Indianapolis
Mayor Gregory A. Ballard

2013
CITY OF INDIANAPOLIS
STATEMENT OF ECONOMIC INTEREST

Please review www.indy.gov/ethics if you have questions about this form.

The City of Indianapolis/Marion County requires the following individuals to file this form with the Office of Corporation Counsel (OCC) between April 1st and May 1st each year:

(1) The Mayor, Assessor, Auditor, Clerk, Coroner, Recorder, Sheriff, Surveyor, Treasurer, and any declared candidate for those offices.

(2) Appointees to city/county boards/commissions (except advisory bodies designated by OCC);

(3) The director of any city/county agency/department and any employee who reports directly to the director and any employee who reports directly to an elected official listed in subpart (1);

(4) Any employee whose employment is subject to the approval of the City-County Council; and,

(5) Any employee designated by OCC as having "final purchasing authority" and all employees of the purchasing division of the Office of Finance and Management.

Please Note:

- If you fall into multiple categories above, you need only file one (1) form.
- In addition to the annual filing requirement, new appointees and new employees, declared candidates for elected office, and employees leaving city/county employment must also file this form, as required by Section 293-322. (For more information on this, see www.indy.gov/ethics.)
- An individual required to file this form must file an amended form upon discovery of any additional information that is required to be reported.
- OCC reviews each form to ensure that it is complete, legible, and filed in a timely manner.
- Failure to file the form in a timely manner may subject you to sanctions by the Ethics Commission.

ALL QUESTIONS MUST BE ANSWERED COMPLETELY & LEGIBLY

1. Your Full Name: DEBRA S. JENKINS
2. Your Email Address: debra.jenkins@indy.gov Your Work Phone Number: 317-327-4460
3. Your Employer's Name: MARION COUNTY SURVEYOR'S OFFICE
4. Your Employer's Address: 200 E. WASHINGTON ST. SUITE 742
5. Nature of Your Employer's Business: Surveys
6. List any elected office(s) you hold OR check here ☐ if none: MARION COUNTY SURVEYOR
7. List any city/county boards/commissions to which are you are appointed OR check here ☐ if none.

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8. List the city/county department/agency that employs you and the positions you hold OR check here ☐ if you are not employed by the city/county.

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Please Complete Reverse Side

Please attach extra sheets as necessary to fully respond to any question.

9. Did you, your spouse, or your dependent have a financial interest in any contract, other than an employment contract, with any city/county agency/department during the past twelve (12) months? ☐ YES ☒ NO

   If YES, list the agency/department and contractor's name, and describe each such contract:

10. State the name of any business entity from which you received compensation that to the best of your knowledge does (or intends to do) business with any city/county agency/department during your term of office, employment, or appointment with the city/county OR check here ☒ if none.

11. State the name of any business entity in which you, or any member of your immediate family, owns stocks, bonds, or other investments which (i) constitute ownership of five (5) percent or more of that business or (ii) have a value in excess of five thousand dollars ($5,000.00) and which business entity, to the best of your knowledge, is doing or intends to do business with an agency/department OR check here ☒ if none:

12. Provide any additional information you would like to disclose on an attached sheet OR check here ☒ if there is no other additional information you would like to disclose.

13. *Elected Officials Only*: Did you accept any entertainment, food, drink, honoraria, travel expenses, and registration fees from a person who has a business relationship with any city/county agency/department that (i) are not exempted by subparts (2) through (11) of Section 293-201(b) and (ii) are valued in excess of $100? ☐ YES ☒ NO

    If YES, list, on an attached sheet, from whom the item was received, the date the item was received, a short description of the item, and the value of the item.

☐ Check here if you have NOT received ethics training by the Office of Corporation Counsel (OCC) in the last two years. If you have not, OCC will contact you to schedule training.

I AFFIRM UNDER THE PENALTIES OF PERJURY THAT MY STATEMENTS ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Debra S. Jenkins
Signature

April 10, 2013
Date

PLEASE SIGN, DATE, & RETURN THIS COMPLETED FORM TO THE

Office of Corporation Counsel
1601 City County Building
200 East Washington Street
Indianapolis, Indiana 46204
Fax: 317.327.3968/Email: ethics@indy.gov