#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00062521 19 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Joseph Patrick NAME Date Received **ELECTRONICALLY FILED** 07/13/2025 NICKNAME LAST **SUFFIX** Pat Gallagher CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Terri H. NAME NICKNAME LAST **SUFFIX** Gallagher **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 808-2139 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 96 Tarrant

GO TO PAGE 2

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 19

13 C / OH NAME	Gallagher, Joseph Patrick (The Honorable)  14 Filer ID 00062521				(Ethics Com	mission Filers)
This box is for notice of political contributions accepted or political expenditures made by political expenditures made by political expenditures made without the candidate's or consent. Candidates and officeholders are required to report this information only if they received the report this information of the report this information of the received the report that the received the recei					ceholder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS	6			
	SPECIFIC					
		COMMITTEE CAMPAIG	N TREASURER NAME			
		COMMITTEE CAMPAIG	N TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			RIBUTIONS(OTHER THAN TRIBUTIONS MADE ELEC		\$	0.00
		ICAL CONTRIBUTION			\$	0.00
EXPENDITURE	· ·	PLEDGES, LOANS, OR ( IZED POLITICAL EXPEN	GUARANTEES OF LOANS DITURES	S)		
TOTALS	o. Potale ordinal	izeb i deimone em en	BITORES		\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES	5		\$	8,088.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,907.59					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		JTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		true a	ar, or affirm, under penalty and correct and includes al r Title 15, Election Code.			
			The Honorable	e Joseph Patrick Ga	allagher	
			Signature of	Candidate or Officeho	older	
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE				
Sworn to and subso	ribed before me, by the s	aid		, this the		day
		ertify which, witness my ha				
Signature of office	er administering oath	Printed name of offi	cer administering oath	Title of offic	er administeri	ng oath

## SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

			C	3 of 19
I	LER NAN allagher	(Ethics Commission Filers)		
ı	AME OF	SUBTOTAL AMOUNT		
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	<b>\$</b> 8,088.54
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10	). <u> </u>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11	🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12	2. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	<b>\$</b> 350.02

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 1/15 Rpt: 4/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	01/09/2025	American Board of Trial Advocates
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$475.00	2001 Bryan St # 3000
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Membership Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Dues
_	Opening the ONE Wife Street	Open High to 10 ff and held a manual and the control of the contro
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/19/2025	Best Buy
	Amount (\$)	Payee address; City; State; Zip Code
	\$148.27	5604 SW Loop 820
		Fort Worth, TX 76132
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZXI ZXIDITORZ	Check if Austin, TX, officeholder living expense
		Printer
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Data	
	Date	Payee name
	04/24/2025	Byblos Mediterranean Lebanese Restaurant
	Amount (\$)	Payee address; City; State; Zip Code
	\$271.93	1406 North Main Street
		Fort Worth, TX 76164
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Judges Luncheon
		Gaages Earloneon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/15 Rpt: 5/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	04/02/2025	Central Market
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$53.92	4651 West Freeway
		Fort Worth, TX 76107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Jury Committee Meeting
_	Opening CNII V if allowed	Out tidate (Office helds
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/10/2025	Fort Worth Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.00	P. O. BOX 101613
		Fort Worth, TX 76185-1613
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Methbership Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
	Data	Para a sana
	Date 06/24/2025	Payee name CoDoddy
		GoDaddy
	Amount (\$)	Payee address; City; State; Zip Code
	\$83.16	14455 N. Hayden Road
		Scottsdale, AZ 85260
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Domains
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
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### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 3/15 Rpt: 6/19	Gallagher, Joseph Patrick (The Honorable) 00062521	
4	Date	5 Payee name	
	04/22/2025	GoDaddy	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$383.63	14455 N. Hayden Road	
		Scottsdale, AZ 85260	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Domains	
		Domains	
_	0 1: 0.11.7.7.1.		_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/17/2025	GoDaddy	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$84.32	14455 N. Hayden Road	
		Scottsdale, AZ 85260	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Domains	
		Domains	
_	Opening the ONII Wife discort	On alidate (Office health a group of the control of	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	<u>'</u>		
	Date	Payee name	
	01/16/2025	GoDaddy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$127.79	14455 N. Hayden Road	
		Scottsdale, AZ 85260	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
		Check if Austin, TX, officeholder living expense	
		Domains	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefft C/OI	•	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/15 Rpt: 7/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	06/02/2025	Google GSuite Account Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.35	1600 Amphitheater Parkway
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		email account
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	CAPERIOLORE TO DETIRIT C/OF	1
	Date	Payee name
	05/02/2025	Google GSuite Account Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.35	1600 Amphitheater Parkway
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  email account
		emaii account
_	Operation ONE VIII II	On didn't 10 ff a balden name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/02/2025	Google GSuite Account Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.35	1600 Amphitheater Parkway
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	LA LIBITORE	Check if Austin, TX, officeholder living expense
		email account
	Occupated Children	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Con

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/15 Rpt: 8/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	03/03/2025	Google GSuite Account Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.35	1600 Amphitheater Parkway
		Mountain View, CA 94043
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		email account
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	02/03/2025	Google GSuite Account Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.35	1600 Amphitheater Parkway
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		email account
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	01/02/2025	Google GSuite Account Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.35	1600 Amphitheater Parkway
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  email account
		Chian account
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/15 Rpt: 9/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	02/05/2025	Grapevine Republican Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	2600 E. Southlake Blvd., #120-226
		Southlake, TX 76092
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/16/2025	Integris LLC (formerly Blue Jean Networks)
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.07	4055 International Plaze
	,	Suite 600
		Fort Worth, TX 76109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Computer Services and Internet
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/13/2025	Integris LLC (formerly Blue Jean Networks)
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.12	4055 International Plaze
		Suite 600
		Fort Worth, TX 76109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Computer Services and Internet
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 7/15 Rpt: 10/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	05/16/2025	Integris LLC (formerly Blue Jean Networks)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$27.07	4055 International Plaze
		Suite 600
		Fort Worth, TX 76109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
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9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/02/2025	Integris LLC (formerly Blue Jean Networks)
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.12	4055 International Plaze
		Suite 600
		Fort Worth, TX 76109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Computer Services and Internet
		Computer Services and internet
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/16/2025	Integris LLC (formerly Blue Jean Networks)
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.07	4055 International Plaze
		Suite 600
		Fort Worth, TX 76109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Computer Services and Internet
		Computer Services and internet
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	expenditure to benefit C/OI	1

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Food/Beverage Exp Gift/Awards/Memor Legal Services The Instruction		Printing Salarie	·	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)
L	Sch: 8/15 Rpt: 11/19		Gallagher, J	loseph Patricl	k (The Honora	ble)				00062521		
4	Date	5	Payee name									
	04/04/2025		Integris LLC	(formerly Blu	ıe Jean Netwo	rks)						
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip	Code					
	\$33.12		4055 Interna	ational Plaze								
			Suite 600									
			Fort Worth,	TX 76109								
8	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this sche	edule)	(b)	Description				
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	Date		Payee name									
L	03/17/2025	L	Integris LLC	(formerly Blu	ıe Jean Netwo	orks)						
	Amount (\$)		Payee addres	ss; City;	State;	Zip	Code					
	\$27.07		4055 Interna	ational Plaze								
			Suite 600									
			Fort Worth,	TX 76109								
	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this sche	edule)	(b)	Description				
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	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	C	office s	ought			Office he	eld	
L	experialitie to beliefft C/Of	_										
	Date		Payee name									
L	02/28/2025	L	Integris LLC	(formerly Blu	ıe Jean Netwo	orks)						
	Amount (\$)		Payee addres	ss; City;	State;	Zip	Code	·				
	\$33.12		4055 Interna	ational Plaze								
			Suite 600									
			Fort Worth,	TX 76109								
	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Office Overl	nead/Rental E	Expense			<b></b>		ide of Texas. Com		
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	Complete ONLY if direct		Candidate/Offi	ceholder name	0	office s	ought			Office he	əld	
	expenditure to benefit C/O				O	00 3	2 ~ y 11t			000 110		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L	·	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 9/15 Rpt: 12/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	02/18/2025	Integris LLC (formerly Blue Jean Networks)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$27.07	4055 International Plaze
		Suite 600
		Fort Worth, TX 76109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Computer Services and Internet
		Somputer Services and internet
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/27/2025	Integris LLC (formerly Blue Jean Networks)
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.12	4055 International Plaze
		Suite 600
L		Fort Worth, TX 76109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Computer Services and Internet
		Computer Services and internet
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
L	01/16/2025	Integris LLC (formerly Blue Jean Networks)
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.07	4055 International Plaze
		Suite 600
		Fort Worth, TX 76109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense  Computer Services and Internet
		Computer Services and internet
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

nent Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/15 Rpt: 13/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	01/01/2025	Jon's Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$386.40	2905 West BerryStreet
		Fort Worth, TX 76109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Swearing In Luncheon
		Swearing in Euroneon
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	06/04/2025	Securlock Fort Worth
H	Amount (\$)	Payee address; City; State; Zip Code
	\$144.00	3500 Riverbend Blvd
		Fort Worth, TX 76116
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Storage
		G.o. wigo
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/02/2025	Securlock Fort Worth
	Amount (\$)	Payee address; City; State; Zip Code
	\$144.00	3500 Riverbend Blvd
		Fort Worth, TX 76116
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Storage
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
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### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	·	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/15 Rpt: 14/19	Gallagher, Joseph Patrick (The Honorable) 00062521
4	Date	5 Payee name
	04/03/2025	Securlock Fort Worth
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$144.00	3500 Riverbend Blvd
		Fort Worth, TX 76116
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		storage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/03/2025	Securlock Fort Worth
	Amount (\$)	Payee address; City; State; Zip Code
	\$144.00	3500 Riverbend Blvd
		Fort Worth, TX 76116
_	PURPOSE	To .
	OF	
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/03/2025	Securlock Fort Worth
	Amount (\$)	Payee address; City; State; Zip Code
	\$144.00	3500 Riverbend Blvd
		Fort Worth, TX 76116
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment		The Instruction Guide explains how to co	omple	lete this form.	
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 12/15 Rpt: 15/19	L	Gallagher, Joseph Patrick (The Honorable)		00062521	
4	Date	5	Payee name			
	01/06/2025	L	Securlock Fort Worth			
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode		
	\$144.00		3500 Riverbend Blvd			
			Fact Warth TV 70110			
_		Ļ.	Fort Worth, TX 76116	1		
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE		Onice Overneau/Rental Expense		Check if Austin, TX, officeholder living expense	
					Storage	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sou	ught	Office held	
_	<u> </u>	_				
	Date		Payee name			
	03/20/2025	┡	Star Bucks			
	Amount (\$)		Payee address; City; State; Zip Co	ode		
	\$53.98		215 Commerce Street			
			Fort Worth, TX 76102			
	PURPOSE	(0)		(b)	N. Donastintina	
	OF	(a)	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(0)	Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE		1 odd/Deverage Expense		Check if Austin, TX, officeholder living expense	
					Welcome event	
	Consolists ONLY if allowed	L,	Office and the control of the contro		Office held	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sou	ugnt	Office held	
	Data	_				
	Date 06/20/2025		Payee name State Bar of Texas			
		┢		odo		
	Amount (\$) \$543.00		Payee address; City; State; Zip Co 1414 Colorado Street	bue		
	φο 10.00		TITI Colorado Cucos			
			Fort Worth, TX 78701			
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T.	
					Check if Austin, TX, officeholder living expense  State Bar Dues	
					July 24: 24:00	
	Complete ONLY if direct	(	Candidate/Officeholder name Office sou	ught	Office held	
	expenditure to benefit C/OH					
1						

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
ᆫ		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 13/15 Rpt: 16/19	Gallagher, Joseph Patrick (The Honorable)	00062521
4	Date	5 Payee name	
	05/23/2025	Tarrant County Bar Association	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$330.00	1315 Calhoun Street	
		Fort Worth, TX 76102	
8	DUDDOCE		
ď	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule)  (b) Description  Check if travel of	outside of Texas. Complete Schedule T.
	EXPENDITURE	Traversioning Expense	TX, officeholder living expense
			of Law Day Luncheon
			•
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
F	Date	Payee name	
	02/14/2025	Tarrant County Bar Association	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$302.50	1315 Calhoun Street	
	,		
		Fort Worth, TX 76102	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	/ Navertising Expense	TX, officeholder living expense
		Luncheon Sp	
			·
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
H	Date	Payee name	
	02/14/2025	Tarrant County Bar Association	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$84.50	1315 Calhoun Street	
	Φ04.50	1313 Camoun Street	
		Fort Worth, TX 76102	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1003	outside of Texas. Complete Schedule T.  TX, officeholder living expense
		CLE Lunched	
			•
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
1	expenditure to benefit C/O		<del></del>
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### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┡	Total pages Cabadula F1:	
	Total pages Schedule F1: Sch: 14/15 Rpt: 17/19	2 FILER NAME Gallagher, Joseph Patrick (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062521
4	Date	5 Payee name
	03/31/2025	Tarrant County Republican Assembly
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	P.O. BOX 12205
		Fort Worth, TX 76110-8205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Membership Dues
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┡		
	Date	Payee name
	02/24/2025	Texas Association of District Judges
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,029.00	1700 Guadalupe Street
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/15/2025	Texas Center For the Judiciary
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	1210 San Antonio Street
		Austin, TX 78701
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Judicial Conference Fee
一	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
L		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Coi

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 15/15 Rpt: 18/19	Gallagher, Joseph Patrick (The Honorable) 00062521	
4	Date	5 Payee name	
	06/04/2025	Texas Center For the Judiciary	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$350.00	1210 San Antonio Street	
		Austin, TX 78701	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Judicial Conference Fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/Ol	1	
	Date	Payee name	=
	04/15/2025	Westin Stonebriar, The	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$1,482.67	1549 Legacy Drive	
		Frisco, TX 75034	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Hotel Expense for attending Bench Bar	
		Hotel Expense for alteriaing bench bar	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
-	Date	Power name	=
	04/28/2025	Payee name  Woodpile Laser Shop	
	Amount (\$)		_
	• * *	Payee address; City; State; Zip Code 4850 Bayberry Drive	
	\$234.35	4650 Bayberry Drive	
		Cummings, GA 30040	
	DUDDOCE	<u> </u>	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expanse  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		coasters for campaign	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	1	
			_

### INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 19/19 2 FILER NAME Filer ID (Ethics Commission Filers) Gallagher, Joseph Patrick (The Honorable) 00062521 Date 8 Amount (\$) 5 Name of person from whom amount is received 06/04/2025 Texas Center for the Judiciary \$350.00 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78701 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for Conference Fee Name of person from whom amount is received Amount (\$) Date 02/28/2025 Wells Fargo \$0.01 Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76102 Purpose for which amount is received Check if political contribution returned to filer Interest on Bank Account Date Name of person from whom amount is received Amount (\$) 05/30/2025 Wells Fargo \$0.01 Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76102 Purpose for which amount is received Check if political contribution returned to filer Interest on Bank Account