#### 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) 00087572 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Douglas A. NAME Date Received **ELECTRONICALLY FILED** 07/12/2025 NICKNAME LAST **SUFFIX** Doug Allen CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; 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** Mr. Tim NAME NICKNAME LAST **SUFFIX** Davis **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) 334-7270 **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 Criminal District Court Judge, Tarrant Co. Place 3 Tarrant

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### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Allen, Douglas A. (Th	e Honorable)	<b>14</b> Filer ID 00087572	(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.				
Additional Pages	COMMITTEE TYPE COMMITTEE NAME				
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
 16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS(OTHER THA	 N PLEDGES, LOANS,		
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELI	ECTRONICALLY)	\$ 0.00	
		<b>ICAL CONTRIBUTIONS</b> PLEDGES, LOANS, OR GUARANTEES OF LOAI	NS)	\$ 0.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00	
	4. TOTAL POLIT	CAL EXPENDITURES		<b>\$</b> 551.45	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 20,062.09	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS ASTING PERIOD	S OF THE LAST DAY	\$ 0.00	
<b>17</b> AFFIDAVIT		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.	all information required t		
		The Hon	orable Douglas A. Alle	en	
	lder				
AFFIX NO	TARY STAMP / SEAL AB	DVE			
		aid	, this the	day	
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	r administering oath	

#### SUBTOTALS - JC/OH

#### FORM JC/OH COVER SHEET PG 3

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18 FILER NAME19 Filer ID(Ethics Commission Filers)Allen, Douglas A. (The Honorable)00087572						
	20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE					
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	<b>\$</b> 551.45				
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.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$ 4.12			

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 1/1 Rpt: 4/6	Allen, Douglas A. (The Honorable) 00087572					
4	Date	5 Payee name					
	01/16/2025	Tarrant County Bar Association					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$250.00	1315 Calhoun St.					
		Fort Worth, TX 76102					
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					
		Annual dues					
		/ linual dues					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
	expenditure to benefit C/Ol		_				
	Date	Payee name					
	03/28/2025	Terra Mediterranean					
	Amount (\$)	Payee address; City; State; Zip Code					
\$139.90 2932 Crockett							
		Fort Worth, TX 76107					
	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  Staff lunch					
		Star faller					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
	expenditure to benefit C/O						
_	D :		_				
	Date	Payee name					
05/08/2025		Terra Mediterranean					
	Amount (\$)	Payee address; City; State; Zip Code					
\$161.55		2932 Crockett					
		Fort Worth, TX 76107					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Food/Beverage Expense					
	LA LINDITORE	Check if Austin, TX, officeholder living expense					
		Staff lunch					
	Commisto Chilly's II	Condidate/Officeholder name	_				
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held					
			_				

## INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

#### SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		•	ages Schedule K: /2 Rpt: 5/6	
2				ler ID	(Ethics Commission F	ilers)	
				0087	37572		
4		5 Name of person from whom amount is received				8 Amount (\$)	
	01/07/2025	Frost Bank				(+)	\$0.81
	02,01,2020	6 Address of person from whom amount is received; City; State; Zip Code					+0.02
		Address of person from whom amount is received, City, State, Zip Code					
		Fort Worth, TX 76102					
			Chook if politi	ool	contri	ibution returned to filer	
		interest	check ii politi	Cai	COITE	ibulion returned to mer	
╘		Interest					
	Date	Name of person from whom amount is received				Amount (\$)	
	02/06/2025	Frost Bank					\$0.67
		Address of person from whom amount is received; City; State; Zip Code					
		Fort Worth, TX 76102					
		Purpose for which amount is received	Check if politi	cal	contri	ibution returned to filer	
		interest					
	Date	Name of person from whom amount is received				Amount (\$)	
	03/06/2025	Frost Bank					\$0.62
		Address of person from whom amount is received; City; State; Zip Code					
		, , , , , , , , , , , , , , , , , , ,					
		Fort Worth, TX 76102					
		Purpose for which amount is received	Check if politi	cal	contri	ibution returned to filer	
		interest					
F	Date	Name of person from whom amount is received				Amount (\$)	
	04/04/2025	Frost Bank				(+)	\$0.65
		Address of person from whom amount is received; City; State; Zip Code					,
		Address of person from whom amount is received, City, State, 21p Code					
		Fort Worth, TX 76102					
			heck if noliti	cal	contri	ibution returned to filer	
		interest	check ii politi	cai	COILLI	ibution returned to mer	
⊨							
	Date	Name of person from whom amount is received				Amount (\$)	Φ0.74
	05/06/2025	Frost Bank					\$0.71
		Address of person from whom amount is received; City; State; Zip Code					
		5. 1.W. II. TV 70400					
		Fort Worth, TX 76102					
		_	Check if politi	cal	contri	ibution returned to filer	
L		interest		_			
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: 2/2 Rpt: 6/6 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Allen, Douglas A. (The Honorable) 00087572 5 Name of person from whom amount is received 8 Amount (\$) 06/05/2025 \$0.66 Frost Bank 6 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