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## Periodic Transaction Report

**OFFICE TELEPHONE:** (202) 225-1621

LEGISLATIVE RESOURCE CENTER

State: **Missouri** District: **02**

**File an original and 2 copies**

**File an original and 1 copy**

**(For Official Use Only)**

Did you purchase any shares that were allocated as a part of an Initial Public Offering? ☐ Yes ☒ No

	Yes	No
1. Do you have a current driver's license?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Do you have a current vehicle registration?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Do you have a current insurance policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Do you have a current safety inspection?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Do you have a current title?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Do you have a current license plate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Do you have a current vehicle identification number (VIN)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Do you have a current vehicle history report?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Do you have a current vehicle maintenance record?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Do you have a current vehicle safety record?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Please indicate whether this is an initial report or an amended report. For amendments, please provide the date of the report you are amending.

Initial Report

Date of Report Being Amended:

**A \$200 penalty shall be assessed against anyone who files more than 30 days late.**

[illegible]