

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2005

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) SHOBB, MARVIN H.		2. Court or Organization NORTHERN DISTRICT OF GEORGIA		3. Date of Report 5.10.06
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) SENIOR	5a. Report Type (check appropriate type) ___ Nomination, Date _____ ___ Initial <input checked="" type="checkbox"/> Annual ___ Final		6. Reporting Period 1-1-2005 TO 12-31-2005	
	5b. ___ Amended Report			
7. Chambers or Office Address 1767 U.S. COURTHOUSE 75 STRING ST., SW ATLANTA, GA 30303-3309		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.)

POSITION

NAME OF ORGANIZATION/ENTITY

NONE (No reportable positions.)

1	ADVISORY BOARD	SHEPHERD SPINAL CLINIC
2	LIFE TRUSTEE	AMERICAN JEWISH COMMITTEE
3		

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DISCLOSURE OFFICE

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

DATE

PARTIES AND TERMS

NONE (No reportable agreements.)

1		
2		

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

DATE

SOURCE AND TYPE

INCOME

A. Filer's Non-Investment Income

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)

NONE (No reportable non-investment income.)

1	2005	SELF-EMPLOYED FASHION DESIGNER
2		

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

SHOUB, MARVIN H.

Date of Report

5.10.06

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>
1	<input checked="" type="checkbox"/> NONE (No such reportable reimbursements.)	
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>
1	<input checked="" type="checkbox"/> NONE (No such reportable gifts.)		\$
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>
1	<input checked="" type="checkbox"/> NONE (No reportable liabilities.)		
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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Name of Person Reporting

SHOOP, MARVIN H.

Date of Report

5.10.06

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 PINNACLE CREDIT UNION FULTON COUNTY, GA	E	INT	N	W					
2 MERRILL LYNCH CMA ACCOUNT	B	INT	L	T					
3 COBB COUNTY HOSPITAL BONDS	C	INT	L	T					
4 JESUP, GA. BONDS	B	INT	K	T					
5 METRO ATLANTA BONDS	C	INT	K	T					
6 COBB COUNTY HOSPITAL BONDS	A	INT	J	T					
7 GWINNETT COUNTY BONDS	B	INT	J	T					
8 ML&CO UNION EURO / USD	A	INT	K	T					
9 CAPITAL INCOME BUILDUP FUND	A	DIV	J	T					
10 CAPITAL WORLD BOND FUND	A	DIV	J	T					
11 CAPITAL WORLD GROWTH FUND	A	DIV	J	T					
12 EUROPACIFIC GROWTH FUND	A	DIV	J	T					
13 FUNDAMENTAL INVS INC FUND	A	DIV	J	T					
14 GROWTH FUND AMER FUND	A	DIV	J	T					
15 OPPENHEIMER INTL BOND FUND	A	INT	L	T					
16									
17									

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)	Q=Appraisal U=Book value	R=Cost (real estate only) V=Other	S=Assessment W=Estimated	T=Cash/Market	

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting SHODD, MARVIN H.	Date of Report 5-10-06
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VII. Page 2 INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children. See pp. 34-57 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 TRUST (IRA) WACHOVIA SECURITIES TRUSTEE									
19 ASSETS:									
20 EVERGREEN MONGY MARKET FUND		INT							
21 U.S. TREASURY BONDS AND OBLIGATIONS		INT							
22 UNITED UTILITIES		INT							
23 CALAMOS INVT TR FUND		DIV							
24 CAUSEWAY INTL VALUE FUND		DIV			SOLD	12/11			
25 CENTURY SMALL CAP FUND		DIV							
26 FMI FDS FOCUS FUND		DIV							
27 GOLDMAN SACHS TR FINL SO FUND		DIV							
28 HOTCHKIS & WILGY FDS FUND		DIV							
29 JULIUS BAER INVT FDS FUND		DIV							
30 KINGTICS MUT FDS INC FUND		DIV			SOLD	12/16			
31 LEGG MASON VALUG TRUST FUND		DIV			SOLD	12/16			
32 OPPENHEIMER REAL ASSET FUND		DIV							
33 ROYCE FD TOTAL RETURN FUND		DIV							
34 TCW GALILEO FDS INC SELECT FUND		DIV							
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					
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VII. Page 3 INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children. See pp. 34-57 of Instructions.)

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	(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)									
35 FCW GALILEO FUNDS INC VALUE FUND		DIV							
36 TORRAY FD INSTITUTIONAL FD FUND		DIV							
37 VANGUARD WINDSOR FUND INC VANGUARD /		DIV							
38 WINDSOR II PORTFOLIO									
39 ACM INCOME FUND		DIV			BUY	5/19	K		
40 DODGE & COX INTL		DIV			BUY	12/16	K		
41 DNP SELECT INCOME FUND		DIV			BUY	5/19	K		
42 WELLS FARGO FDS TR		DIV			BUY	12/16	J		
43 AGGREGATE INCOME & VALUE OF TRUST	E		N	T					
44									
45									
46									
47									
48									
49									
50									
51									

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 H=\$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	
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Date of Report

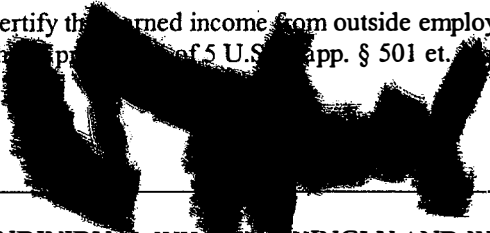
5.10.06

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 the 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 5/10/06

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