



Form No. BPC-2024

Board of Professional Conduct of the Supreme Court of Ohio

**FINANCIAL DISCLOSURE STATEMENT**This statement is to be filed in 2025  
Financial information for calendar year 2024

Please type or print clearly. See instructions for assistance with this page.

**SECTION A. PERSONAL CONTACT INFORMATION**

Last Name

Gallagher

First Name

Eileen

MI

A

Address

[REDACTED]

City

[REDACTED]

State

[REDACTED]

Zip

[REDACTED]

County

[REDACTED]

E-mail Address

[REDACTED]

Phone

( )

**SECTION B. STATUS (Check all that apply)**

- ☒ Judge  
☐ Retired Judge  
☐ Magistrate  
☐ Appointed to an unexpired term in elective office  
☐ Judicial Candidate  
☐ Other (specify) \_\_\_\_\_

**CANDIDATES:** Please list the date of the first election (primary, special, or general) when your name will appear on the ballot.

Month	Day	Year

**FILED**

Online

**1/3/2025**

10:57 AM

Confirm #: 1001251457033

**SECTION C. PUBLIC POSITION, OFFICE, OR JOB**

Position/Title (Example: judge, retired judge, or magistrate)

Judge

- ☐ Seeking  
☒ Hold  
☐ Held

Public Entity you serve in 2025, served in 2024, or will serve if elected

Eighth District Court of Appeals

Public Salary:

- ☐ Less than \$16,000  
☐ \$16,000 or more

Start Date:

Month	Day	Year
0	2	0 9 2 0 2 3

End Date:

Month	Day	Year
0	2	0 8 2 0 2 8

**SECTION D. ADDITIONAL PUBLIC POSITION, OFFICE, OR JOB**

Position/Title

[REDACTED]

- ☐ Seeking  
☐ Hold  
☐ Held

Public Entity in which you were/are an official, employee, candidate, or appointee

[REDACTED]

Public Salary:

- ☐ Less than \$16,000  
☐ \$16,000 or more

Start Date:

Month	Day	Year

End Date:

Month	Day	Year

**FOR OFFICIAL USE ONLY**

- ☐ Walk-in  
☐ Fax  
☐ Mail  
Rev'd by: \_\_\_\_\_

- ☒ Filer has answered every required question.  
☐ Filer has not answered these questions: \_\_\_\_\_

Date incomplete form returned to filer: \_\_\_\_\_  
Date completed form returned: \_\_\_\_\_

**1. SOURCES OF INCOME - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☐ I have no sources of income that I am required to list.

Source of Income	Service Provided	Amount*
A See Attachment		
B		
C		
D		
E		

\*If required. See instructions to see if you are required to disclose amounts of income.

**2. SOURCES OF GIFTS - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☒ I have no sources of gifts that I am required to list.

Source of Gift	Source of Gift
A	D
B	E
C	F

**3. NAMES OF SPOUSE RESIDING IN HOUSEHOLD AND ANY DEPENDENT CHILDREN - ALL FILERS MUST ANSWER THIS QUESTION:**☒ There are no immediate family members whose names I am required to list.

For help, see instructions

Spouse Residing in Household	Dependent Children

**4. NAMES OF BUSINESSES - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

If you or anyone you listed in Question 3 owns or operates a business, list the name of the business.

☒ There are no business names that I am required to list.

Business Name	Business Name
A	C
B	D

**5. LAND (REAL ESTATE) IN OHIO - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☒ I have no real estate that I am required to list.

Land (Real Estate) in Ohio (List address or, if address is unavailable, plat number and county)
A
B
C
You are not required to disclose your personal residence or real property held primarily for personal recreation.

**6. CREDITORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☐ I have no creditors that I am required to list.

Creditor	Creditor
A Chase Bank	D
B	E
C	F

**7. DEBTORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☒ I have no debtors that I am required to list.

Debtor	Debtor
A	C
B	D

**8. INVESTMENTS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☐ I have no investments that I am required to list.

Corporation, Trust, Business Trust, Partnership, or Association	Nature of Investment
A See Attachment	
B	
C	
D	
E	
F	

**IF YOU NEED ADDITIONAL SPACE, PLEASE ATTACH A SEPARATE SHEET****9. OFFICES/FIDUCIARY RELATIONSHIPS - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☒ I have no offices or fiduciary relationships that I am required to list.

Corporation, Trust, Business Trust, Partnership, or Association	Office or Nature of Relationship
A	
B	

**10. MEALS, FOOD, OR BEVERAGES - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☐ I have no sources of meals, food, or beverages that I am required to list.

Source of Food or Beverages	Source of Food or Beverages
A National Foundation for Judicial Excellence	C
B	D

**11. TRAVEL EXPENSES - ALL FILERS MUST ANSWER THIS QUESTION:**

For help, see instructions

☐ I have no sources of travel expenses that I am required to list.

Source of Travel Expenses	Amount
A National Foundation for Judicial Excellence	\$1,415.17
B	
C	
D	
E	
F	

**12. NON-DISPUTED INFORMATION - ALL state employees, state officials and state board and commission members (except college and university trustees) are REQUIRED to answer Question 12.** All other filers should skip this question and go to question 13.☒ I have no information that I am required to list.

For help, see instructions

Non-Disputed Information
A
B

**13. SIGNATURE - ALL FILERS MUST SIGN THE STATEMENT:**

For help, see instructions

By signing this statement:

- I swear or affirm that this statement and any additional attachments have been prepared or carefully reviewed by me, and constitute my complete, truthful, and correct disclosure of all required information, and that the address listed on page 1 is a correct mailing address.
- I acknowledge and understand that, among other potential violations and penalties, knowingly filing a false statement is a criminal misdemeanor of the first degree, punishable by a fine of not more than \$1,000, imprisonment of not more than six months, or both, and that I may be subject to disciplinary action.
- I acknowledge and understand that filing a false statement may be grounds for removal from public office or dismissal from public employment pursuant to Sections 3.04 and 124.34 of the Revised Code.
- I acknowledge that, in 2024, I served in, or in 2025, I am serving in or a candidate for, the position indicated on page 1 of this statement.

**If you have any questions before signing this form, please contact the Board of Professional Conduct at (614) 387-9370.**

Before signing this statement, please review to make sure that you have answered each question you are required to answer. If you have nothing to list in response to any question, check the box indicating that you have nothing to list. If the response to any required question is omitted, the Board will return the statement to you as incomplete. **Any person who fails to file a complete statement by the appropriate filing deadline may be subject to criminal penalties and disciplinary action.**

**Return your completed statement to:** Board of Professional Conduct, Moyer Judicial Center, 65 South Front Street, 5th Floor, Columbus, Ohio 43215

**YOUR SIGNATURE IS REQUIRED HERE:***Eileen A. Gallagher***Date:** 1/3/2025 10:57 AM

Confirmation Number: 1001251457033

Source of Income		Service Provided	Amount* (if required)
1	State of Ohio	Judge	
2	OPERS	Retirement Benefits	
3	Chase Bank	Interest on savings/CD	
4	Fidelity Select Pharmaceutical	dividends	
5	Intel	dividends	
6	Wells Fargo	dividends	
7	Timken co.	dividends	
8	Johnson & Johnson	dividends	
9	Chevron Corp	dividends	
10	Microsoft	dividends	
11	Oakmark Fund I	dividends and capital gains	
12	Steris Corporation	dividends	
13	JP Morgan Chase	brokerage account	
14	Bristol Myers Squib	dividends	
15	Apple	dividends	
16	Eaton Corporation	dividends	
17	Phillips 66	dividends	
18	Fdelity Select Biotechnology	dividends	
19	Acceleron Pharma	dividends	
20	Corteva Inc	dividends	
21	Costco	dividends	
22	Dow	dividends	
23	Dupont	dividends	
24	Proctor and Gamble	dividends	
25	Fidelity Select Biotechnology	dividends	
26	Occidental Pete Corp	dividends	
27	TAL Education Group	dividends	
28	Amazon	dividends	
29	Johnson Control	dividends	
30	AGNC Int. Corp	dividends	
31	Agios Pharmaceuticals	dividends	
32	Glaxo	dividends	
33	Wells Fargo	dividends	
* Check <a href="#">instructions</a> to see whether you are required to disclose amounts of income.			

Corporation, Trust, Business Trust, Partnership, or Association		Nature of Investment
1	Ohio DC Stable Value Option	Deferred Compensation Investment
2	Ohio DC Lifepath2020	Deferred Compensation Investment
3	Dodge and Cox	Deferred Compensation Investment
4	FPA Capital	Deferred Compensation Investment
5	Vanguard	Deferred Compensation Investment
6	Fidelity	Stock/Roth IRA
7	Intel Corporation	common stock
8	Microsoft	common stock
9	Dow Chemical	common stock
10	Timken Company	common stock
11	Johnson Controls	common stock
12	Johnson and Johnson	common stock
13	Wells Fargo	common stock
14	Bristol Meyers Squibb	common stock
15	Chevron	common stock
16	Eaton Corporation	common stock
17	Steris Corporation	common stock
18	GlaxoSmithKlein	common stock
19	Apple	common stock
20	Oakmark Fund I	common stock
21	JP Morgan Chase	brokerage account/Roth IRA
22	Olin Corp	common stock
23	TAL Education Group	common stock
24	Phillips 66	common stock
25	Amazon	common stock
26	Fidelity FPHAX	common stock
27	Adient PLC	common stock
28	Occidental Rite Corp	common stock
29	Oakmark fund I	common stock
30	Dow	common stock
31	Dupont	common stock
32	Acceleron Pharma	common stock
33	Costco	common stock
34	Proctor and Gamble	common stock
35	Corteva Inc	common stock

[illegible]