

## Periodic Transaction Report

**OFFICE TELEPHONE:**

**Officer or Employee**  
**Employing Office:** \_\_\_\_\_

**File an original and 1 copy**

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

**(For Official Use Only)**

Date of Report Being Amended:

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

[illegible]

NAME: MAX L. MILLER Page 2 of 2

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