

**UNITED STATES HOUSE OF REPRESENTATIVES**

Periodic Transaction Report

**NAME:** Ann Wagner

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**LEGISLATIVE RESOURCE CENTER**

2022 APR -8 AM 11:02

OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES

(For Official Use Only)

Member of the U.S. House of Representatives  
State: Missouri District: 02  
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

If you answered "yes" to this question, please contact the Committee on Ethics for further guidance.

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: \_\_\_\_\_

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

FULL ASSET NAME	TYPE OF TRANS-ACTION			DATE OF TRANS-ACTION (MM/DD/YY)	DATE NOTIFIED OF TRANS-ACTION (MM/DD/YY)	AMOUNT OF TRANSACTION													
	Purchase	Sale	Exchange			A \$1,001-\$15,000	B \$15,001-\$50,000	C \$50,001-\$100,000	D \$100,001-\$250,000	E \$250,001-\$500,000	F \$500,001-\$1,000,000	G \$1,000,001-\$5,000,000	H \$5,000,001-\$25,000,000	I \$25,000,001-\$50,000,000	J Over \$50,000,000	K Transaction in a Spouse or Dependent Child Asset over \$1,000,000			
SP DC JT  Provide full name, not ticker symbol.				(MM/DD/YY)	(MM/DD/YY)														
JT Example: Mega Corp. Common Stock		X		02/05/15	03/07/15		X												
JT Mantecopa Cmty AZ Sch Dist No 83	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	03/04/22															
	<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"/>																

**HAND DELIVERED**

# UNITED STATES HOUSE OF REPRESENTATIVES

## Periodic Transaction Report

**NAME:** \_\_\_\_\_

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	K
				(MM/DD/YY)	(MM/DD/YY)	\$1,001-\$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-\$25,000,00	\$25,000,001-\$50,000,000	Over \$50,000,000	Transaction in a Spouse or Dependent Child Asset over \$1,000,000
SP DC JT	Provide full name, not ticker symbol.					<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"/>
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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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**NOTE NUMBER** \_\_\_\_\_

**FILER NOTES (optional)** \_\_\_\_\_