

AO-10
Rev. 1-89**FINANCIAL DISCLOSURE REPORT**Annual Report Due by May 15 from Judicial Officers and
certain Judicial Employees (28 USCA App. I, § 301-09)

Person Reporting (Last name, first, middle initial) Cleland, Robert H.	Court or Organization District Court, Eastern District of Michigan	Date of Report Feb. 23, 1990
Title Nominee for District Judge	Date of Entry/Nomination/Termination (only if initial or final report) Feb. 20, 1990	Reporting Period (Calendar year, or inclusive dates) Jan. 1, 1989- Feb. 23, 1990
Home or office address Office: 201 McMorran Blvd. Port Huron, Michigan 48060		

IMPORTANT NOTES: Please read the instructions accompanying this form. The report should include information pertaining to your spouse and dependent children, if any. Attach additional sheets if needed, identifying each attachment by showing your name, the date of the report, and the section(s) being completed. Complete all sections, checking the NONE box for each section where you have no reportable information. Compare and reconcile this report with last year's and list items in the same order as last year. Type or print clearly. Sign on last page.

I. POSITIONS. (Reporting individual only; see pp. 15-17 of Instructions.)POSITIONNAME OF ORGANIZATION/ENTITY☐

NONE (No reportable positions)

Trustee (Board member) Port Huron Hospital Corp.

Board Member United Way of St. Clair County

Co-Trustee (Fiduciary) Inter-vivos Trust (beneficiaries: daughters)

II. AGREEMENTS. (Reporting individual only; see p. 17 of Instructions.)

A copy of the trust document is appended

DATEPARTIES AND TERMS☐

NONE (No reportable agreements)

- 1) Deferred Compensation (I.R.C. 457) Agreement: plan administrator: Nationwide Insurance for the Public Employees Benefit Services Corporation.
- 2) Retirement Plan; County of St. Clair; age 59 eligibility

III. NON-INVESTMENT INCOME. (Partial disclosure for spouse; see pp. 18-20 of Instructions.)DATE
(Honorary only)SOURCE AND TYPEGROSS INCOME
(yours, not spouse's)☐

NONE (No reportable non-investment income)

1 County of St. Clair 1989 wages \$67,385

2 County of St. Clair 1990 wages Jan. 1 - Feb. 23 \$10,212

3 _____ \$ _____

4 _____ \$ _____

5 _____ \$ _____

FINANCIAL DISCLOSURE REPORT (cont'd)

Name of Person Reporting

Cleland, Robert H.

Date of Report

Feb. 23, 1990

IV. REIMBURSEMENTS and GIFTS--transportation, lodging, food, entertainment.
(Includes those to spouse and dependent children; see pp. 20-22 of Instructions.)SOURCEDESCRIPTION☒

NONE (No such reportable reimbursements or gifts)

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V. OTHER GIFTS. (Includes those to spouse and dependent children; see pp. 20-22 of Instructions.)SOURCEDESCRIPTIONVALUE☒

NONE (No such reportable gifts)

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FINANCIAL DISCLOSURE REPORT (cont'd)

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VIII. ADDITIONAL INFORMATION or EXPLANATIONS. (Indicate section of Report.)

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Check to affirm that differences in investments from those reported in prior year are exempt from disclosure.

Re: VIII 1.: Assessed valuation is \$153,450

Re: VIII 2.: Assessed valuation is \$79,000

Re: VIII 3.: Assessed valuation is \$91,672

In each case, the applicable law requires the property to be assessed based upon the "true cash value" of the property, and I believe the range of values stated to be within reasonable market limits.

IX. CERTIFICATION.

In compliance with the provisions of 28 U.S.C. § 455 and of Advisory Opinion No. 57 of the Advisory Committee on Judicial Activities, and to the best of my knowledge at the time after reasonable inquiry, I did not perform any adjudicatory function in any litigation during the period covered by this report in which I, my spouse, or my minor or dependent children had a financial interest, as defined in Canon 3C(3)(c), in the outcome of such litigation.

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.

Signature



Date

23 Feb 1990

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (28 U.S.C. APP. I, § 304, AND 18 U.S.C. § 1001.)

FILING INSTRUCTIONS:

1. Mail signed original and 3 additional copies to:

Judicial Ethics Committee
Administrative Office of the
United States Courts
Washington, DC 20544

2. Deliver one copy to the Clerk of the Court on which you sit or serve. (Judicial employees not associated with a specific court, such as employees of the Administrative Office and the Federal Judicial Center, need not file a copy with any court.)