202100872 \$25.00 FILING FEE

Clerk of Council

801 Plum Street, Room 308 Cincinnati, Ohio 45202 (513) 352-3246

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.

LEGISLATIVE AGENT INFORMATION				
Full Name_Thomas E. Nieh	aus			
Occupation_Lobbyist				
Title/Position_Principal, Vorys Advisors				
Business Address 301 E. Fourth Street		3500		
Cincinnati	Street Ohio	Suite Number 45202		
City	State	Zip(+4)		
Telephone Number (513) <u>319-6560</u>			
	Date of Engagement as Legislative Agent 11/17/2020			
	islative Agent 11/17/20	20		
	islative Agent 11/17/20	20		
		20	***	
Date of Engagement as Leg	TION	20		
Date of Engagement as Leg EMPLOYER INFORMA	TION ganization_BP	20		
Date of Engagement as Leg EMPLOYER INFORMA Full name of company or org Type of Industry Oil & Gas	TION ganization_BP	20		
EMPLOYER INFORMA Full name of company or org Type of Industry Oil & Gas Business Address 300 Sout	TION ganization_BP	20 Suite Number		
Date of Engagement as Leg EMPLOYER INFORMA Full name of company or org Type of Industry Oil & Gas	TION ganization BP h Wacker Drive		25FEB'21	

D. CATEGORICAL LISTING OF PRINCIPAL BUSINESS OR ACTIVITY OF EMPLOYER. PLEASE CHECK ALL THAT ARE APPLICABLE.

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	
X Energy/Utilities	Public Interest	Transportation	
CERTIFICATION: THE UNDERSIGNED HOLIGENCE HAVE BEEN UNDERTAKEN IN THAT THE CONTENTS ARE TRUE AND ACTUAL SIGNATURES MUST BE ORIGINAL ATTHORISE. Niehaus Type or Print Name. of Legislative Agent	THE PREPARATION AND COMPLETION COURATE TO THE BEST OF HIS OR HE	N OF THIS STATEMENT AND R KNOWLEDGE.	
Signature of Legislative Agent	11/17/2020 Date		
Mary Caprella			
Type or Print Name of Persons Signing for Employer			
BY: Jay 1- Cycle			
Signature for Employer		:	
State and Local Government Affairs I	Director 11/17/2020		
Title	Date		