## UNITED STATES HOUSE OF REPRESENTATIVES

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		5	JT CSP		FULL ASSET NAME		ublic ublic thics		$\left[ \times \right]$	NAME:	
	ENDOCYTE, INC.	Example: Mega Corp. Common Stock	Provide full name, not ticker symbol.			Did you purchase any shares that were allocated as a part of an Initial Public Offering?  Yes  X  No  If you answered "yes" to this question, please contact the Committee on Ethics for further guidance.	File an original and 2 copies	Member of the U.S. House of Representatives State: FLORIDA District: 19	E CURTIS J. CLAWSON		
	×		Purchase		TYPE OF TRANS- ACTION		of an Ir				Periodic Transaction Report
		×	Sale				itial lee on				
			Exchange				Plea For ame	$\vdash$		9	nsactio
	04/13/16	02/05/015	(MM/DD/YY)		DATE OF TRANS- ACTION		Please indicate w For amendments, amending.  X  Date of Report Be		Offic	FICE TELI	n Report
	04/13/16	03/07/15	(איאםמאאויי)		DATE NOTIFIED OF AMOUNT OF TRANSACTION TRANS- ACTION	Date of Report Being Amended:	hether this is an please provide Initial Reporteing Amended:	File an original and 1 copy	Officer or Employee	OFFICE TELEPHONE: (202) 225-2536	
	х		\$1,001- \$15,000	>			initial re				
		X	\$15,001- \$50,000	œ			Please indicate whether this is an initial report or an amended report. For amendments, please provide the date of the report you are amending.    X				
			\$50,001- \$100,000	ဂ						8	
			\$100,001- \$250,000	0			ed report are				
			\$250,001- \$500,000	m							_
			\$500,001- \$1,000,000	П			A \$200 anyone	(For C	U.S. PARSE OF RELIGIOUS OF THE RESERVATIVES	2016 MAY	ารเกา
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$1,000,001- \$5,000,000	ര			penalty who fi			MAY -4	MIVER
			\$5,000,001- \$25,000,00	I			' shall l	Official		t PM	ESOUR
			\$25,000,001- \$50,000,000	_			e assere than	For Official Use Only)		<del>င်း</del> ယ	LEGISLATIVE RESOURCE CENTER
			Over \$50,000,000	٦			A \$200 penalty shall be assessed against anyone who files more than 30 days late.	) N	SAAI		T
			Transaction in a Spouse or Dependent Child Asset over \$1,000,000	~			yainst ; late.				

## **UNITED STATES HOUSE OF REPRESENTATIVES**

Periodic Transaction Report

누모유 NOTE NUMBER Provide full name, not ticker symbol. **FULL ASSET NAME** Purchase TYPE OF TRANS-ACTION Sale Exchange TRANS-ACTION (MIM/DD/YY) DATE OF DATE
NOTIFIED
OF
TRANSACTION (MIN/DD/YY) FILER NOTES (optional) \$1,001-\$15,000 ⋗ \$15,001σ \$50,000 \$50,001-\$100,000 O \$100,001-AMOUNT OF TRANSACTION o \$250,000 \$250,001m \$500,000 \$500,001-\$1,000,000 П \$1,000,001-G \$5,000,000 \$5,000,001-ェ \$25,000,00 \$25,000,001-\$50,000,000 Over ے \$50,000,000 Transaction in a Spouse or Dependent Child Asset over \$1,000,000 ㅈ

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