

FINANCIAL DISCLOSURE REPORT

FOR CALENDAR YEAR 2006

COPY
Report Required by the Ethics
in Government Act of 1976,
15 U.S.C. app. §§101-110

1. Person Reporting (Last name, first, middle initial) Skopil, Otto R.		2. Court or Organization U.S. Court of Appeals		3. Date of Report 04/24/2007	
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) Senior U.S. Circuit Judge		5a. Report Type (check appropriate type) ___ Nomination, Date _____ ___ Initial ☒ Annual ___ Final		6. Reporting Period 01/01/2006 to 12/31/2006	
		5b. ___ Amended Report			
7. Chambers or Office Address 1000 SW Third Avenue, Ste. 807 Portland, Oregon 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	
2	
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	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
2

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

	<u>SOURCE</u>	<u>DESCRIPTION</u>
☒	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.)

	<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
☒	NONE (No such reportable gifts.)		
1			\$
2			\$
3			\$
4			\$

VI. LIABILITIES. (Includes those of spouse and dependent children. See pp. 32-33 of Instructions.)

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE*</u>
☒	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. 34-60 of Instructions.)

A Description of Assets (including trust assets) <i>Place "(X)" after each asset exempt 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)	If not exempt from disclosure			
	Asset Code (A-H)	Type (C-g) (div, int, etc.)	Value Code (Q-P)	Value Method Code (Q-W)	Type (C-g) buy, sell, mergers, redemption	(2) Date Month- Day	(3) Value Code (J-P)	(4) Gain Code (A-H)	(5) Identity of buyer/seller (if private transaction)
☐ NONE (No reportable income, assets, or transactions.)									
1 Bank of America account	A	Int	J	T					
2 Pioneer Trust Co. -account-	B	Int	J	T					
3 Trust						2-14	J		See note in Part VIII
4 U.S. Treasury Bills					Buy	2-13	N		
5 U.S. Treasury Bills	D	Int			Redeem	5-18	N		
6 U.S. Treasury Bills	C	Int			Buy	8-17	N		
7 U.S. Treasury Notes	C	Int			Buy	2-15	M		
8 U.S. Treasury Notes	C	Int			Buy	5-17	M		
9 U.S. Treasury Notes					Buy	8-16	M		
10 U.S. Treasury Notes	D	Int	M	T			M		
11 U.S. Treasury Bills	D	Int			Redeem	2-16	O		
12 State Farm Insurance Whole Life	A	Int	J	T					
13 Northwestern Mutual Whole Life	A	Div	J	T					
14 MONY - Whole Life	A	Div	J	T					
15 MONY - Whole Life	A	Div	J	T					
16 Metropolitan Whole Life	A	Div	J	T					
17									

1	Income/Gain Codes: A=\$1,000 or less (See Col. B), D4) 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: J=\$15,000 or less (See Col. C1, D3) 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 \$5,000,000	M=\$100,001-\$250,000 P2=\$5,000,001-\$25,000,000	
3	Value Method Codes: Q=Appraisal (See Col. C2) 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.)

Part VII. Investments and Trusts

Line 3: All remaining assets in testamentary trust distributed - trust closed.

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 04/24/2007

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