

FINANCIAL DISCLOSURE REPORT

Report Required by the Ethics
in Government Act of 1978
(5 U.S.C. app. §§ 101-111)

Calendar Year 2005

1. Person Reporting (Last name, First name, Middle initial) Beer, Peter	2. Court or Organization District Court	3. Date of Report 8/9/2006
4. Title (Article III Judges indicate active or senior status; magistrate judges indicate full- or part-time) Senior Status	5. Report Type (check appropriate type) <input type="radio"/> Nomination, <input type="radio"/> Date <input type="radio"/> Initial <input checked="" type="radio"/> Annual <input type="radio"/> Final	6. Reporting Period 1/1/2005 to 12/31/2005
7. Chambers or Office Address United States Courthouse 500 Poydras St., Room 117 New Orleans, Louisiana 70130	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. _____	_____
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FINANCIAL DISCLOSURE OFFICE

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

NONE - (No reportable non-investment income.)

DATE

SOURCE AND TYPE

GROSS INCOME
(yours, not spouse's)

1. _____	Northwestern Mutual Life Ins. Co. ██████████	_____
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FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

Beer, Peter

Date of Report

8/9/2006

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

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

NONE - (No such reportable reimbursements.)

SOURCE

DESCRIPTION

1.

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. Whitney National Bank of N.O.

Promissory Note

M

FINANCIAL DISCLOSURE REPORT
Page 1 of 1

Name of Person Reporting Beer, Peter	Date of Report 8/9/2006
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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)
<input type="checkbox"/> NONE (No reportable income, assets, or transactions)									
1. Southern Company	C	Dividend	J	T					
2. USX	B	Dividend	J	T					
3. American Electric Power	B	Dividend	J	T					
4. Peoples Electric	B	Dividend	K	T					
5. Arizona Mutual Finance	B	Interest	K	T					
6. Wisconsin Health & Education	A	Interest	J	T					
7. County of Hamilton	A	Interest	J	T					
8. Spokane Riverside	A	Interest	J	T					
9. Vanguard-Total Intl. Port	B	Interest	L	T					
10. Vanguard - Horizon Aggressive Group	B	Interest	L	T					
11. Vanguard - Horizon Capital Opportunity	B	Interest	L	T					
12. Devon Energy	A	Interest	J	T					
13. Wainco Oil Corporation	A	Interest	J	T					
14. Coda Energy	A	Interest	J	T					

1. Income/Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less 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: (See Columns C1 and D3)	J = \$15,000 or less N = \$250,000-\$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 \$50,000,000	M = \$100,001-\$250,000 P2 = \$5,000,001-\$25,000,000	
3. Value Method Codes (See Column C2)	Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	S = Assessment W = Estimated	T = Cash/Market	

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting	Date of Report
Beer, Peter	8/9/2006

VIII. ADDITIONAL INFORMATION OR EXPLANATIONS

(Indicate part of Report.)

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

Beer, Peter

Date of Report

8/9/2006

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 _____

8/9/06

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