

Periodic Transaction Report

Rep. Diane L. Black

202-225-4231

Indicate whether this is an initial report or an amended report. For amendments, please provide the date of the report you are amending.

U.S. HOUSE OF REPRESENTATIVES	
Initial Report	Amendment
<input checked="checked" type="checkbox"/>	<input type="checkbox"/>

Date of Report being Amended: _____

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

☐ YES☒ NO[illegible]

FULL ASSET NAME	TYPE OF TRANS-ACTION			DATE OF TRANS-ACTION	DATE NOTIFIED OF TRANS-ACTION	AMOUNT OF TRANSACTION										
	PURCHASE	SALE	EXCHANGE			A	B	C	D	E	F	G	H	I	J	
JT Provide full name, not ticker symbol.				(MO/DAY/YR)	(MO/DAY/YR)	\$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 ORACLE CORP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2/25/16	2/25/16	<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"/>	
SP SOUTHWSTN ENERGY CO	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3/4/16	3/4/16	<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"/>	
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	<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)