

Clerk of Council

\$25.00 FILING FEE

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.**

A. LEGISLATIVE AGENT INFORMATION

- 1. Full Name KELL PRATHER
- 2. Occupation Occupational Therapist
- 3. Title/Position CEO
- 4. Business Address 791 E. McMullan Street
Street Suite Number
Cincinnati OH 45206
City State Zip(+4)
- 5. Telephone Number (513) 258-9586
- 6. Date of Engagement as Legislative Agent 01/01/2009

B. EMPLOYER INFORMATION

- 1. Full name of company or organization Enhance Q Healthcare
- 2. Type of Industry Healthcare / Community Wellness Solutions
- 3. Business Address 791 E. McMullan Street Suite 210
Street Suite Number
Cincinnati OH 45206
City State Zip(+4)

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

HEALTHCARE, Afford Housing, Quality of Life ISSUES
Community Development, Economic DEVELOPMENT, CRIMINAL Justice Reform

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

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

Kelli PRATTER
Type or Print Name of Legislative Agent

Kelli Pratter
Signature of Legislative Agent

03/11/2023
Date

Kelli PRATTER
Type or Print Name of Persons Signing for Employer

BY: Kelli Pratter
Signature for Employer

CEO
Title

03/11/2023
Date

15M-RZ8-M105

CLERK OF COUNCIL