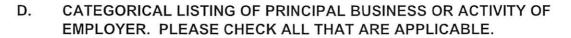


LEGISLATIVE AGENT/EMPLOYER INITIAL REGISTRATION STATEMENT

This statement must be filed with the Clerk of Council within ten (10) days of engagement. Please read instructions and review Section 112-5 prior to filing. There is a \$25.00 fee for this filing. *Check or money order only made payable to "Clerk of Council"*. Upon termination of this engagement, there is an affirmative duty to notify the Clerk of Council within thirty (30) days) the form may be obtained from Clerk. ANY PERSON WHO KNOWINGLY FILES A FALSE STATEMENT IS GUILTY OF FALSIFICATION UNDER SECTION 2921.13 OF THE OHIO REVISED CODE, WHICH IS A MISDEMEANOR OF THE FIRST DEGREE.

Α.	LEGISLATIVE AGENT INFORMATION		
1.	Full Name MATT DAVIS		
2.	Occupation GOVERNMENT AFFAIRS		
3.	Title/PositionPRESIDENT		
4.	Business Address 255 East fifth street 1900		
	CivinnafiOH45202CityStateZip(+4)		
5.	Telephone Number ()971 - 9640		
6.	Date of Engagement as Legislative Agent7		
В.	EMPLOYER INFORMATION		
1.	Full name of company or organization Norfork contraction		
2.	Type of Industry Transparation		
3.	Business Address One Constitution ave Suite 300 NE		
	Washington pl 22302		
C.	BRIEF DESCRIPTION OF THE TYPE OF LEGISLATION TO WHICH LEGISLATIVE AGENT'S ENGAGEMENT RELATES.		



Agriculture	Environment	Real Estate/Housing
Alcohol/Tobacco	Financial Institutions/Consumer Finance	Retail and Commercial
Arts/Entertainment	Medical/Hospitals/Health Care	Service Business
Communications/Media	Insurance	Social Svs./Human Svs.
Contractors/Construction	Labor/Labor Organizations	Science and Technology
County/Local Government	Legal	State Employees
Education	Manufacturer	State Government
Energy/Utilities	Public Interest	Transportation

<u>CERTIFICATION:</u> THE UNDERSIGNED HEREBY CERTIFY THAT ALL REASONABLE EFFORTS AND DUE DILIGENCE HAVE BEEN UNDERTAKEN IN THE PREPARATION AND COMPLETION OF THIS STATEMENT AND THAT THE CONTENTS ARE TRUE AND ACCURATE TO THE BEST OF HIS OR HER KNOWLEDGE.

ALL SIGNATURES MUST BE ORIGINAL AND SIGNED PERSONALLY BY THE NAMED INDIVIDUAL.

MATT DAVIS	
Type or Print Name of Legislative Agent	
Signature of Legislative Agent	7/19/21
Darrell Wilson	Date
Type or Print Name of Persons Signing for Employer	
BY: Mull Mal	
Signature for Employer	1 1
AVP Government	7/14/21