

**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)<br><b>JERRY L. BUCHMEYER</b>                                                                                             | 2. Court or Organization<br><b>Northern District of Texas/Dallas Div.</b>                                                                 | 3. Date of Report<br><b>4 March 04</b>              |
| 4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)<br><b>Dist. Judge - Senior Status</b>                             | 5. Report Type (check appropriate type)<br>Nomination, Date _____<br>Initial <input checked="" type="checkbox"/> Annual _____ Final _____ | 6. Reporting Period<br><b>1/1/2003 - 12/31/2003</b> |
| 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 |
|----------------------------------------------------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> <b>NONE</b> (No reportable positions.) |                             |
| 1                                                                          |                             |
| 2                                                                          |                             |
| 3                                                                          |                             |

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

| DATE                                                                        | PARTIES AND TERMS |
|-----------------------------------------------------------------------------|-------------------|
| <input checked="" type="checkbox"/> <b>NONE</b> (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 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------|
| <b>A. Filer's Non-Investment Income</b>                                                                                                                                                  |                 |              |
| <input checked="" type="checkbox"/> <b>NONE</b> (No reportable non-investment income.)                                                                                                   |                 |              |
| 1                                                                                                                                                                                        |                 | \$           |
| 2                                                                                                                                                                                        |                 | \$           |
| 3                                                                                                                                                                                        |                 | \$           |
| <b>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)</b> |                 |              |
| <input checked="" type="checkbox"/> <b>NONE</b> (No reportable non-investment income.)                                                                                                   |                 |              |
| 1                                                                                                                                                                                        |                 |              |
| 2                                                                                                                                                                                        |                 |              |

# FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

JERRY L. BUCHANAN JR

Date of Report

4 March 04

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

|                                     | SOURCE                                    | DESCRIPTION |
|-------------------------------------|-------------------------------------------|-------------|
| <input checked="" type="checkbox"/> | 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.)

|                                     | SOURCE                           | DESCRIPTION | VALUE |
|-------------------------------------|----------------------------------|-------------|-------|
| <input checked="" type="checkbox"/> | NONE (No such reportable gifts.) |             |       |
| 1                                   |                                  |             | \$    |
| 2                                   |                                  |             | \$    |
| 3                                   |                                  |             | \$    |
| 4                                   |                                  |             | \$    |

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

|                          | CREDITOR                          | DESCRIPTION         | VALUE CODE* |
|--------------------------|-----------------------------------|---------------------|-------------|
| <input type="checkbox"/> | NONE (No reportable liabilities.) |                     |             |
| 1                        | COLONIAL SAVINGS                  | MORTGAGE [REDACTED] | L           |
| 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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Name of Person Reporting

JERRY L. BOCHINSKY JR

Date of Report

4 March 04

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

| A<br>Description of Assets<br>(including trust assets)<br><br><i>Place "XX" after each asset<br/>exempt from prior disclosure</i> | B<br>Income<br>during<br>reporting period |                                           | C<br>Gross value<br>at end of<br>reporting period |                                   | D<br>Transactions during reporting period              |                               |                                |                               |                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-------------------------------------------|---------------------------------------------------|-----------------------------------|--------------------------------------------------------|-------------------------------|--------------------------------|-------------------------------|----------------------------------------------------------------|
|                                                                                                                                   | (1)                                       | (2)                                       | (1)                                               | (2)                               | (1)                                                    | If not exempt from disclosure |                                |                               |                                                                |
|                                                                                                                                   | Amt.<br>Code1<br>(A-H)                    | Type<br>(e.g.<br>div.<br>rent or<br>int.) | Value<br>Code2<br>(J-P)                           | Value<br>Method<br>Code3<br>(Q-W) | Type<br>(e.g.,<br>buy, sell,<br>merger,<br>redemption) | (2)<br>Date<br>Month-<br>Day  | (3)<br>Value<br>Code2<br>(J-P) | (4)<br>Gain<br>Code1<br>(A-H) | (5)<br>Identity of<br>buyer/seller<br>(if private transaction) |
| <input checked="" type="checkbox"/> NONE (No reportable income, )                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 1                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 2                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 3                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 4                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 5                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 6                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 7                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 8                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 9                                                                                                                                 |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 10                                                                                                                                |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 11                                                                                                                                |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 12                                                                                                                                |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 13                                                                                                                                |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 14                                                                                                                                |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 15                                                                                                                                |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 16                                                                                                                                |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |
| 17                                                                                                                                |                                           |                                           |                                                   |                                   |                                                        |                               |                                |                               |                                                                |

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

FINANCIAL

REPORT

Name of Person Reporting

JERRY L. PUCHNEYER

Date of Report

4 March 04

## 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

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

4 March 04

NOTE: ANY PERSON 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