

**FINANCIAL DISCLOSURE REPORT
FOR CALENDAR YEAR 2004**

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

1. Person Reporting (Last name, First name, Middle initial) Robinson, Julie A	2. Court or Organization U.S. District Court	3. Date of Report 3/15/2005
4. Title (Article III Judges indicate active or senior status; magistrate judges indicate full- or part-time) U.S. District Judge - Active	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 1/1/2004 to 12/31/2004
7. Chambers or Office Address 405 U.S. Courthouse 444 S.E. Quincy Topeka, Kansas 66683	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.)

<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1. Member of Board of Trustees	St. Paul School of Theology
2. Member of Board of Directors	Attachment Disorder Network

II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of filing instructions)

NONE - (No reportable agreements.)

<u>DATE</u>	<u>PARTIES AND TERMS</u>
1.	

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 FINANCIAL DISCLOSURE OFFICE

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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.)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.)SOURCEDESCRIPTION

1. Department of Justice

4/15/04 Speaker at Seminar on Sentencing Guidelines, Columbia, SC (transportation, lodging, meals, incidentals)

2. Just the Beginning Foundation

9/30/04-10/3/04 Sixth Biennial Conference, Philadelphia, PA (lodging, meals)

3. Oklahoma Bar Association

12/10/04 Speaker at Bankruptcy Seminar, Oklahoma City, OK (transportation, meals, incidentals)

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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.		

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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. Privileged Assets - Amex		None	J	T					
2. Twentieth Century Select Fund		None	J	T					
3. Benham Cash Reserve Fund		None	J	T					
4. American Century Select Fund		None	J	T					
5. Lucent 401(K)		None	M	T					
6. US savings bonds		Interest	J	T	redeem	8/13	J	C	
7. US savings bond		None	J	T					
8. U.S. Bank (formerly Firststar)	A	Interest	J	T					
9. Bank of America	A	Interest	J	T					
10. Bank of America Stock	A	Dividend	J	T					
11. New Century Credit Union		None	J	T					
12. State Farm Life Insurance Co.			J	T					
13. Phoenix Companies, Inc.									
14. Phoenix Companies, Inc.									
15. Lucent ESOP (breakdown as **below, #s 15-26)			K	T					
16. ** SBC Communication, Inc.	A	Dividend	J	T					
17. ** AT&T Corporation	A	Dividend	J	T					
18. ** Bell Atlantic Corporation		None	J	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) Identify of buyer/seller (if private transaction)
19. ** Bell Atlantic Corporation		None	J	T					
20. ** US West, Inc.		None	J	T					
21. ** BellSouth Corporation	A	Dividend	J	T					
22. ** Pacific Telesis		None	J	T					
23. ** Nynex		None	J	T					
24. ** Vodaphone Airtouch Ltd.		None	J	T					
25. ** Verizon, Inc.	A	Dividend	J	T					
26.									

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS

(Indicate part of Report.)

I. Positions

10/04 Joined Board of Directors of Attachment Network Disorder, a not for profit corporation providing support and information to families of children with Reactive Attachment Disorder.

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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

3/31/05

NOT _____ 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