AO 10 Rev. 1/2012

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2011

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

1. Person Reporting (last name, first, middle initial)	2. Court or Organization	3. Date of Report			
COLLIER, LACEY A.	NORTHERN DISTRICT OF FLORIDA	05/14/2012			
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)	5a. Report Type (check appropriate type)	6. Reporting Period			
U.S. District Judge (Senior)	Nomination Date 01/01/2011				
	Initial Annual Final 12/31/2011 5b. Amended Report				
7. Chambers or Office Address	, =				
UNITED STATES COURTHOUSE ONE NorthPalafox St. PENSACOLA, FL. 32502					
	ctions accompanying this form must be followed. Complete rt where you have no reportable information. Insert signati				
I. POSITIONS. (Reporting individual only; see pp. 9-13 of filing NONE (No reportable positions.)	instructions.)				
POSITION	NAME OF ORGAN	NAME OF ORGANIZATION/ENTITY			
I. Trustee and Director	ector Naval Aviation Museum Foundation				
2. Trustee	Snoezelen/Westgate Foundation				
3. Member, Board of Directors	Florida State University College of Medicine, West Florida, Inc.				
4.					
5.					
II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of filing instructions.)					
✓ NONE (No reportable agreements.)					
<u>DATE</u>	PARTIES AND TERMS				
<u>1</u>					
2.					
3.					

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Name of Person Reporting

COLLIER, LACEY A.

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III. N	ON-INVESTMEN	NT INCOME. (R	eporting individual and spouse; see	pp. 17-24 of filing instructions	s.)		
A. File	er's Non-Investment II	ncome					
	NONE (No reportable	non-investment inco	ome.)				
	<u>DATE</u>		SOURCE AND	ГҮРЕ	INCOME (yours, not spouse's)		
1. 2011		State of Flori	da (retirement)		\$32,088.60		
2.							
3.							
4.							
-	ouse's Non-Investment		married during any portion of the r	reporting year, complete this sec	ction.		
√	NONE (No reportable		ome.)				
_	DATE SOURCE AND TYPE						
1.							
2.							
3.							
4.							
	REIMBURSEMEN s those to spruse and dependent o						
✓	NONE (No reportable	e reimbursements.)					
	SOURCE	<u>DATES</u>	LOCATION	<u>PURPOSE</u>	ITEMS PAID OR PROVIDED		
1.					_		
2.							
3.					_		

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V. GIFTS. (Includes those to spouse and dependent children; see p	p. 28-31 of filing instructions.)	<u> </u>
✓ NONE (No reportable gifts.)		
SOURCE	<u>DESCRIPTION</u>	<u>VALUE</u>
1.		
2.		
3.		
4.		
5.		
VI. LIABILITIES. (Includes those of spouse and dependent	children; see pp. 32-33 of filing instructions.)	
✓ NONE (No reportable liabilities.)		
CREDITOR	DESCRIPTION	VALUE CODE

2.

3.

4.

5.

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VII INVESTMENTS and TRUSTS

VII. IN VEST WIEN 15 and 11	KUS15 - i	come, value, tr	ansactions (includes thos	e of spouse and de	pendent chil	dren; see	рр. 34-60	of filing instructions.)
NONE (No reportable income	e, assets, or i	ransaction	s.)						
۸.		B.	(2.			D.		
Description of Assets	1nco	me during		lue at end		Transactio		reporting	period
(including trust assets)		ing period		ng period		1101150011	ons during	, reporting	period
(including trust assets)									
	(1)	(2)	(1)	(2)	(1)	(2)	(3)	(4)	(5)
Place "(X)" after each asset	Amount	Type (e.g.,	Value	Value	Type (e.g.,	Date	Value	Gain	Identity of
exempt from prior disclosure	Code 1	div., rent,	Code 2	Method	buy, sell,	mm/dd/yy	Code 2	Code 1	buyer/seller
	(A-H)	or int.)	(J-P)	Code 3	redemption)		(J-P)	(A-H)	(if private
				(Q-W)					transaction)
	ı			,					,
Legg Mason Value Trust	A	Dividend	M	Т				<u> </u>	
					1		<u> </u>		
2. NFCU Share Savings Acct.	A	Interest	J	Т					
Suntrust Bank Accounts		1-44	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	T	1	<u> </u>	<u> </u> 	<u> </u>	<u> </u>
5. Suntrust Bank Accounts	A	Interest	M	Т					
4.									
5.									
6.					<u> </u> 	<u> </u> 			
0.									
7.									
8.					<u> </u>	<u> </u> 	<u> </u>	<u> </u>	
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9.									•
10.					<u> </u>	1	<u> </u>		
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12.				<u> </u> 	<u> </u>	1	<u> </u>	<u> </u>	
									
13.									
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14.									
15.			Ì	1		İ	İ	İ	
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16.									
17.			<u> </u> 	<u> </u> 	1	<u> </u>	<u> </u>	1	
17.									
		l		1	.1	_1	1	1	L

1. Income Gain Codes: (See Columns B1 and D4)

2. Value Codes (See Columns C1 and D3)

3. Value Method Codes (See Column C2)

A = \$1.000 or less

F =\$50,001 - \$100,000

J = \$15,000 or less

N = \$250,001 - \$500,000 P3 =\$25,000,001 - \$50,000,000

Q - Appraisal

U Book Value

B =\$1,001 - \$2,500

G = 100,001 - 1.000,000

K ~\$15,001 - \$50,000 O = \$500,001 - \$1,000,000

R = Cost (Real Estate Only)

V = Other

C =\$2,501 - \$5,000

111 =\$1,000,001 - \$5,000,000

L =\$50,001 - \$100,000

P1 = 1.000,001 - 55,000,000

P4 = More than \$50,000,000

S = Assessment

W =Estimated

D=\$5,001 - \$15,000

112 =More than \$5,000,000 M=\$100,001 - \$250,000 P2 =\$5,000,001 - \$25,000,000

T =Cash Market

E=\$15,001 - \$50,000

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

Signature: S/ LACEY A. COLLIER

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILLFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

Committee on Financial Disclosure Administrative Office of the United States Courts Suite 2-301 One Columbus Circle, N.E. Washington, D.C. 20544