202100514

FINANCIAL DISCLOSURE STATEMENT

	Chundur Rajanand
lome	Address:
	tment/Job Title: Deputy Director - ETS
1.	List the names of members of your immediate family including your spouse and any dependent
	children.
2.	List all name under which you or members of your immediate family do business. N/A
3.	List the names of any person or organizations, other than the City, for whom you do work as an employee. N/A
4.	List each source from which your spouse or any dependent child received income of more than \$5,000 during the previous calendar year, with the exception of your City employment. Sources
	of income which are reportable for Ohio and/or federal income tax purposes should be included whether such income is derived from outside employment, business operations, or investment.
	of income which are reportable for Ohio and/or federal income tax purposes should be included

	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.
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. N/A

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.

Signature: 01/26/2021