200500534 \$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.

	A.	LEGISLATIVE A	AGENT INFORMAT	TON		
	1.	Full Name	Matt Davis			
	2.	Occupation	Government Affairs			
	3.	Title/Position	President			
	4.	Business Address	255 E 5th Street	1900		
	••	Cincinnati	Street OH	Suite Number 45202		
		City	State	Zip(+4)		
	5.	Telephone Number		977-8640		
	6.	Date of Engageme	nt as Legislative Agent	02/01/2023		
	В.	EMPLOYER IN	FORMATION			
	1.	Full name of company or organization <u>Cincinnati Blue Line Foundation</u>				
	2.	Type of Industry	Nonprofit			
	3.	Business Address_	1900 Central Park			
	.	Cincinnati	Street OH	Suite Number 45214		
		City	State	Zip(+4)		
	C.		PTION OF THE TY AGENT'S ENGAGE	PE OF LEGISLATION TO WHICH EMENT RELATES.		
		Economic development, zoning, mental health, first responders				
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Title

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

Agriculture	Environment	X_Real Estate/Housing				
Alcohol/Tobacco	Financial Institutions/Consumer Finance	Retail and Commercial				
Arts/Entertainment	Medical/Hospitals/Health Care	Service Business				
X_Communications/Media	Insurance	Social Svs./Human Svs.				
Contractors/Construction	Labor/Labor Organizations	Science and Technology				
X County/Local Government	Legal	State Employees				
Education	Manufacturer	State Government				
Energy/Utilities	Public Interest	Transportation				
ALL SIGNATURES MUST BE ORIGINAL	AND SIGNED PERSONALLY BY THE N	AMED INDIVIDUAL.				
Type or Print Name of Legislative Agent	*					
	26-33					
Signature of Legislative Agent Date						
M. Hube						
Type or Print Name of Persons Signing for Employer						
BA. Hube						
Signature for Employer Interim Executive Director	2/2/2023					
THEETIM EXECUTIVE DITECTOR	a 1:					

Date