

# FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2006

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

<b>1. Person Reporting</b> (Last name, first, middle initial) Murphy, Harold L.		<b>2. Court or Organization</b> Northern District of Georgia	<b>3. Date of Report</b> 4-13-07
<b>4. Title</b> (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) United States District Judge-Active	<b>5a. Report Type</b> (check appropriate type) ___ Nomination, Date _____ ___ Initial <input checked="" type="checkbox"/> Annual ___ Final		<b>6. Reporting Period</b> 01/01/06 to 12/31/06
	<b>5b.</b> ___ Amended Report		
<b>7. Chambers or Office Address</b> 600 East First Street Suite 311 Rome, Georgia 30161		<b>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.</b> 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>
<input type="checkbox"/> NONE (No reportable positions.)	
1 Executor of Estate Number 2	
2	
3	

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 FINANCIAL DISCLOSURE OFFICE

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

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

### 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>
<b>A. Filer's Non-Investment Income</b>		
<input checked="" type="checkbox"/> NONE (No reportable non-investment income.)		
1		\$
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)

<input checked="" type="checkbox"/> NONE (No reportable non-investment income.)
1
2

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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  
 P2=\$5,000,001-\$25,000,000      P3=\$25,000,001-50,000,000      P4=\$50,000,001 or more

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**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) Amt. Code1 (A-H)	(2) Type (e.g., div, rent or int.)	(1) Value Code2 (J-P)	(2) Value Method Code3 (Q-W)	(1) Type (e.g., buy, sell, merger, redemption)	If not exempt from disclosure			
						(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 First Haralson Corporation	E	Div.	P 1	T					
2 Tract 1 Unimproved land in Haralson Co., Ga.		None	M	W					
3 Tract 2 sold in December 2005									
4 Tract 3 Unimproved land in Haralson County, Ga.	D	Rent	O	W					
5 Tract 4 1/2 interest in Haralson County, Ga.	D	Rent	O	W					
6 Life Insurance Metropolitan Life Ins. Co.	A	Int.	L	V	Value method is paid up			value of policy	
7 Life Insurance Metropolitan Life Ins. Co.		None	L	V	Value method is paid up			value of policy	
8 National Service Life Insurance	A	Div.	J	V	Value method is paid up			value of policy	
9 First National Bank of Georgia	D	Int.	M	T					
10 Tract 5 - Tract of Land in Tallapoosa, Ga.		None	L	W					
11 First National Bank of Georgia	C	Int.	J	T					
12 First National Bank of Georgia	B	Int.	L	T					
13 Coca Cola	A	Div.	J	T					
14 First Haralson Corporation	B	Div.	J	T					
15 First National Bank of Georgia 1/2 interest		None	J	T	2/28/06	opened	checking	account	
16									
17									(Continued on next page)

1	Income/Gain Codes: (See Col. B1, 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 Col. C1, D3)	J=\$15,000 or less N=\$250,001-\$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 \$5,000,000	M=\$100,001-\$250,000 P2=\$5,000,001-\$25,000,000	
3	Value Method Codes: (See Col. C2)	O=Appraisal U=Book value	R=Cost (real estate only) V=Other	S=Assessment W=Estimated	T=Cash/Market	

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**VII. Page 2 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 Code (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)									
18 Metlife Policy Holders Trust	A	Div.	J	T					
19 Metlife Policy Holders Trust	A	Div.	J	T					
20 Chevron Corp.	B	Div.	L	T					
21 Southcrest Financial Group, Inc.	E	Div.	P 1	T					
22 Southcrest Financial Group, Inc.	B	Div.	K	T					
23									
24									
25									
26									
27									
28									
29									
30									
31									
32									
33									
34									

1	Income/Gain Codes: (See Col. B1, 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 Col. C1, D3)	J=\$15,000 or less N=\$250,001-\$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	
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**VIII. ADDITIONAL INFORMATION OR EXPLANATIONS (Indicate part of Report.)**

While I remain executor of Estate Number 2, all assets were distributed to the heirs in 1998.

**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 April 13, 2007

NOTE: **PERJURY** (18 U.S.C. § 101) **IF YOU FALSIFY OR FAILS TO FILE THIS REPORT MAY BE**  
SUBJECT TO **PERJURY** (18 U.S.C. § 101.)

**MAILING 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