Clerk of Council 801 Plum Street, Room 308 Cincinnati, Ohio 45202 (513) 352-3246

## Please check ALL that apply

Termination(s) of Engagement **Change of Address** \_ Amended Statement

## LEGISLATIVE AGENT UPDATED REGISTRATION STATEMENT

This statement must be filed with the Clerk of Council by the last day of January and July, annually. Please read instructions and review Sections 112-1 to 112-17, Cincinnati Municipal Code, prior to filing. There is no fee for this filing. 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 the 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. Other related prohibitions and penalties are contained in Section 112-99 of the Cincinnati Municipal Code

A.	GENERAL INFORMATION		
uli I	Name of Legislative Agent Robert Kellman	า	
u	(First)	(Middle)	(Lest)
	Occupation Government Relations		
	Business Address 1515 Third Street Street		
	Street	Suite Numbe	PT .
	San Francisco, CA, 94158-2211		
	City State	Zip(+4)	
	Telephone Number (202-794-7387)		
GE	NT CHANGE OF NAME OF ADDRESS. Box	nd on very initial Besi	istration Statement or les
GE	NT CHANGE OF NAME OR ADDRESS - Base		
	Updated Registration Statement, state any	changes in your name	e or address.
	(If none, check here)		
	<b>-</b>		
	Name of Legislative Agent Robert Kellma	an	
		an	
		an	
	Name of Legislative Agent Robert Kellmann Address 1515 Third Street	an	Suite Number
	Address 1515 Third Street	an	Suite Number
	Address 1515 Third Street	Zip(+4)	Suite Number
	Address 1515 Third Street Street San Francisco, CA, 94158-2211 City State		Suite Number
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epo	Address 1515 Third Street  Street  San Francisco, CA, 94158-2211  City State  Telephone Number (202-794-7387)	Zip(+4)	
epo	Address 1515 Third Street  Street  San Francisco, CA, 94158-2211  City State  Telephone Number (202-794-7387)  rting Period: Statement filed for period cover	Zip(+4)	
Repo	Address 1515 Third Street  Street  San Francisco, CA, 94158-2211  City State  Telephone Number (202-794-7387)	<sup>Zip(+4)</sup> ing ( <b>check one and</b> (Report	

# B. AMENDMENTS, TERMINATIONS, AND TYPES OF LEGISLATION

AMENDED STATEMENT pursuant to a dispute re	NT - Is this an Amended Statement (i.e., any changesolution decision of the OCCI.	ge in an amount or a filing			
YE\$	<u>✓_</u> NO				
If yes, you are r	required to complete only the portion(s) you have a	amended.			
TERMINATIONS - Are you still engaged by all of the employers listed on page 1 of this form?					
<u></u> ✓YES	NO				
If no, please list termination.	the name of the Employers by whom you are no le (Attach additional sheets if necessary.)	u are no longer engaged and the date of			
	e C	Date of Termination			
Employer Nam					
	ESOLUTIONS - List the specific ordinance(s) and reporting period.	resolution(s) on which you actively			
ORDINANCES AND RE	ESOLUTIONS - List the specific ordinance(s) and reporting period.	resolution(s) on which you actively			
ORDINANCES AND RE advocated during this re  N/A  ADDITIONAL TYPES ORegistration Statement (	ESOLUTIONS - List the specific ordinance(s) and reporting period.  DF LEGISLATION - Since your Initial Registration of all Employers listed on this form, give a brief denich any of your engagements relate.	Statement or last Updated			

## C. DEFINITIONS

"Staff" means any city employee whose official duties are to formulate policy and who exercises administrative or supervisory authority or who authorizes the expenditure of city funds. "Staff" is limited to employees who are required to file a Financial Disclosure Statement under Article XXVI of the Administrative Code.

"Legislation" means ordinances, resolutions, amendments, nominations, and any other matter pending before the Council. See the definition of "legislation" under Section 112-1-L, Cincinnati Municipal Code.

"Financial Transaction" See definition in Section 112-1-F, Cincinnati Municipal Code.

### **D. FINANCIAL TRANSACTIONS**

If the Legislative Agent, or a member of his or her immediate family had, during this reporting period, a financial transaction\* (which is not being disputed under Section 112-19, Cincinnati Municipal

the D such	irector of a department of	reated under the Administrativ	pointee of the Council, City Manager, e Code, or any member of the staff* of on is required with respect to each such		
a.	Name of the public officer, employee, or staff member:				
b.	Brief description of the purpose and nature of the transaction:				
C.	Date the transaction w	as made or entered into:			
d.	Other pertinent details:				
	(If none, check here NOTE: If the Legislativ Paragraph F, then the such information to the before this form is file If the foregoing provis	ve Agent is required to disclos Legislative Agent shall deliver e public officer(s) of employeed with the Clerk of Council.	e a financial transaction described in this a copy of such paragraph which contains (s) identified therein, at least ten (10) days late that such information was delivered:		
AND THIS HIS C	DUE DILIGENCE HAVE STATEMENT AND THAD R HER KNOWLEDGE. SIGNATURES MUST BE	BEEN UNDERTAKEN IN THI IT THE CONTENTS ARE TRU	ES THAT ALL REASONABLE EFFORTS E PREPARATION AND COMPLETION OF IE AND ACCURATE TO THE BEST OF RSONALLY BY THE NAMED		
	<b>/IDUAL.</b> ert Kellman	$\sim$	07/26/22		
Type or	Print Name of Legislative Agent	Signature of Legislative Agent	Date		