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.

	LEGISLATIVE A	GENT INFORMATION	
	Full Name Charles	H. Gerhardt, III	
	Occupation Govern	ment Strategies Group	
	Title/Position_ Pres	sident & CEO	
	Business Address	700 Walnut Street	Ste 450 Suita Number
	Cincinnati	OH	45202
	City	State	Zlp(+4)
	Telephone Number	(513) 651-4	100
	Date of Engagemen	nt as Legislative Agent Feb	ruary 1, 2022
EMPLOYER INFORMATION			
Full name of company or organization Cincinnati Playhouse in the Park			
	Type of Industry	\rts	
		962 Mt. Adams Circle	
	Business Address—	Street	Suite Number
	.	ОН	45202
	Cincinnati		

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
X_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
	AND SIGNED PERSONALLY BY THE NAM	MED INDIVIDUAL.
Charles H. Gerhardt, III Type or Print Name of Legislative Agenti		
Signature of Legislative Agent	February 1, 2022	
Type or Print Name of Persons Signing for Employer BY: Sufface Waynil Signature for Employer		