

# FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2004

1. Person Reporting (Last name, First name, Middle initial) Adams, John R	2. Court or Organization U.S. District Court, Ohio	3. Date of Report 5/4/2005
4. Title (Article III Judges indicate active or senior status; magistrate judges indicate full- or part-time) U.S. District Judge	5. Report Type (check appropriate type) <input type="radio"/> Nomination,    Date <input type="radio"/> Initial <input checked="" type="radio"/> Annual <input type="radio"/> Final	6. Reporting Period 1/1/2004 to 12/31/2004
7. Chambers or Office Address U.S. Courthouse 2 South Main Street, Suite 526 Akron, Ohio 44308	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.  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. Guardian

Guardianship #1 (See Part VIII)

2. Board Member

Mental Health Association of Summit County (See Part VIII)

**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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**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.)

DATE

SOURCE AND TYPE

GROSS 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.)

DATE

SOURCE AND TYPE

1. \_\_\_\_\_

**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. \_\_\_\_\_

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**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. Valley Savings Bank	Mortgage on residence/rental property (Duplex)	N
2. KeyBank	Credit Line	J

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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. Rental Property, Fairlawn, OH	D	Rent	N	Q					
2. FirstMerit Common Stock	B	Dividend	K	T					
3. Fidelity Advisor Equity Growth Class I		None	J	T					
4. Fidelity Advisor Equity Portfolio Income Class I	A	Dividend	J	T					
5. Fidelity Contrafund	A	Dividend	K	T					
6. Franklin Small-Mid Cap Growth Fund Class A		None	J	T					
7. Templeton Foreign Fund Class A	A	Dividend	J	T					
8. McDonald Investments: Fidelity Contrafund	A	Dividend	J	T					
9. Federated Automated Govt. Cash Reserve	A	Dividend	J	T					
10. Federated Capital Appreciation Fund Class A	A	Dividend	K	T	Partial sale	8/5	J		
11. Northwestern Mutual Life Ins. (Whole Life) No. 1	A	Dividend	J	T					
12. Northwestern Mutual Life Ins. (Whole Life) No. 2	A	Dividend	J	T					
13. Ohio Public Employees Retirement System Acct.	A	Interest	K	T					
14. Janus Growth & Income Fund	A	Dividend	K	T					See VIII
15. Retirement Account:									
16. Federated Govt. Obligations Fund	A	Dividend	J	T					
17. FirstMerit Common Stock	A	Dividend	J	T					
18. Fidelity Advisor Equity Growth Class I	A	Dividend	K	T					

1. Income/Gain Codes:	A = \$1,000 or less	B = \$1,001-\$2,500	C = \$2,501-\$5,000	D = \$5,001-\$15,000	E = \$15,001-\$50,000
(See Columns B1 and D4)	F = \$50,001-\$100,000	G = \$100,001-\$1,000,000	H1 = \$1,000,001-\$5,000,000	H2 = More than \$5,000,000	
2. Value Codes:	J = \$15,000 or less	K = \$15,001-\$50,000	L = \$50,001-\$100,000	M = \$100,001-\$250,000	
(See Columns C1 and D3)	N = \$250,000-\$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 = More than \$50,000,000		
3. Value Method Codes	Q = Appraisal	R = Cost (Real Estate Only)	S = Assessment	T = Cash/Market	
(See Column C2)	U = Book Value	V = Other	W = Estimated		

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	(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)
19. Fidelity Advisor Equity Portfolio Income Class I	A	Dividend	K	T					
20. Fidelity Securities Blue Chip Growth Fund	A	Dividend	K	T					
21. Franklin Small-Mid Cap Growth Fund Class A	A	Dividend	J	T					
22. Whit Oak Growth Port.	A	Dividend	J	T					
23. Templeton Foreign Fund Class A	A	Dividend	J	T					

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## VIII. ADDITIONAL INFORMATION OR EXPLANATIONS

(Indicate part of Report.)

- 1) Part I, page 1, line 1 - Guardianship #1 - The undersigned serves as Guardian of the Person (medical & personal decisions only, not financial). Ward is physically and mentally disabled as a result of cerebral palsy. The undersigned has served as Guardian since 1984.
- 2) Part I, page 1, line 2 - Erroneously omitted position as Board Member of Mental Health Association of Summit County, a non-paying position of a non-profit organization.
- 3) Part VII, page 1, line 14 - Janus Growth and Income Fund was erroneously omitted in last report. I have owned Fund since approximately 1993 and Fund was included in my Nomination Report dated 1/7/2003.

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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 5-10-05

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