

**HAND
DELIVERED**

Page 1 of 2
LEGISLATIVE RESOURCE UNIT

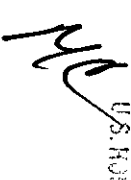
2016 MAR 23 PM 12:26

U.S. HOUSE OF REPRESENTATIVES

(For Official Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

Periodic Transaction Report

| | | | | |
|---|--|---|--|--|
| <div>2016 MAR 23 PM 12: 26</div> <div>U.S. HOUSE OF REPRESENTATIVES</div> <div></div> <div>(For Official Use Only)</div> | | <div>NAME: <u>Douglas L. Lamborn</u></div> <div>OFFICE TELEPHONE: <u>202-225-4422</u></div> | <div><input checked="" type="checkbox"/> Member of the U.S. House of Representatives State: <u>CO</u> District: <u>5</u> File an original and 2 copies</div> <div><input type="checkbox"/> Officer or Employee Employing Office: _____ File an original and 1 copy</div> | <div>Did you purchase any shares that were allocated as a part of an Initial Public Offering? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div>Please indicate whether this is an initial report or an amended report. For amendments, please provide the date of the report you are amending. <input checked="" type="checkbox"/> Initial Report <input type="checkbox"/> Amendment Date of Report Being Amended: _____</div> <div>A \$200 penalty shall be assessed against anyone who files more than 30 days late.</div> |
|---|--|---|--|--|

UNITED STATES HOUSE OF REPRESENTATIVES

Periodic Transaction Report

NAME: Douglas L. Lamborn Page 2 of 2

| FULL ASSET NAME | TYPE OF TRANS-ACTION | | | DATE OF TRANS-ACTION | DATE NOTIFIED OF TRANS-ACTION | AMOUNT OF TRANSACTION | | | | | | | | | | |
|---|-------------------------------------|-------------------------------------|--------------------------|----------------------|-------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|--------------------------|---|
| | Purchase | Sale | Exchange | | | A | B | C | D | E | F | G | H | I | J | K |
| SP DC JT Provide full name, not ticker symbol. | | | | (MM/DD/YY) | (MM/DD/YY) | \$1,001-\$15,000 | \$15,001-\$50,000 | \$50,001-\$100,000 | \$100,001-\$250,000 | \$250,001-\$500,000 | \$500,001-\$1,000,000 | \$1,000,001-\$5,000,000 | \$5,000,001-\$25,000,000 | \$25,000,001-\$50,000,000 | Over \$50,000,000 | Transaction in a Spouse or Dependent Child Asset over \$1,000,000 |
| Net App, Inc. stock | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3/22/16 | 3/22/16 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| SP Net App, Inc. stock | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3/18/16 | 3/18/16 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| SP Net App, Inc. stock | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3/21/16 | 3/21/16 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| SP Net App, Inc. stock | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3/22/16 | 3/22/16 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

NOTE NUMBER

FILER NOTES (optional)

| | |
|--|--|
| | |
| | |
| | |
| | |