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.

LEGISLATIVE AGENT INFORMATION
Full Name JOHN S. ESTERLY
Occupation LOCOMOTIVE ENGINEER
Title/Position CHAIRMAN, STATE LEGISLATUE BOALL
Business Address Po Box 7951 Street Suite Number
COWMBUS OH 43267 City State Zi0(44)
Telephone Number (614) 284 - 5876
Date of Engagement as Legislative Agent JANUAKY 28, 2023
EMPLOYER INFORMATION
Full name of company or organization BLOTHERHOOD OF COLOMOTIVE ENGINEERS + TRAIN
Type of Industry LABOR UNION
Business Address Po Box 7951
Street Suite Number
<u>Colombus</u> ON 43207
Business Address Street Suits Number 43207 City State Zip(+4)
BRIEF DESCRIPTION OF THE TYPE OF LEGISLATION TO WHICH LEGISLATIVE AGENT'S ENGAGEMENT RELATES.

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
	Energy/Utilities	Public Interest	Transportation
THAT TH	E CONTENTS ARE TRUE AN	IN THE PREPARATION AND COMPLETION DISCURATE TO THE BEST OF HIS OR HEIL AND SIGNED PERSONALLY BY THE NAME.	R KNOWLEDGE.
	HN. S. ESTER	, (
	Signature of Legislative Agent	1/28/27	<u>්</u>
	- Committee of Constitution of	Lean	
BY:	Name of Persons Signing for Employer	rcy	
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