

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF VIRGINIA
POST OFFICE BOX 657
LYNCHBURG, VIRGINIA 24505

Norman K. Moon
District Judge

Telephone: 434-845-4891
Fax: 434-846-4527

May 10, 2004

The Honorable Mary M. Lisi, Chariman
Committee on Financial Disclosure
Suite 2-301
One Columbus Circle, N.E.
Washington, D.C. 20544

Re: Amended 2003 Financial Disclosure Report

Dear Judge Lisi:

Attached is my Amended 2003 Financial Disclosure Report. I inadvertently omitted my Virginia Supplemental Retirement Income from Section III - Non-Investment Income.

Sincerely,


Norman K. Moon

NKM:kn

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AMENDED

AO-10
Rev. 1/2004

FINANCIAL DISCLOSURE REPORT

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 name, Middle initial) MOON, NORMAN K	2. Court or Organization WESTERN DISTRICT OF VIRGINIA	3. Date of Report 5/10/2003
4. Title (Article III Judges indicate active or senior status; magistrate judges indicate full- or part-time) U.S. DISTRICT JUDGE (Active)	5. ReportType (check appropriate type) ☐ Nomination Date ☐ Initial ☒ Annual ☐ Final	6. Reporting Period 1/1/2003 to 12/31/2003
7. Chambers or Office Address P.O. BOX 657 LYNCHBURG, VIRGINIA 24505	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 filing instructions)

☒ **NONE** - (No reportable positions.)

<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1. _____	_____
2. _____	_____

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

☐ **NONE** - (No reportable agreements.)

<u>DATE</u>	<u>PARTIES AND TERMS</u>
1. _____	Virginia Supplemental Retirement System (no control)

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FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

MOON, NORMAN K

Date of Report

5/10/2003

III. NON-INVESTMENT INCOME. (Reporting individual and spouse; see pp. 17-24 of filing instructions)**A. Filer's Non-Investment Income**☒ **NONE** - (No reportable non-investment income.)

	<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>GROSS INCOME</u> (yours, not spouse's)
1.	2004	*Virginia Supplemental Retirement Income	\$96,377.00

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.)

	<u>DATE</u>	<u>SOURCE AND TYPE</u>
1.		

IV. REIMBURSEMENTS - transportation, lodging, food, entertainment.

(Includes those to spouse and dependent children. See pp. 25-27 of instructions.)

☐ **NONE** - (No such reportable reimbursements.)

	<u>SOURCE</u>	<u>DESCRIPTION</u>
1.	Trial Advocacy Institute	January 9-11, 2003 Boars Head Inn, Charlottesville, VA., Lodging and Meals

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

MOON, NORMAN K

Date of Report

5/10/2003

V. GIFTS. (Includes those to spouse and dependent children. See pp. 28-31 of instructions.)☒ **NONE** - (No such reportable gifts.)SOURCEDESCRIPTIONVALUE1.

VI. LIABILITIES. (Includes those of spouse and dependent children. See pp. 32-34 of instructions.)☒ **NONE** - (No reportable liabilities.)CREDITORDESCRIPTIONVALUE CODE1.

FINANCIAL DISCLOSURE REPORT

Page 1 of 2

Name of Person Reporting
MOON, NORMAN K

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VII. INVESTMENTS and TRUSTS — income, value, transactions (includes those of the spouse and dependent children. See pp. 34-57 of filing instructions.)

A. Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B. Income during reporting period		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e.g. div. rent. or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e.g. buy, sell, merger, redemption)	If not exempt from disclosure			
						(2) Date: Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
☐ NONE (No reportable income, assets, or transactions)									
1. USAA 401(K) Account - Cornerstone Strategy Fund	D	Dividend	M	T					
2. USAA Account - Cornerstone Strategy Fund	A	Dividend	J	T					
3. Lynchburg, VA. Property, Lot		None	K	S					
4. Suntrust Bank, Accounts Lynchburg, VA.	C	Interest	M	T					
5. Wachovia Bank (Accounts) Lynchburg, Va.	C	Interest	L	T					
6. BB&T (Accounts) Lynchburg, VA.	C	Interest	M	T			--		
7. Bank of America	C	Interest	L	T					
8. BB&T Common Stock	B	Dividend	L	T					
9. Exxon Mobil Corporation	A	Dividend	K	T					
10. Bristol Myers Squibb Common Stock	A	Dividend	K	T					
11. Campbell County, VA. property		None	K	S					
12. Amherst County, Va. Parcel #1		None	J	S					
13. Amherst County, VA. Parcel #2		None	J	S					
14. Abbott Laboratories	A	Dividend	J	T					
15. Cisco Systems		None	K	T					
16. Coca Cola	A	Dividend	J	T					
17. *** Virginia Supplemental Retirement Income (see comment section									
18. AT&T	A	Dividend	J	T					

1. Income/Gain Codes:	A = \$1,000 or less	B = \$1,001-\$2,500	C = \$2,501-\$5,000	D = \$5,001-\$15,000	E = \$15,001-\$50,000
(See Columns B1 and D4)	F = \$50,001-\$100,000	G = \$100,001-\$1,000,000	H1 = \$1,000,001-\$5,000,000	H2 = More than \$5,000,000	
2. Value Codes:	J = \$15,000 or less	K = \$15,001-\$50,000	L = \$50,001-\$100,000	M = \$100,001-\$250,000	
(See Columns C1 and D3)	N = \$250,000-\$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 = \$More than \$50,000,000		
3. Value Method Codes	Q = Appraisal	R = Cost (Real Estate Only)	S = Assessment	T = Cash/Market	
(See Column C2)	U = Book Value	V = Other	W = Estimated		

FINANCIAL DISCLOSURE REPORT

Page 2 of 2

Name of Person Reporting

MOON, NORMAN K

Date of Report

5/10/2003

VII. INVESTMENTS and TRUSTS — income, value, transactions (includes those of the spouse and dependent children. See pp. 34-57 of filing instructions.)

A. Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	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			
	Amount Code 1 (A-H)	Type (e.g. div. rent. or int.)	Value Code 2 (J-P)	Value Method Code 3 (Q-W)	Type (e.g. buy, sell, merger, redemption)	(2) Date: Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
19. Disney		None	J	T					
20. Three Com (COMS)		None	J	T					
21. State Farm Life Insurance	A	Dividend	J	T					
22. Minnesota Mutual Life Insurance	A	Dividend	J	T					
23. First Colony Life - GE Assurance	A	Dividend	J	T					
24. Equitable Life Insurance	A	Interest	J	T					
25. Metropolitan Life Insurance	A	Dividend	J	T					
26. Life of Virginia	A	Dividend	J	T					

1. Income/Gain Codes:	A = \$1,000 or less	B = \$1,001-\$2,500	C = \$2,501-\$5,000	D = \$5,001-\$15,000	E = \$15,001-\$50,000
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FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

MOON, NORMAN K

Date of Report

5/10/2003

VII. ADDITIONAL INFORMATION OR EXPLANATIONS

(Indicate part of Report.)

*Section III- Non-Investment Income - Report amended to add Virginia Supplemental Retirement Income.

**Line 17 - Virginia Supplemental Retirement previously reported in Section VII has been deleted and is now reported in Section II - Agreement as this is not an investment retirement account.

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

MOON, NORMAN K

Date of Report

5/10/2003

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. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature

Date

5/10/04

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

FINANCIAL DISCLOSURE REPORT

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 name, Middle initial) MOON, NORMAN K	2. Court or Organization WESTERN DISTRICT OF VIRGINIA	3. Date of Report 5/6/2003
4. Title (Article III Judges indicate active or senior status; magistrate judges indicate full- or part-time) U.S. DISTRICT JUDGE (Active)	5. Report Type (check appropriate type) ☐ Nomination, ☐ Date ☐ Initial ☒ Annual ☐ Final	6. Reporting Period 1/1/2003 to 12/31/2003
7. Chambers or Office Address P.O. BOX 657 LYNCHBURG, VIRGINIA 24505	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 filing instructions)

☒ NONE - (No reportable positions.)

POSITION

NAME OF ORGANIZATION/ENTITY

1.	
2.	

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

☐ NONE - (No reportable agreements.)

DATE

PARTIES AND TERMS

1.	Virginia Supplemental Retirement System (no control)
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FINANCIAL DISCLOSURE REPORT

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III. NON-INVESTMENT INCOME. (Reporting individual and spouse; see pp. 17-24 of filing instructions)**A. Filer's Non-Investment Income**☒ **NONE** - (No reportable non-investment income.)DATESOURCE AND TYPEGROSS INCOME

(yours, not spouse's)

1.

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.)DATESOURCE AND TYPE1.

IV. REIMBURSEMENTS - transportation, lodging, food, entertainment.

(Includes those to spouse and dependent children. See pp. 25-27 of instructions.)

☐ **NONE** - (No such reportable reimbursements.)SOURCEDESCRIPTION

1. Trial Advocacy Institute

January 9-11, 2003 Boars Head Inn, Charlottesville, VA., Lodging and Meals

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MOON, NORMAN K

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V. GIFTS. (Includes those to spouse and dependent children. See pp. 28-31 of instructions.)

☒ **NONE** - (No such reportable gifts.)

SOURCE

DESCRIPTION

VALUE

1.

VI. LIABILITIES. (Includes those of spouse and dependent children. See pp. 32-34 of instructions.)

☒ **NONE** - (No reportable liabilities.)

CREDITOR

DESCRIPTION

VALUE CODE

1.

FINANCIAL DISCLOSURE REPORT

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FINANCIAL DISCLOSURE REPORT

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS

(Indicate part of Report.)

*Line 17 - Virginia Supplemental Retirement previously reported in Section VII has been deleted and is now reported in Section II - Agreements as this is not an investment retirement account.

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IX. CERTIFICATION.

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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. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature



Date

5/06/04

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:

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