

## Periodic Transaction Report

OFFICE TELEPHONE:

**FLORIDA** **19**  
State: \_\_\_\_\_ District: \_\_\_\_\_

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

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 ☐ Amendment

Date of Report Being Amended: \_\_\_\_\_

OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES  
HCL  
(For Official Use Only)

[illegible]

NAME: LAURENCE FRANCIS ROONEY

[illegible]