

FINANCIAL DISCLOSURE REPORT

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

Calendar Year 2003

1. Person Reporting (Last name, First name, Middle initial) FITZPATRICK, DUROSS	2. Court or Organization U. S. DISTRICT COURT, GEORGIA	3. Date of Report 5/10/2004
4. Title (Article III Judges indicate active or senior status; magistrate judges indicate full- or part-time) U. S. DISTRICT JUDGE (SENIOR)	5. ReportType (check appropriate type) <input type="radio"/> Nomination, Date <input type="radio"/> Initial <input checked="" type="radio"/> Annual <input type="radio"/> Final	6. Reporting Period 1/1/2003 to 12/31/2003
7. Chambers or Office Address P. O. BOX 1014 MACON, GA 31202	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. PRESIDENT

RICHLAND RESTORATION LEAGUE, INC.

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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DISCLOSURE OFFICE

FINANCIAL DISCLOSURE REPORTName of Person Reporting
FITZPATRICK, DUROSSDate of Report
5/10/2004**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.)SOURCEDESCRIPTION1.

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5/10/2004**V. GIFTS.** (Includes those to spouse and dependent children. See pp. 28-31 of instructions.) **NONE** - (No such reportable gifts.)

<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
1.		

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

<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE</u>
1. WELLS FARGO	FARM LAND, EQUIPMENT & PERSONAL	M
2. AGGEORGIA FARM CREDIT ACA	FARM	K
3. GEORGIA DEVELOPMENT AUTHORITY	FARM LAND & EQUIPMENT	N

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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. TIMBERLAND-TWIGGS COUNTY, GEORGIA		None	O	W					
2. PASTURE & CROP LAND-TWIGGS COUNTY, GEORGIA	D	Rent	M	W					
3. FARM EQUIPMENT		None	K	W					
4. STOCK-AGGEORGIA FARM CREDIT ACA	A	Dividend	J	T					
5. VEHICLES		None	K	W					
6. COBBLESTONE SQUARE LIMITED PARTNERSHIP	B	Rent	K	W					
7. CHECKING ACCOUNT, SUNTRUST BANK	A	Interest	J	T					
8. CHECKING ACCOUNT, RIVOLI BANK & TRUST	A	Interest	J	T					
9. IRA-SALOMON SMITH BARNEY	E	Interest	N	T	Partial Rede	Mthly	K		Monthly IRA distributions
10. -RIVOLI BANK & TRUST STOCK									
11. -TRANSAMERICA LIFE INS COMPANY LANDMARK ANNUITY									
12. -CITIBANK NA BANK DEPOSIT PROGRAM									

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	

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS (Indicate part of Report.)

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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

5/12/04

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