

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------------------|---------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------|------------------------------------------------------------|--------------------------------------------------------|
| <b>The JC/OH Instruction Guide explains how to complete this form.</b>                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00051607 | <b>2</b> Total pages filed:<br><br>4                                                                                                                                                             |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME                                                              | MS / MRS / MR FIRST MI<br>The Honorable Tiffany L.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                             | <b>OFFICE USE ONLY</b><br><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>07/14/2025                                                                                                         |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
|                                                                                                     | NICKNAME LAST SUFFIX<br>Haertling                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE<br><br><div style="background-color: black; color: white; text-align: center; padding: 5px;">                     REDACTED PER 254.0313, GOV'T CODE                 </div>                                                                                                                                                                                                                                                                                                                                          |                                                             | Date Hand-delivered or Date Postmarked                                                                                                                                                           |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | Receipt # Amount                                                                                                                                                                                 |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | Date Processed                                                                                                                                                                                   |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | Date Imaged                                                                                                                                                                                      |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>5</b> CAMPAIGN TREASURER NAME                                                                    | MS / MRS / MR FIRST MI<br>Mr. Greg L.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
|                                                                                                     | NICKNAME LAST SUFFIX<br>Haertling                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br><br><div style="background-color: black; color: white; text-align: center; padding: 5px;">                     REDACTED PER 254.0313, GOV'T CODE                 </div>                                                                                                                                                                                                                                                                                                                  |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>7</b> CAMPAIGN TREASURER PHONE                                                                   | AREA CODE PHONE NUMBER EXTENSION<br>(214) 507-2125                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>8</b> REPORT TYPE                                                                                | <table style="width: 100%;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table> |                                                             |                                                                                                                                                                                                  | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | <input checked="" type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) |
| <input type="checkbox"/> January 15                                                                 | <input type="checkbox"/> 30th day before election                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Runoff                             | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)                                                                                                       |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <input checked="" type="checkbox"/> July 15                                                         | <input type="checkbox"/> 8th day before election                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Exceeded modified reporting limit  | <input type="checkbox"/> Final Report (Attach C/OH-FR)                                                                                                                                           |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>9</b> PERIOD COVERED                                                                             | Month Day Year      Month Day Year<br>01/01/2025      THROUGH      06/30/2025                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>10</b> ELECTION                                                                                  | ELECTION DATE<br>Month Day Year<br>11/05/2024                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                             | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input checked="" type="checkbox"/> General <input type="checkbox"/> Special |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                                                                                                  |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |
| <b>11</b> OFFICE                                                                                    | OFFICE HELD (if any)<br>District Judge District 442 Denton                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                             | <b>12</b> OFFICE SOUGHT (if known)                                                                                                                                                               |                                     |                                                   |                                 |                                                                                            |                                             |                                                  |                                                            |                                                        |

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

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|                                                             |                                                           |
|-------------------------------------------------------------|-----------------------------------------------------------|
| <b>13 C / OH NAME</b> Haertling, Tiffany L. (The Honorable) | <b>14 Filer ID</b> (Ethics Commission Filers)<br>00051607 |
|-------------------------------------------------------------|-----------------------------------------------------------|

|                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                |                          |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |                          |
|                                                                                               | <b>COMMITTEE TYPE</b>                                                                                                                                                                                                                                                                                                                                                                          | <b>COMMITTEE NAME</b>    |
|                                                                                               | <input type="checkbox"/> GENERAL                                                                                                                                                                                                                                                                                                                                                               | <b>COMMITTEE ADDRESS</b> |
|                                                                                               | <input type="checkbox"/> SPECIFIC                                                                                                                                                                                                                                                                                                                                                              |                          |
|                                                                                               | <b>COMMITTEE CAMPAIGN TREASURER NAME</b>                                                                                                                                                                                                                                                                                                                                                       |                          |
|                                                                                               | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>                                                                                                                                                                                                                                                                                                                                                    |                          |

|                                |                                                                                                                                      |    |          |
|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----|----------|
| <b>16 CONTRIBUTION TOTALS</b>  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00     |
|                                | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                       | \$ | 0.00     |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES                                                                                           | \$ | 0.00     |
|                                | 4. <b>TOTAL POLITICAL EXPENDITURES</b>                                                                                               | \$ | 0.00     |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD                                               | \$ | 7,809.96 |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                                        | \$ | 0.00     |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                     |                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------|
| <b>17 AFFIDAVIT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                     |                                              |
| <p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p><br><br><div style="display: flex; justify-content: center; align-items: center;"><div style="border-bottom: 1px solid black; width: 200px; margin-right: 10px;"></div><div>The Honorable Tiffany L. Haertling<br/>Signature of Candidate or Officeholder</div></div> |                                                     |                                              |
| <p>AFFIX NOTARY STAMP / SEAL ABOVE</p>                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                     |                                              |
| <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>                                                                                                                                                                                                                                                                                                             |                                                     |                                              |
| _____<br>Signature of officer administering oath                                                                                                                                                                                                                                                                                                                                                                                                                     | _____<br>Printed name of officer administering oath | _____<br>Title of officer administering oath |

**SUBTOTALS - JC/OH****FORM JC/OH  
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|                                                               |                                                                                                             |                                                           |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>18 FILER NAME</b><br>Haertling, Tiffany L. (The Honorable) |                                                                                                             | <b>19 Filer ID</b> (Ethics Commission Filers)<br>00051607 |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE              |                                                                                                             | SUBTOTAL AMOUNT                                           |
| 1.                                                            | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)             | \$ 0.00                                                   |
| 2.                                                            | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$                                                        |
| 3.                                                            | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)                                    | \$                                                        |
| 4.                                                            | <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)                                         | \$ 0.00                                                   |
| 5.                                                            | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$ 0.00                                                   |
| 6.                                                            | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                           | \$                                                        |
| 7.                                                            | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$                                                        |
| 8.                                                            | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$                                                        |
| 9.                                                            | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                             | \$                                                        |
| 10.                                                           | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$                                                        |
| 11.                                                           | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$                                                        |
| 12.                                                           | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                                                        |

# LOANS (JUDICIAL)

## SCHEDULE E(J)

|                                                                                |                                                                                |                                                                                                                        |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>               |                                                                                | <b>1</b> Total pages Schedule E(J):<br>Sch: 1/1 Rpt: 4/4                                                               |
| <b>2</b> FILER NAME<br>Haertling, Tiffany L. (The Honorable)                   |                                                                                | <b>3</b> Filer ID (Ethics Commission Filers)<br>00051607                                                               |
| <b>4</b> TOTAL OF UNITEMIZED LOANS                                             |                                                                                | <b>\$</b> 0.00                                                                                                         |
| <b>5</b> Date of loan                                                          | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | <b>9</b> Loan Amount (\$)                                                                                              |
| <b>6</b> Is lender a financial institution?                                    | <b>8</b> Lender address; City; State; Zip Code                                 | <b>10</b> Interest Rate                                                                                                |
|                                                                                |                                                                                | <b>11</b> Maturity Date                                                                                                |
| <b>12</b> Lender's Principal Occupation                                        |                                                                                | <b>13</b> Lender's Job Title                                                                                           |
| <b>14</b> Lender's Employer/Law Firm                                           |                                                                                | <b>15</b> Law Firm of lender's spouse (if any)                                                                         |
| <b>16</b> If lender is child, law firm of parent(s) (if any)                   |                                                                                |                                                                                                                        |
| <b>17</b> Description of Collateral<br><input type="checkbox"/> None           |                                                                                | <b>18</b> Check if personal funds were deposited into political account (See Instructions)<br><input type="checkbox"/> |
| <b>19</b> GUARANTOR INFORMATION<br><br><input type="checkbox"/> not applicable | <b>20</b> Name of guarantor                                                    | <b>22</b> Amount Guaranteed (\$)                                                                                       |
|                                                                                | <b>21</b> Guarantor address; City; State; Zip Code                             |                                                                                                                        |
| <b>23</b> Guarantor's Principal Occupation                                     |                                                                                | <b>24</b> Guarantor's Job Title                                                                                        |
| <b>25</b> Guarantor's Employer/Law Firm                                        |                                                                                | <b>26</b> Law Firm of guarantor's spouse (if any)                                                                      |
| <b>27</b> If guarantor is child, law firm of parent(s) (if any)                |                                                                                |                                                                                                                        |
|                                                                                |                                                                                |                                                                                                                        |