

FINANCIAL DISCLOSURE REPORT

FOR CALENDAR YEAR 2003

Report Required by the Ethics
in Government Act of 1978,
(5 U.S.C. App. §§101-111)

1. Person Reporting (Last name, first, middle initial) Mosman, Michael W.		2. Court or Organization U.S. District Court, District of Oregon		3. Date of Report April 16, 2004	
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) US District Judge - Active		5. Report Type (check appropriate type) ____ Nomination, Date 10/3/03 ____ Initial <u>x</u> Annual ____ Final		6. Reporting Period January 1, 2003 - December 31, 2003	
7. Chambers or Office Address U.S. Courthouse, Rm. 1427 1000 SW Third Avenue Portland, OR 97204		8. On the basis of the information contained in this Report and any modifications pertaining thereto, it is, in my opinion, in compliance with applicable laws and regulations. Reviewing Officer _____ Date _____			

IMPORTANT NOTES: The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information. Sign on last page.

I. POSITIONS. (Reporting individual only; see pp. 9-13 of Instructions.)

POSITION	NAME OF ORGANIZATION/ENTITY
☐ NONE (No reportable positions.)	
1 United States Attorney 1/1/03 - 10/3/03 District of Oregon	Department of Justice
2 United States District Judge 10/3/03 - 12/31/03	United States Courts
3	

II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of Instructions.)

DATE	PARTIES AND TERMS
☒ NONE (No reportable agreements.)	
1	
2	

III. NON-INVESTMENT INCOME. (Reporting individual and spouse; see pp. 17-24 of Instructions.)

DATE	SOURCE AND TYPE	GROSS INCOME
A. Filer's Non-Investment Income		
☒ NONE (No reportable non-investment income.)		
1		\$
2		\$
3		\$
B. Spouse's Non-Investment Income - If you were married during any portion of the reporting year, please complete this section. (dollar amount not required except for honoraria)		
☐ NONE (No reportable non-investment income.)		
1 2003	Dr. Lloyd Hale, P.C.	
2		

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IV. REIMBURSEMENTS -- transportation, lodging, food, entertainment.*(Includes those to spouse and dependent children. See pp. 25-27 of Instructions.)*SOURCEDESCRIPTION☒ x

NONE (No such reportable reimbursements.)

1

2

3

4

5

6

7

V. GIFTS. *(Includes those to spouse and dependent children. See pp. 28-31 of Instructions.)*SOURCEDESCRIPTIONVALUE☒ X

NONE (No such reportable gifts.)

1

\$

2

\$

3

\$

4

\$

VI. LIABILITIES. *(Includes those of spouse and dependent children. See pp. 32-33 of Instructions.)*CREDITORDESCRIPTIONVALUE CODE*☒ X

NONE (No reportable liabilities.)

1

2

3

4

5

*Value Codes: J=\$15,000 or less K=\$15,001-\$50,000 L=\$50,001-\$100,000 M=\$100,001-\$250,000
N=\$250,001-\$500,000 O=\$500,001-\$1,000,000 P1=\$1,000,001-\$5,000,000
P2=\$5,000,001-\$25,000,000 P3=\$25,000,001-\$50,000,000 P4=\$50,000,001 or more

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VII. Page 1 INVESTMENTS and TRUSTS – income, value, transactions (Includes those of spouse and dependent children. See pp. 34-57 of Instructions.)

A Description of Assets (including trust assets) <i>Place "00" after each asset example from prior disclosure</i>	B Income during reporting period		C Gross value at end of reporting period		D Transactions during reporting period				
	(1)	(2)	(1)	(2)	(1)	(2)	(3)	(4)	(5)
	Income Code (A-F)	Net Capital Gain (G-H)	Value Code (I-K)	Value Method Code (L-W)	Buy/Sell Exchange Redemption	Other Month Day	Value Code (I-K)	Gain Code (A-F)	Identify Spouse/Dependent Child (if applicable)
☐ NONE (No reportable income,									
1 U.S. Bank Accounts, St. Paul, MN CDs	A	Interest	K	T					
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									

1	Income/Gain Codes: (See Col. B1, D4)	A=\$1,000 or less F=\$50,001-\$100,000	B=\$1,001-\$2,500 G=\$100,001-\$1,000,000	C=\$2,501-\$5,000 H1=\$1,000,001-\$5,000,000	D=\$5,001-\$15,000 H2=More than \$5,000,000	E=\$15,001-\$50,000
2	Value Codes: (See Col. C1, D3)	J=\$15,000 or less N=\$250,001-\$500,000 P3=\$25,000,001-\$50,000,000	K=\$15,001-\$50,000 O=\$500,001-\$1,000,000	L=\$50,001-\$100,000 P1=\$1,000,001-\$5,000,000 P4=More than \$50,000,000	M=\$100,001-\$250,000 P2=\$5,000,001-\$25,000,000	
3	Value Method Codes: (See Col. C2)	Q=Appraisal U=Book value	R=Cost (real estate only) V=Other	S=Assessment W=Estimated	T=Cash/Market	

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS (Indicate part of Report.)**IX. CERTIFICATION.**

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app., § 501 et. seq., 5 U.S.C. § 7353 and Judicial Conference regulations.

Signature

Date

16 April 04

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. App., § 104.)

FILING INSTRUCTIONS

Mail signed original and 3 additional copies to:

Committee on Financial Disclosure
Administrative Office of the
United States Courts
Suite 2-301
One Columbus Circle, N.E.
Washington, D.C. 20544