

Periodic Transaction Report

2014 NOV 13 PM 2:50
HAND DELIVERED
 2014 NOV 13 PM 2:50
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NAME:

Rep. Diane L. Black

OFFICE TELEPHONE:

202-225-4231

Please indicate whether this is an initial report or an amended report. For amendments, please provide the date of filing with the U.S. HOUSE OF REPRESENTATIVES.



Initial Report



Amendment

Date of Report being Amended: _____



Member of the U.S. House of Representatives
 State: Tennessee District: 6th

File an original and 2 copies.



Officer or Employee

Employing Office: _____

File an original and 1 copy.

Did you purchase any shares that were allocated as a part of an Initial Public Offering? ☐ YES ☒ NO

FULL ASSET NAME	TYPE OF TRANS-ACTION	DATE OF TRANS-ACTION	DATE NOTIFIED OF TRANS-ACTION	AMOUNT OF TRANSACTION									
				A	B	C	D	E	F	G	H	I	J
JT	PURCHASE	(MOD/AYR)	(MOD/AYR)	\$1,000-\$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
					X								
Example: Mega Corp. Common Stock	SALE	8/14/12	8/14/12		X								
SP Celanese Corp	EXCHANGE	10/20/14	10/20/14			X							
SP Comcast Corp		10/20/14	10/20/14			X							
SP Google		10/20/14	10/20/14				X						
SP Praxair		10/20/14	10/20/14			X							
SP Schlumberger		10/20/14	10/20/14			X							

FULL ASSET NAME			TYPE OF TRANS-ACTION			DATE OF TRANS-ACTION	DATE NOTIFIED OF TRANS-ACTION	AMOUNT OF TRANSACTION										
JT	Provide full name, not ticker symbol.	PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	(MO/DAY/YR)	A	B	C	D	E	F	G	H	I	J		
							\$1,000-\$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		
SP	Bed Bath and Beyond	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10/20/14	10/20/14	<input type="checkbox"/>	<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"/>		
SP	Unilever	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10/20/14	10/20/14	<input type="checkbox"/>	<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"/>		
SP	Pepsico Inc	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10/27/14	10/27/14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<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"/>	<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"/>		

FOOTNOTE NUMBER	FILER NOTES (optional)