

1. Person Reporting <i>(Last name, first, middle initial)</i> Davis, Legrome D.	2. Court or Organization U. S. District - Eastern PA	3. Date of Report 01/28/2002
4. Title <i>(Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)</i> U. S. District Judge Nominee	5. Report Type (check type) ☒ Nomination, Date 01/23/2002 Initial Annual Final	6. Reporting Period 01/01/2001 to 01/01/2002
7. Chambers or Office Address 692 City Hall Philadelphia, Pennsylvania 19107		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 section where you have no reportable information. Sign on the last page.

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

POSITION	NAME OF ORGANIZATION / ENTITY
☐ NONE (No reportable positions.)	
1 Director	Giving of Self Partnership; Philadelphia, Pennsylvania
2	
3	

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

DATE	PARTIES AND TERMS
☐ NONE (No reportable agreements.)	
1	
2	
3	

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

DATE	SOURCE AND TYPE	GROSS INCOME <i>(yours, not spouse's)</i>
☐ NONE (No reportable non-investment income.)		
1 2001	Court of Common Pleas - Judicial Salary	116,000.
2 2001	Justice Management Institute - Compensation	1,200.
3 2001	American University - Compensation	2,400.
4 2001	Germantown YWCA - Spouse's Salary	

IV. REIMBURSEMENTS -- transportation, lodging, food, entertainment.
(Includes those to spouse and dependent children. See pp. 25-28 of Instructions.)

	SOURCE	DESCRIPTION
	NONE (No such reportable reimbursements.)	
1	Exempt	
2		
3		
4		
5		
6		
7		

V. GIFTS
(Includes those to spouse and dependent children. See pp. 29-32 of Instructions.)

	SOURCE	DESCRIPTION	VALUE
	NONE (No such reportable gifts.)		
1	Exempt		
2			
3			

VI. LIABILITIES
(Includes those of spouse and dependent children. See pp 33-35 of Instructions.)

	CREDITOR	DESCRIPTION	VALUE CODE*
	NONE (No reportable liabilities.)		
1		Capital One - Mastercard	J
2			
3			
4			
5			
6			

* VAL CODES: J=\$15,000 or less K=\$15,001-\$50,000 L=\$50,001 to \$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

(Includes those of spouse and dependent children. See pp. 36-54 of Instructions.)

VIII. ADDITIONAL INFORMATION OR EXPLANATIONS.

(Indicate part of report.)

IX. CERTIFICATION

I certify that all the 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. 4, section 501 et. seq., 5 U.S.C. 7353 and Judicial Conference regulations.

Signature



Date

1/28/02

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. 4, Section 104).

FILING INSTRUCTIONS

Mail original and three additional copies to:

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

FINANCIAL STATEMENT

NET WORTH

Provide a complete, current financial net worth statement which itemizes in detail all assets (including bank accounts, real estate, securities, trusts, investments, and other financial holdings) all liabilities (including debts, mortgages, loans, and other financial obligations) of yourself, your spouse, and other immediate members of your household.

ASSETS		LIABILITIES	
Cash on hand and in banks	7,500.	Notes payable to banks-secured	N/A
U.S. Government securities-add schedule	N/A	Notes payable to banks-unsecured	N/A
Listed securities-add schedule	N/A	Notes payable to relatives	N/A
Unlisted securities-add schedule	N/A	Notes payable to others	N/A
Accounts and notes receivable:	N/A	Accounts and bills due	N/A
Due from relatives and friends	75,000.	Unpaid income tax	N/A
Due from others	N/A	Other unpaid income and interest	N/A
Doubtful	N/A	Real estate mortgages payable-add schedule (PNC) Bank	188,000.
Real estate owned-add schedule	250,000.	Chattel mortgages and other liens payable	N/A
Real estate mortgages receivable	N/A	Other debts-itemize:	N/A
Autos and other personal property	150,000.	American Express	2,000.
Cash value-life insurance	102,000.	Capital One	12,000.
Other assets itemize:			
Cash value--vested pension	100,000.		
IRA	20,000.	Total liabilities	202,000
		Net Worth	502,500
Total Assets	704,500.	Total liabilities and net worth	704,500
CONTINGENT LIABILITIES		GENERAL INFORMATION	
As endorser, comaker or guarantor	N/A	Are any assets pledged? (Add schedule)	N/A
On leases or contracts	N/A	Are you defendant in any suits or legal actions?	No
Legal Claims	N/A	Have you ever taken bankruptcy?	No
Provision for Federal Income Tax	N/A		
Other special debt	N/A		