory opinion from the State Ethics Commission or file a disclosure statement. Please accept this email as official notification. A copy of the Disclosure Statement is included for your reference. The Disclosure Statement will be filed with the Inspector General's Office later today and I anticipate we will receive a file-stamped copy within a few business days.

Please let me know if you have any questions or need additional information.

Sincerely,

Kristi Shute | Deputy General Counsel and Ethics Officer
Indiana Department of Homeland Security
302 W. Washington St., Room E208
Indianapolis, IN 46204
Phone: 317-967-4101
Email: kshute@dhs.in.gov