

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00069291		2 Total pages filed: 8	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable		FIRST David C.	MI	
	NICKNAME		LAST Hagerman	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	
		REDACTED PER 254.0313, GOV'T CODE			
		Date Hand-delivered or Date Postmarked			
		Receipt #		Amount	
		Date Processed			
		Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.		FIRST Richard	MI	
	NICKNAME		LAST Roper	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
	REDACTED PER 254.0313, GOV'T CODE				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(817)	347-1700			
8 REPORT TYPE	<input checked="" 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 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)				
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
		07/01/2025			12/31/2025
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special <input checked="" type="checkbox"/> Other I am retired and am a senior judge.
11 OFFICE	OFFICE HELD (if any) Senior Judge Tarrant			12 OFFICE SOUGHT (if known) None District 297	

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
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13 C / OH NAME Hagerman, David C. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00069291
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15 NOTICE FROM POLITICAL COMMITTEE(S) <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.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	13,395.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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.

The Honorable David C. Hagerman

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH
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18 FILER NAME Hagerman, David C. (The Honorable)		19 Filer ID (Ethics Commission Filers) 00069291	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	4,552.62
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	653.80

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/4 Rpt: 4/8	2 FILER NAME Hagerman, David C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069291
4 Date 08/18/2025	5 Payee name Amazon	
6 Amount (\$) 32.46	7 Payee Address; City; State; Zip 440 Perry Ave North Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) mistaken payment	(b) Description (See instructions regarding type of information required.) this payout was mistakenly made by Amazon and has been reimbursed on 01/14/2026
Date 09/26/2025	Payee name Colleyville Lions	
Amount (\$) 250.00	Payee Address; City; State; Zip P.O. Box 536 Colleyville, TX 76034-0000	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) charitable contribution
Date 12/15/2025	Payee name Colleyville Lions	
Amount (\$) 190.00	Payee Address; City; State; Zip P.O. Box 536 Colleyville, TX 76034-0000	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) charitable contribution
Date 07/31/2025	Payee name Frankford Middle School	
Amount (\$) 129.86	Payee Address; City; State; Zip 7706 Osage Plaza Parkway Dallas, TX 75252	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) charitable contribution to a middle school for school supplies purchased from Amazon

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/4 Rpt: 5/8	2 FILER NAME Hagerman, David C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069291
4 Date 07/31/2025	5 Payee name Franklin Middle School	
6 Amount (\$) 47.62	7 Payee Address; City; State; Zip 7706 Osage Plaza Parkway Dallas, TX 75252	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) Charitable contribution to middle school for school supplies
Date 09/08/2025	Payee name JW Marriot	
Amount (\$) 1,036.41	Payee Address; City; State; Zip 110 E 2nd St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) judicial conference	(b) Description (See instructions regarding type of information required.) attendance expenses to be partially reimbursed
Date 08/08/2025	Payee name Lucas Funeral Home	
Amount (\$) 289.02	Payee Address; City; State; Zip 700 W Wall St Grapevine, TX 76051	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) funeral flowers
Date 08/01/2025	Payee name Meat You Anywhere	
Amount (\$) 1,600.00	Payee Address; City; State; Zip 919 W Northwest Hwy Grapevine, TX 76051	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) attendees' lunch/food/beverages	(b) Description (See instructions regarding type of information required.) lunch/food/beverages for attendees at my portrait hanging at my former court 297th District Court.

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/4 Rpt: 6/8	2 FILER NAME Hagerman, David C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069291
4 Date 12/24/2025	5 Payee name Meat You Anywhere	
6 Amount (\$) 238.69	7 Payee Address; City; State; Zip 919 W Northwest Hwy Grapevine, TX 76051	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) breakfast for Grapevine Police Department officers who had to work on Christmas eve
Date 12/05/2025	Payee name North Texas Aisling	
Amount (\$) 300.00	Payee Address; City; State; Zip po box 1015 Hurst, TX 76053	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) charitable contribution
Date 12/04/2025	Payee name Office Depot	
Amount (\$) 31.38	Payee Address; City; State; Zip 1317 State Hwy. 114 West Grapevine, TX 76051	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) stamp	(b) Description (See instructions regarding type of information required.) "sitting by assignment" visiting judge stamp
Date 09/10/2025	Payee name Texas District and County Attorney Association	
Amount (\$) 107.18	Payee Address; City; State; Zip 505 W. 12th St., Ste 100 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) book purchase	(b) Description (See instructions regarding type of information required.) TDCAA reference book: Texas Penal Code and Texas Code of Criminal Procedure, et al annotated

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/4 Rpt: 7/8	2 FILER NAME Hagerman, David C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069291
4 Date 12/05/2025	5 Payee name Traffick911	
6 Amount (\$) 300.00	7 Payee Address; City; State; Zip 4575 Claire Chennault St Addison, TX 75001-5322	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required.) charitable contribution

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 8/8

2 FILER NAME

Hagerman, David C. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00069291

4 Date

08/18/2025

5 Name of person from whom amount is received

8th Administrative Judicial District

8 Amount (\$)

\$75.00

6 Address of person from whom amount is received; City; State; Zip Code

Ft. Worth, TX 76196

7 Purpose for which amount is received

reimbursement for previous judicial conference

☐ Check if political contribution returned to filer

Date

09/30/2025

Name of person from whom amount is received

8th Administrative Judicial District

Amount (\$)

\$578.80

Address of person from whom amount is received; City; State; Zip Code

Ft. Worth, TX 76196

Purpose for which amount is received

partial reimbursement for judicial conference

☐ Check if political contribution returned to filer