## FILED



## 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

INDIAN ETHICS COMMISSINA

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

| Certeral's Websito.  |                                  |                      |   |                |  |  |  |  |
|--|----------------------------------|----------------------|---|----------------|--|--|--|--|
| Name (last)  | Name (first)                     |                      | Name (middle)                           |                |  |  |  |  |
| Reid   | John                             |                      |   |                |  |  |  |  |
| Name of office or agency   |                                  | Job title            |   |                |  |  |  |  |
| Indiana Department of Homeland Security  |                                  | Senior Code Official |   |                |  |  |  |  |
| Address of office (number and street)  |                                  | City                 |   | ZIP code       |  |  |  |  |
| 302 West Washington Street   |                                  | Indianap             | Olis                                    | 46204          |  |  |  |  |
| Office telephone number  | Office e-mail address (required) | 1                    |   |                |  |  |  |  |
| ( 317 ) 417-6658   | jreid@dhs.in.gov                 |                      |   |                |  |  |  |  |
| Describe the conflict of interest:   |                                  |                      |   |                |  |  |  |  |
| As a Senior Code Official I inspect businesses to verify compliance with building and fire codes. I would like |                                  |                      |   |                |  |  |  |  |
| to engage in secondary employment at a Circle S convenience store, which is owned by C&S Inc., as a            |                                  |                      |   |                |  |  |  |  |
| to engage in secondary employment  |                                  | 20101                | 211101011111111111111111111111111111111 |                |  |  |  |  |
| cashier. This position may also include  | stocking shelves and other       | related to           | asks. C&S owns sev                      | eral buildings |  |  |  |  |
|  |                                  |                      |   |                |  |  |  |  |
| in the area I am assigned to conduct i   | nspections.                      |                      |   |                |  |  |  |  |
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|   | Describe the screen established by your ethics officer. (Attach additional pages as needed.)  Describe the screen established by your ethics officer. (Attach additional pages as needed.) |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| the besteen established been assigned to my supervisor Ryan Wineing   | er.  |  |  |  |  |  |  |
| escribe the screen established by your ethics officer. (Attach additional pages as need ascribe the screen established by your ethics officer. (Attach additional pages as need ascribe the screen established by your ethics officer. (Attach additional pages as need ascribe the screen established by your ethics officer. (Attach additional pages as need ascribe the screen established by your ethics officer. (Attach additional pages as need ascribe the screen established by your ethics officer.) |  |  |  |  |  |  |  |
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| AFFIRMATION   |  |  |  |  |  |  |  |
| Your stanature below affirms that your disclosures on this form are true, complete, a   | and correct to the pest of VES   |  |  |  |  |  |  |
| knowledge and belief. In addition to this form, you have attached a copy of your wire authority and ethics officer.   | ritten disclosure to your agenc;   |  |  |  |  |  |  |
| Plantitur offstale officer.   |  |  |  |  |  |  |  |
| Charalture of state officer, employee or special state appointee  | Date signed (month, day, year)   |  |  |  |  |  |  |
| name of state officer, amployee on  | 1/8/25   |  |  |  |  |  |  |
| Ar Consider appointed   |  |  |  |  |  |  |  |
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| FOR ETHICS OFFICER USE ONLY poest of your knowledge and belief. You also attest that your agency has implemented  |  |  |  |  |  |  |  |
| test of your knowledge are that you have review   | L to Alam  |  |  |  |  |  |  |
| ilignature of ethics are  | is true, complete, and correct to the  |  |  |  |  |  |  |
| viluar volir eggs that volir eggs   | ed the screen described above.   |  |  |  |  |  |  |
| Pinled 6.3 ayency has implemente  |  |  |  |  |  |  |  |
| best of your knowledge and belief. You also attest that your agency has implemented full name of ethics officer   |  |  |  |  |  |  |  |
| Printed full name of ethics officer  KC:5+: Sho+e   | Date signed (month, day, year)   |  |  |  |  |  |  |

## Perrodin, Regan (IG)

From:

Shute, Kristi

Sent:

Thursday, January 9, 2025 1:14 PM

To:

Whitham, Jonathan

Cc: Subject: Wineinger, Ryan; Reid, John Conflict of Interest-Decisions and Voting Disclosure-John Reid

Attachments:

Decisions and Voting disclosure-Reid, John signed.pdf

Good afternoon, Acting Executive Director Whitham,

To be in compliance with IC 4-2-6-9, a state employee 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