

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2024 APR 12 PM 4: 15

US HOUSE OF REPRESENTATIVES

Periodic Transaction Report

NAME: Douglas L. Lamborn

OFFICE TELEPHONE: 202/225-4422

Member of the U.S. House of Representatives  
State: CO District: 5

Officer or Employee  
 Employing Office:

File an original and 2 copies

File an original and 1 copy

Did you purchase any shares that were allocated as a part of an Initial Public Offering?

Yes  No

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:

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

A \$300 penalty shall be assessed against anyone who files more than 90 days late.

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(For Official Use Only)

FULL ASSET NAME	TYPE OF TRANSACTION				DATE OF TRANS-ACTION (MM/DD/YY)	DATE NOTIFIED OF TRANS-ACTION (MM/DD/YY)	AMOUNT OF TRANSACTION															
	Purchase	Sale	Partial Sale	Exchange			A	B	C	D	E	F	G	H	I	J	K					
SP DC JT Provide full name, not ticker symbol.																						
JT Example: Mega Corp. Common Stock		X			02/05/20	03/07/20		X														
SP Net App, Inc. stock	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3/1/24	3/1/24		<input checked="" type="checkbox"/>														
SP Net App, Inc. stock	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3/20/24	3/20/24		<input checked="" type="checkbox"/>														
SP Net App, Inc. stock	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3/1/24	3/1/24		<input checked="" type="checkbox"/>														
SP Net App, Inc. stock	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3/20/24	3/20/24		<input checked="" type="checkbox"/>														

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