

## Periodic Transaction Report

**OFFICE TELEPHONE:-**

State: **VT** District: **00**

U.S. HOUSE OF REPRESENTATIVES  
OFFICE OF THE CLERK

2015 OCT -6 PM 5:04

(For Official Use Only)

Employing Office: \_\_\_\_\_

(For Official Use Only)

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 type="checkbox"/>	Initial Report	<input type="checkbox"/>	Amendment
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Date of Report Being Amended:

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

[illegible]