AO 10 Rev. 1/2019

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2022

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			
Batten, Sr., Timothy C.	U.S. District Court, N.D. Ga.	05/15/2023			
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) District Judge - Active	5a. Report Type (check appropriate type) Nomination Date Initial Annual Final 5b. Amended Report	6. Reporting Period 01/01/2022 to 12/31/2022			
7. Chambers or Office Address	,				
18 Greenville Street Newnan, GA 30263					
	tructions accompanying this form must be followed. Comple x for each part where you have no reportable information.	te all parts,			
I. POSITIONS. (Reporting individual only; see pp. 9-13 of file)	ing instructions)				
NONE (No reportable positions.)					
POSITION NAME OF ORGANIZATION/ENTITY					
1. Director and Secretary/Treasurer	T.E.C.H. Venutres, Inc.				
2.					
3.					
4.					
5.					
II. AGREEMENTS. (Reporting individual only; see pp. 1-	4-16 of filing instructions)				
✓ NONE (No reportable agreements.)					
<u>DATE</u>	PARTIES AND TERMS				
1.					
2.					
3					

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III. NON-INVESTM	MENT INCOME.	(Reporting individual and spouse	; see pp. 17-24 of filing instruction	ns)
A. Filer's Non-Investme	nt Income			
NONE (No reporte	able non-investment in	acome.)		
<u>DATE</u>		SOURCE AN	<u>D TYPE</u>	INCOME (yours, not spouse's)
1. 12/31/2022	University	of Georgia School of Law - T	eaching	\$25,000.00
2.				
3.				
4.				_
B. Spouse's Non-Investn		re married during any portion of t	the reporting year, complete this se	ection.
	able non-investment in	ncome.)		
 <u>DATE</u>		SOURCE AN	D TYPE	
1.				
2.				
3.				
4.				
·				
IV. REIMBURSEM (Includes those to spouse and depend				
NONE (No reporte	able reimbursements.)			
SOURCE	<u>DATES</u>	LOCATION	<u>PURPOSE</u>	ITEMS PAID OR PROVIDED
Federal Circuit Bar Association	June 16-19, 2022	Sea Island, Georgia	Annual Convention	Transporation, meals, lodging
2.				
2				

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V. GIFTS. (Includes those to spouse and dependent children; see	e pp. 28-31 of filing instructions.)	
NONE (No reportable gifts.)		
<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
1. John Chalfant 1 College Foo	tball National Championship Ticket and lodging	\$2,000.00
2. Medicraft Enterprises Cash		\$24,000.00
3. John Christy 1 Week's Use	of Amelia Island, Florida Condo	\$5,000.00
4.		
5.		
VI. LIABILITIES. (Includes those of spouse and depende	ent children; see pp. 32-33 of filing instructions.)	
NONE (No reportable liabilities.)		
CREDITOR	<u>DESCRIPTION</u>	VALUE CODE

1.

2.

3.

4.

5.

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VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of 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)		B me during ting period	C Gross value at end of reporting period		D Transactions during reporting period				
	Place "(X)" after each asset exempt from prior disclosure	(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 mm/dd/yy	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
1. Natio	nal Medical Assuance Funding, LLC	A	None	J	W					
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
13.										
14.										
15.										
16.										

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

17.

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

 $Q = \!\! Appraisal$

U =Book Value

B =\$1,001 - \$2,500 G =\$100,001 - \$1,000,000 K =\$15,001 - \$50,000 N =\$250,001 - \$500,000 O =\$500,001 - \$1,000,000 P3 =\$25,000,001 - \$50,000,000

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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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/ Timothy C. Batten, Sr.

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