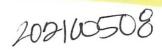
FINANCIAL DISCLOSURE STATEMENT



Name:	Fleming		Jason			A
	Last		First		٨	∕iiddle
Home A	Address:					
Departi	Street ment/Job Title:	Vater Works	city :/Treatment Si		County dent	Zip
	List the names of r children.	nembers of your i	immediate family in	cluding your s	pouse and any	dependent
					1124 12V	
2.	List all name under	which you or me	embers of your imm	ediate family	do business.	
	List the names of a employee. None	any person or org	anizations, other th	an the City, fo	or whom you do	o work as an
7	\$5,000 during the of income which a	previous calenda re reportable for	oouse or any depen r year, with the exc Ohio and/or federa n outside employm	eption of you I income tax p	r City employm urposes should	ent. Sources be included
i erunce	dollar amounts. If income, such as the the business or pro	you received income name of the bu ofession. Attorne source of income	ach source of incorome from a busines usiness and not indivise, doctors and psyce listed, give a brief	s or professio vidual accoun chologists sho	n, name only to ts, clients, or co ould not list the	he source of ustomers for eir clients or
	Source: Procto	or and Gamb	le;			

	0 0					
	Source:	Chipotle				
	Source:					
5.	 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. 					
6.						
	None					
ATTES	TATION					
materi	al changes	hat I have a continuing duty to supplement the information provided herein as any may occur, and that I am under an obligation to advise my superior(s) or areas where conflict of interest may arise in the performance of my responsibilities.				
	rther acknowledge that a false filing of this statement may be grounds for removal from my office or missal from my employment.					
	swear or affirm that this statement and any attachments thereto, have been prepared or carefully viewed by me and constitute a complete, truthful, and correct disclosure of all information required erein.					

Date

1/26/21