UNITED STATES HOUSE OF REPRESENTATIVES

Periodic Transaction Report

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	FULL ASSET NAME	TYPE A	TYPE OF TRANS ACTION	ANS	TRANS- ACTION	TRANS- ACTION				AMO	AMOUNT OF TRANSACTION	RANSACT	NO			
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망양	Provide full name, not ticker symbol	PURCHASE	SALE	EXCHANGE	(MM/DD/YY)	(אא/סס/ייץ) (אא/סס/ייץ)	\$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
	Maryland State Health & Hgr Eductn! - bond	×			07/16/15	07/16/15										
1997 Fa	1997 Family Trust DTD 12/23/97															
SBL	SBLG Family Investments LLC															
	Ametek Inc stock		×		07/17/15	07/17/15	×									
	Markel Corp stock		×		07/21/15	07/21/15	×									
	O Reilly Automotive - stock		×		07/21/15	07/21/15	×									
	Pall Corp stock		×		07/24/15	07/24/15			×							
	Wabtec - stock	×			07/27/15	07/27/15		×								
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UNITED STATES HOUSE OF REPRESENTATIVES Periodic Transaction Report

Page 2 of 3

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	Brookfield Asset Mgmt F - D Vtg Shs Cl A - stock	Harley Davidson Inc stock	Paychex Inc stock	O Reilly Automotive - stock	Signet Jewelers Ltd stock	Pall Corp stock	Pall Corp stock	SBLG Family Investments LLC	1997 Family Trust DTD 12/23/97	Provide full name, not ticker symbol	FULL ASSET NAIME		coffering? YES X NO	Did you purchase any shares that were allocated as a part of an	anyone who files more than 30 days late	A \$200 penaity shall be assessed against	File an original and 2 copies.	Maryland District: 6th	X Member of the U.S. House of Representatives	JOHN K. DELANEY	
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vill be publi	07/30/15	07/30/15	07/29/15	07/29/15	07/28/15	07/28/15	07/27/15			(MM/DD/YY)	DATE OF TRANS- ACTION	Date of Report being Amended:		<u>\$</u>	de the date of the r	is is an initial report	File or		Officer or Employee		ONE:
(This page will be publicly disclosed.)	07/30/15	07/30/15	07/29/15	07/29/15	07/28/15	07/28/15	07/27/15			(ww/aa/ww) (vv/aa/ww)	DATE NOTIFIED OF TRANS- ACTION			Amendment	amendments, please provide the date of the report you are amending.	Please indicate whether this is an initial report or an amended report. For	File an original and 1 copy.		loyee		
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Page <u>3</u> of 3

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