

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON



FRANKLIN D. BURGESS
SR. UNITED STATES DISTRICT JUDGE
(253) 882-3860


1717 PACIFIC AVENUE, ROOM 3124
TACOMA, WASHINGTON 98402

June 27, 2007

Hon. Ortrie D. Smith
Chair, Judicial Conference of the United States
Committee on Financial Disclosure
One Columbus Circle, N.E.
Washington, D.C. 20544

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Re: Calendar Year 2006 Filing "NY Life Annuity" Entry

Dear Honorable Smith,

Your letter of June 20, 2007 relative to Part VII, page 1, line 1 of my disclosure report is responded to as follows:

Purchase Date: 12/27/05 (New)
(3) Value Code M
(4) Gain Code D

If there are any other questions, please advise.



**FINANCIAL DISCLOSURE REPORT
FOR CALENDAR YEAR 2006**

1. Person Reporting <i>(Last name, first, middle initial)</i> BURGESS, Franklin D.	2. Court or Organization U.S. District Court for the Western District of WA at Tacoma	3. Date of Report 4/27/07
4. Title <i>(Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)</i> U.S. District Judge-Senior Status	5a. Report Type <i>(check appropriate type)</i> ___ Nomination, Date _____ ___ Initial <u>X</u> Annual ___ Final 5b. ___ Amended Report	6. Reporting Period Jan. 1, 2006 to Dec. 31, 2006
7. Chambers or Office Address U.S. Court House 1717 Pacific Avenue, Rm. 3124 Tacoma, WA 98402	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 Instructions.)*

	<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1	<input checked="" type="checkbox"/> NONE (No reportable positions.)	
2	_____	_____
3	_____	_____

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

	<u>DATE</u>	<u>PARTIES AND TERMS</u>
1	<input checked="" type="checkbox"/> NONE (No reportable agreements.)	
2	_____	_____

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

	<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u>
A. Filer's Non-Investment Income			
1	<input checked="" type="checkbox"/> NONE (No reportable non-investment income.)		
2	_____	_____	\$ _____
3	_____	_____	\$ _____
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)			
1	<input type="checkbox"/> NONE (No reportable non-investment income.)		
2	2006	Giaudrone Middle School	

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting BURGESS, Franklin D.	Date of Report 4/27/07
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IV. REIMBURSEMENTS -- transportation, lodging, food, entertainment.
(Includes those to spouse and dependent children. See pp. 25-27 of Instructions.)

	<u>SOURCE</u>	<u>DESCRIPTION</u>
<input checked="" type="checkbox"/>	NONE (No such reportable reimbursements.)	
1		
2		
3		
4		
5		
6		
7		

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

	<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
<input checked="" type="checkbox"/>	NONE (No such reportable gifts.)		
1			\$
2			\$
3			\$
4			\$

VI. LIABILITIES. (Includes those of spouse and dependent children. See pp. 32-33 of Instructions.)

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE*</u>
<input checked="" type="checkbox"/>	NONE (No reportable liabilities.)		
1			
2			
3			
4			
5			

*Value Codes: J=\$15,000 or less K=\$15,001-\$50,000 L=\$50,001-\$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 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

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

BURGESS, Franklin D.

Date of Report

4/27/07

VII. Page 1 INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children. See pp. 34-60 of Instructions.)

A. Description of Assets (including trust assets) <i>Place "(X)" after each asset exempt from prior disclosure</i>	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			
	Amt. Code1 (A-H)	Type (e.g., div., rent or int.)	Value Code2 (J-P)	Value Method Code3 (Q-W)	Type (e.g., buy, sell, merger, redemption)	(2) Date: Month- Day	(3) Value Code2 (J-P)	(4) Gain Code1 (A-H)	(5) Identity of buyer/seller (if private transaction)
<input type="checkbox"/> NONE (No reportable income, assets, or transactions.)									
1 Columbia Bank	C	Int.	M	T					
2 Evergreen Utility Fund	C	Div.	L	T					
3 NY Life Annuity	D	Int.	M	T					
4									
5									
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15									
16									
17									

1	Income/Gain Codes: A=\$1,000 or less (See Col. B1, D4)	F=\$50,001-\$100,000	B=\$1,001-\$2,500 G=\$100,001-\$1,000,000	C=\$2,501-\$5,000 H=\$5,001-\$15,000	E=\$15,001-\$50,000	I=\$1,000,001-\$5,000,000	H2=More than \$5,000,000
2	Value Codes: J=\$15,000 or less (See Col. C1, D3)	N=\$250,001-\$500,000	K=\$15,001-\$50,000 O=\$500,001-\$1,000,000	L=\$50,001-\$100,000 P1=\$1,000,001-\$5,000,000	M=\$100,001-\$250,000 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 (See Col. C2)	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
BURGESS, Franklin D.	4/27/07

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

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

Signature 

Date 4/27/07

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