FINANCIAL DISCLOSURE STATEMENT



Name: Johnson	Reese		Park	er
Last Home Address:	First		٨	Aiddle
Stree Department/Job Title:	Sewers/Treatment Supe	state erintendent	County	Zip
List the names of children.	f members of your immediate fami	ily including your	spouse and any	dependent
2. List all name undo	er which you or members of your i	mmediate family	do business.	
List the names of employee. None	f any person or organizations, othe	er than the City, fo	or whom you do	work as an
\$5,000 during the of income which	from which your spouse or any de e previous calendar year, with the are reportable for Ohio and/or fed ome is derived from outside emplo	exception of you leral income tax p	r City employme ourposes should	ent. Sources be included
dollar amounts. It income, such as t the business or p	e required to list each source of in f you received income from a bust the name of the business and not profession. Attorneys, doctors and the source of income listed, give a business.	iness or profession individual accoun psychologists sho	on, name only thats, clients, or cu ould not list the	ne source of estomers for ir clients or
Source: Xavie	er University (staff, adjun	ct professor)	- E

	Source:
	Source:
5.	List the name of each corporation incorporated or authorized to do business in Cincinnati, Ohio and each business trust, partnership, or association transacting business in Cincinnati, Ohio in which you, your spouse, or any dependent family member had an interest of more than 5% during the preceding calendar year, or in which you, your spouse, or dependent family member holds an office or has a fiduciary relationship (regardless or monetary investment). This section does not require disclosure or information concerning deposits or withdrawable share accounts in banks, savings and loans, credit unions, or other similar financial institutions. None
6.	List all interest in real estate located in Cincinnati, Ohio to which you hold legal title or in which your spouse, or any dependent family member has any beneficial interest other than your personal primary residence. List by address or other description and include the nature of the interest held.

ATTESTATION

I acknowledge that I have a continuing duty to supplement the information provided herein as any material changes may occur, and that I am under an obligation to advise my superior(s) or areas where the potential for conflict of interest may arise in the performance of my responsibilities.

I further acknowledge that a false filing of this statement may be grounds for removal from my office or dismissal from my employment.

I swear or affirm that this statement and any attachments thereto, have been prepared or carefully reviewed by me and constitute a complete, truthful, and correct disclosure of all information required therein.

Signaturo

1/26/21

Date