

**Clerk of Council**

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

**\$25.00 FILING FEE**

202401648

**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.

**A. LEGISLATIVE AGENT INFORMATION**

- 1. Full Name Kevin Burton
- 2. Occupation Business Development
- 3. Title/Position VP
- 4. Business Address 515 Monmouth St, Suite 301  
Street Suite Number  
Newport KY 41071  
City State Zip(+4)
- 5. Telephone Number (859-) 801-3763
- 6. Date of Engagement as Legislative Agent May 30 2024

**B. EMPLOYER INFORMATION**

- 1. Full name of company or organization Cincinnati Organized Dedicated Employees (C.O.D.E)
- 2. Type of Industry Labor organizations
- 3. Business Address 700 W Pete Rose Way #10  
Street Suite Number  
Cincinnati OH 45203-1892  
City State Zip(+4)

**C. BRIEF DESCRIPTION OF THE TYPE OF LEGISLATION TO WHICH LEGISLATIVE AGENT'S ENGAGEMENT RELATES.**

Working with C.O.D.E to facilitate meeting with Council member, and advising them on legislative matters

8/11/1957

Dear Sir,  
I have the honor to acknowledge the receipt of your letter of the 11th inst. regarding the matter mentioned therein. I am sorry that I cannot give you a more definite answer at this time, but I am sure that you will understand my position.

Business Development

Very truly yours,  
[Signature]

801-213

May 20 1957

(S.S.S.)

Division of Regional Services

Washington, D.C.

1000 15th St. N.W.

CLERK OF COUNCIL

1505 - 2051

100

7 JUN '24 PM 1:44

Very truly yours,  
[Signature]

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

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

**CERTIFICATION:** 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.

Kevin Burton

Type or Print Name of Legislative Agent



Signature of Legislative Agent

May 31 2024

Date

Kathleen L. Schulte

Type or Print Name of Persons Signing for Employer

BY: 

Signature for Employer

CODE PRESIDENT

Title

June 4, 2024

Date