

## Periodic Transaction Report

**OFFICE TELEPHONE:** (202) 225-4601

State: KY District: 05

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

**File an original and 1 copy**

**Yes** ☒

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:

**HAND  
DELIVERED**  
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LITIGANT RESOURCE CENTER

01:43 PM DEC-5 18

ME  
(For Official Use Only)

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

[illegible]