

**FINANCIAL DISCLOSURE REPORT
FOR CALENDAR YEAR 2019**

*Report Required by the Ethics
in Government Act of 1978
(5 U.S.C. app. §§ 101-111)*

1. Person Reporting (last name, first, middle initial) Hercher, David W.	2. Court or Organization U.S. Bankruptcy Court District of Oregon	3. Date of Report 06/14/2020
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) U.S. Bankruptcy Judge	5a. Report Type (check appropriate type) ☐ Nomination ☐ Date ☐ Initial ☒ Annual ☐ Final	6. Reporting Period 01/01/2019 to 12/31/2019
	5b. ☐ Amended Report	
7. Chambers or Office Address 1050 S.W. Sixth Avenue #700 Portland, OR 97204		
IMPORTANT NOTES: <i>The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information.</i>		

I. POSITIONS. *(Reporting individual only; see pp. 9-13 of filing instructions)*

☐ NONE *(No reportable positions.)*

POSITION

NAME OF ORGANIZATION/ENTITY

1.	
2. Director	Federal Bar Association, Oreogn Chapter
3.	
4.	
5.	

II. AGREEMENTS. *(Reporting individual only; see pp. 14-16 of filing instructions)*

☒ NONE *(No reportable agreements.)*

DATE

PARTIES AND TERMS

1.	
2.	
3.	

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III. NON-INVESTMENT INCOME. (Reporting individual and spouse; see pp. 17-24 of filing instructions)

A. Filer's Non-Investment Income



NONE (No reportable non-investment income.)

<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u> (yours, not spouse's)
1.		
2.		
3.		
4.		

B. Spouse's Non-Investment Income - If you were married during any portion of the reporting year, complete this section.

(Dollar amount not required except for honoraria.)



NONE (No reportable non-investment income.)

<u>DATE</u>	<u>SOURCE AND TYPE</u>
1.	
2. 2019	Warren & Sugarman; lawyer salary
3.	
4.	

IV. REIMBURSEMENTS -- transportation, lodging, food, entertainment.

(Includes those to spouse and dependent children; see pp. 25-27 of filing instructions.)



NONE (No reportable reimbursements.)

<u>SOURCE</u>	<u>DATES</u>	<u>LOCATION</u>	<u>PURPOSE</u>	<u>ITEMS PAID OR PROVIDED</u>
1.				
2.				
3.				
4.				
5.				

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V. GIFTS. (Includes those to spouse and dependent children; see pp. 28-31 of filing instructions.)

☒ NONE (No reportable gifts.)

	SOURCE	DESCRIPTION	VALUE
1.			
2.			
3.			
4.			
5.			

VI. LIABILITIES. (Includes those of spouse and dependent children; see pp. 32-33 of filing instructions.)

☐ NONE (No reportable liabilities.)

	CREDITOR	DESCRIPTION	VALUE CODE
1.	Chase Bank	Credit card	J
2.	U.S. Department of Education	Student loan	M
3.			
4.			
5.			

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VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B Income during reporting period		C Gross value at end of reporting period		D Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e g , div , rent, or int)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e g , buy, sell, redemption)	(2) Date mm/dd/yy	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
1. Fidelity Investments (H)									
2. - Fidelity Government Money Market #1 (money market fund)	A	Interest	K	T	Buy	12/09/19	K		Fidelity Investments
3. - Fidelity Government Money Market #2 (money market fund)	B	Interest	P1	T	Buy	12/10/19	P1		Fidelity Investments
4. Hartford Funds : Growth Opportunities Fd- A (mutual fund)	D	Dividend	M	T					
5. Key Bank : IRA cash equivalent	A	Interest	J	T					
6. Northwestern Mutual Life Insurance Company (H)									
7. - Access Fund cash account	B	Interest	K	T					
8. - Adjustable Complife #1	A	Dividend	J	T					
9. - Adjustable Complife #2	B	Dividend	J	T					
10. - Adjustable Complife #3	A	Dividend	J	T					
11. - 65 Life Policy	A	Dividend	J	T					
12. - Whole Life Policy	A	Dividend	J	T					
13. Oregon College Savings Plan : FDIC Guaranteed Portfolio	A	Interest	J	T					
14. Oregon Public Employees Retirement System : Retiremwnt	B	Interest	K	T					
15. Standard Insurance Company (H)									
16. - Dodge & Cox Balanced (mutual fund)	D	Dividend			Buy (add'l)	03/27/19	J		Standard Insurance Company
17.	B	Dividend			Buy (add'l)	06/26/19	J		Standard Insurance Company

1 Income Gain Codes: (See Columns B1 and D4)	A =\$1,000 or less F =\$50,001 - \$100,000 J =\$15,000 or less N =\$250,001 - \$500,000 P3 =\$25,000,001 - \$50,000,000	B =\$1,001 - \$2,500 G =\$100,001 - \$1,000,000 K =\$15,001 - \$50,000 O =\$500,001 - \$1,000,000	C =\$2,501 - \$5,000 H1 =\$1,000,001 - \$5,000,000 L =\$50,001 - \$100,000 P1 =\$1,000,001 - \$5,000,000 P4 =More than \$50,000,000	D =\$5,001 - \$15,000 H2 =More than \$5,000,000 M =\$100,001 - \$250,000 P2 =\$5,000,001 - \$25,000,000	E =\$15,001 - \$50,000
2 Value Codes (See Columns C1 and D3)	Q =Appraisal U =Book Value	R =Cost (Real Estate Only) V =Other	S =Assessment W =Estimated	T =Cash Market	
3 Value Method Codes (See Column C2)					

VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B Income during reporting period		C Gross value at end of reporting period		D Transactions during reporting period				
	(1)	(2)	(1)	(2)	(1)	(2)	(3)	(4)	(5)
	Amount Code 1 (A-H)	Type (e g , div , rent, or int)	Value Code 2 (J-P)	Value Method Code 3 (Q-W)	Type (e g , buy, sell, redemption)	Date mm/dd/yy	Value Code 2 (J-P)	Gain Code 1 (A-H)	Identity of buyer/seller (if private transaction)
18.	B	Dividend			Buy (add'l)	09/26/19	J		Standard Insurance Company
19.					Redeemed	12/05/19	M	E	Standard Insurance Companu
20. - T. Rowe Price I 2040 I (mutual fund)		None			Redeemed	09/03/19	P1	F	Stanard Insurance Company
21. - T. Rowe Price 2040 TrA (mutual fund)		None			Buy	09/03/19	P1		Standard Insurance Company
22.					Redeemed	12/05/19	P1	F	Standard Insurance Company
23. US Agencies FCU : Share Account	A	Interest	J	T					
24. U.S. Bank National Association : checking account	A	Interest	J	T					

1 Income Gain Codes: (See Columns B1 and D4)	A =\$1,000 or less F =\$50,001 - \$100,000	B =\$1,001 - \$2,500 G =\$100,001 - \$1,000,000	C =\$2,501 - \$5,000 H1 =\$1,000,001 - \$5,000,000	D =\$5,001 - \$15,000 H2 =More than \$5,000,000	E =\$15,001 - \$50,000
2 Value Codes (See Columns C1 and D3)	J =\$15,000 or less N =\$250,001 - \$500,000 P3 =\$25,000,001 - \$50,000,000	K =\$15,001 - \$50,000 O =\$500,001 - \$1,000,000	L =\$50,001 - \$100,000 P1 =\$1,000,001 - \$5,000,000 P4 =More than \$50,000,000	M =\$100,001 - \$250,000 P2 =\$5,000,001 - \$25,000,000	
3 Value Method Codes (See Column C2)	Q =Appraisal U =Book Value	R =Cost (Real Estate Only) V =Other	S =Assessment W =Estimated	T =Cash Market	

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. *(Indicate part of report.)*

Part IV.

In my 2020 report, part IV. will report reimbursement in 2020 by the American Board of Certification of \$626.60 for my travel to and speaking at the Annual Spring Meeting of the American Bankruptcy Institute in Washington, D.C., on April 11-14, 2019.

Part VII.

Bank of America : checking account does not appear in this 2019 report because at 12/31/2019 its balance was less than \$1,000.

15-23. Standard Insurance Company - Dodge & Cox Balanced (mutual fund), T. Rowe Price Retire 2040 TrA (mutual fund), and T. Rowe Price Retire I 2040 I (mutual fund) were held through Standard Insurance Company as custodian for Miller Nash Graham & Dunn LLP 401(k) Plan and Trust., for which trustee was Charles Schwab Bank.

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IX. CERTIFICATION.

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature: s/ **David W. Hercher**

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILLFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

Committee on Financial Disclosure
Administrative Office of the United States Courts
Suite 2-301
One Columbus Circle, N.E.
Washington, D.C. 20544