

UNITED STATES DISTRICT COURT  
DISTRICT OF NEW JERSEY

CHAMBERS OF  
JOEL A. PISANO  
UNITED STATES DISTRICT JUDGE

Clarkson S. Fisher Courthouse  
402 East State Street  
Trenton, NJ 08608  
(609) 989-0502

July 16, 2007

Judge Ortrie D. Smith  
Judicial Conference of the United States  
Committee on Financial Disclosures  
One Columbus Circle, N.E.  
Washington, D.C. 20544

Re: Calendar Year 2006 Filing

Dear Judge Smith:

RECEIVED  
2007 JUL 23 A 11: 18  
FINANCIAL  
DISCLOSURE OFFICE

I am writing to you in order to provide the additional information required for you to close my 2006 report as requested in your letter of June 26, 2007.

1. Part VII, Page 4, Line 2 – “State of New Jersey” – This item should not have been listed. It was an \$84 interest payment from the State of New Jersey on a late tax refund. There is no asset involved.
2. Part VII, Page 4, Line 12 – “Merrill Lynch-Investor Account Celgene” – The word “None” should have been entered in Column B(2) under “Type,” since no income was received from this investment.

I understand that this letter is an Amendment to my report, and believe that this information should be all you need to close my report for 2006.

  
Joel A. Pisano

**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 (last name, first, middle initial)</b>  PISANO, JOEL	<b>2. Court or Organization</b>  DISTRICT OF NEW JERSEY	<b>3. Date of Report</b>  05/04/2007
<b>4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)</b>  U.S. DISTRICT JUDGE (ACTIVE)	<b>5a. Report Type (check appropriate type)</b> <input type="checkbox"/> Nomination,      Date <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final  <b>5b.</b> <input type="checkbox"/> Amended Report	<b>6. Reporting Period</b>  01/01/2006 to 12/31/2006
<b>7. Chambers or Office Address</b>  CLARKSON S FISHER FEDERAL BLDG 402 EAST STATE STREET TRENTON, N. J. 08608-1507	<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.)

NONE (No reportable positions.)

<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1.	
2.	
3.	
4.	
5.	

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

NONE (No reportable agreements.)

<u>DATE</u>	<u>PARTIES AND TERMS</u>
1.	
2.	
3.	

**FINANCIAL DISCLOSURE REPORT**

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Name of Person Reporting

PISANO, JOEL

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

**A. Filer's Non-Investment Income**

NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u> <i>(yours, not spouse's)</i>
1.		
2.		
3.		
4.		
5.		

**B. Spouse's Non-Investment Income -** *If you were married during any portion of the reporting year, complete this section.*

*(Dollar amount not required except for honoraria.)*

NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>
1. 2006	NJ Division of Pensions
2. 2006	Learning Consultant - Self Employed
3.	
4.	
5.	

**IV. REIMBURSEMENTS** *-- transportation, lodging, food, entertainment.*

*(Includes those to spouse and dependent children. See pp. 25-27 of instructions.)*

NONE *(No reportable reimbursements.)*

<u>SOURCE</u>	<u>DESCRIPTION</u>
1.	
2.	
3.	
4.	
5.	

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**V. GIFTS.** *(Includes those to spouse and dependent children. See pp. 28-31 of instructions.)*

NONE *(No reportable gifts.)*

	<u>SOURCE</u>	<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 instructions.)*

NONE *(No reportable liabilities.)*

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE</u>
1.			
2.			
3.			
4.			
5.			

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**VII. INVESTMENTS and TRUSTS** – income, value, transactions (Includes those of the spouse and dependent children. See pp. 34-60 of filing instructions.)

NONE (No reportable income, assets, or transactions.)

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, redemption)	(2) Date Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
1. Wachovia Bank	A	Interest	K	T					
2. STATE OF NEW JERSEY	A	Interest							
3. Merrill Lynch Investor Account Morgan Stanley Stock	A	Dividend			sell	01/31	J	A	
4. Merrill Lynch Investor Account Putnam Intern Govt Inc Fund	A	Dividend			Sell	01/19	J	A	
5. Merrill Lynch Investor Account MFS Government Ltd Fund	A	Dividend			Sell	01/19	J	A	
6. Merrill Lynch Investor Account Davis Series Inc Govt Bd Fund	A	Dividend			Sell	01/19	J	A	
7. Merrill Lynch Investor Account Ready Asset Trust	A	Dividend	J	T					
8. Merrill Lynch Investor Account Sanofi Aventis X	A	Dividend			buy	01/19	J	A	
9.					sold	07/24			
10. Merrill Lynch Investor Account Nyse Group X					Buy	01/31	J		
11.					Sell	07/24	J	A	
12. Merrill Lynch Investor Account Celgene X			K	T	Buy	07/24	K		
13. IRA #1 First Colony Annuity	A	Interest	J	T					
14. IRA #2 First Colony Annuity	A	Interest	J	T					
15.									
16.									
17.									

1. Income Gain Codes: (See Columns B1 and 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 Columns C1 and D3)	J = \$15,000 or less N = \$250,001 - \$500,000	K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000	L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000	M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000	
3. Value Method Codes (See Column C2)	P3 = \$25,000,001 - \$50,000,000 Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	P4 = More than \$50,000,000 S = Assessment W = Estimated	T = Cash Market	

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Name of Person Reporting

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## VII. INVESTMENTS and TRUSTS – income, value, transactions (Includes those of the spouse and dependent children. See pp. 34-60 of filing instructions.)

NONE (No reportable income, assets, or transactions.)

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, redemption)	(2) Date Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
18.									
19.									
20.									
21.									
22.									
23.									

1. Income Gain Codes: (See Columns B1 and D4)	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	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 H1 = \$1,000,001 - \$5,000,000 L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$50,000,000 S = Assessment W = Estimated	D = \$5,001 - \$15,000 H2 = 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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Name of Person Reporting	Date of Report
PISANO, JOEL	05/04/2007

**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 \_\_\_\_\_ Date \_\_\_\_\_

**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