

Periodic Transaction Report

OFFICE TELEPHONE: (202) 225-5755

State: FL District: 12

File an original and 2 copies

Employing Office: _____

File an original and 1 copy

(For Official Use Only)

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

☐ Yes ☒ No

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:		

Date of Report Being Amended:

Amendment

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

[illegible]