Clerk of Council

801 Plum Street, Room 308 Cincinnati, Ohio 45202 (513) 352-3246 \$25.00 FILING FEE

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	
1.	Full Name_ Anne Sesler
2.	OccupationCMSVl+ant
3.	Title/Position Dic. of Public Afrairs
4.	Business Address 700 Walnut St., Swite 450
	$\frac{\text{City}}{\text{City}} \frac{\text{OH}}{\text{State}} \frac{\text{Y5202}}{\text{Zip(+4)}}$
5.	Telephone Number (513)651 - 4100
6.	Fab 12024
В	. EMPLOYER INFORMATION
1	Full name of company or organization LADD
2	
3	Business Address 3603 Victory PKWY Suite Number
	Cincinnat 0H 45229 City State Zip(+4)
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SMAR'24ANS:8	Support for people living with developmental disabilities.
CLERK OF COUR	

EMPLOYER. PLEASE CHECK ALL THAT ARE APPLICABLE. _Real Estate/Housing Environment Agriculture Retail and Commercial Financial Institutions/Consumer Finance Alcohol/Tobacco Service Business Medical/Hospitals/Health Care Arts/Entertainment Social Svs./Human Svs. Communications/Media Insurance Science and Technology _Labor/Labor Organizations Contractors/Construction State Employees Legal County/Local Government State Government Manufacturer Education Transportation **Public Interest** _Energy/Utilities 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. Type or Print Name of Legislative Agent Susan Brownknight Type or Print Name of Persons Signing for Employer 02/01/2024 **CEO**

CATEGORICAL LISTING OF PRINCIPAL BUSINESS OR ACTIVITY OF

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