JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

OFFICEHOLDER NAME Mr. Ryan A. Due Force USE ONCY OPFICEHOLDER NAME Mr. Ryan A. Due Force USE ONCY OPFICEHOLDER NCKNAME LAST Luna SUFFIX O7/02/2024 CANDIDATE / OFFICEHOLDER MALING ADDRESS / PO BOX: APT / SUITE #; CITY: ZIP CODE Date Hand-delivered or Date Postmarked Change of Address ADDRESS / PO BOX: APT / SUITE #; CITY: ZIP CODE Date Hand-delivered or Date Postmarked Change of Address REDACTED PER 254.0313, GOVT CODE Date Processed Date Processed Change of Address MS / MRS / MR FIRST MI NAME LAST Scott J. Date Processed InckNAME LAST SUFFIX SUFFIX Street ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; ZIP CODE CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE CITY; STATE; ZIP CODE CAMPAIGN RECACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE STATE; ZIP CODE REDACTED PER 254.0313, GOVT CODE	The JC/OH Instruction	Guide explains how to comple		L Filer ID (Ethics Commis 00088281	sion Filers)	2 Total pages f	iled: 17
OH-RCEHOLDER NAME Mr. Ryan A. Date Received ELECTRONICALLY FILED 07/02/2024 I CANDIDATE / OFFICEHOLDER NALING ADDRESS ADDRESS / PO BOX: APT / SUITE #; CITY; OFFICEHOLDER NALING ADDRESS ADDRESS / PO BOX: APT / SUITE #; CITY; REDACTED PER 254.0313; GOVT CODE Date Hand delivered or Date Positionited Moniput # Date Processed I Campa of Address REDACTED PER 254.0313; GOVT CODE Date Frageed Moniput # Moniput # Date Processed I Campa of Address MS / MRS / MR FIRST Mr. Mi I CAMPAIGN TREASURER ADDRESS (Peodence or Business) MS / MRS / MR FIRST Mr. MI NICKNAME LAST Saltmans SUFFIX MI I CAMPAIGN TREASURER PHONE STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE STATE; ZIP CODE I CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION I REPORT TYPE January 15 30th day before election Runoff 13th day after campaign treasurer uppontiments (ufficientuation only) I DEPORD Month Day Year Disceedent modified Plear Report (Attach CIOH FR) I DEPORD Month Day Year Month Day Year Planeer I DEPORD Month Day <th>3 CANDIDATE /</th> <th>MS / MRS / MR</th> <th>IRST</th> <th></th> <th>MI</th> <th></th> <th></th>	3 CANDIDATE /	MS / MRS / MR	IRST		MI		
INICKNAME LAST SUFFIX 07/02/2024 CANDIDATE/ OFFICEHOLDER MALING ADDRESS ADDRESS / PO BOX: APT / SUITE #; CITY; ZIP CODE Date Hard-delivered or Date Protomarked Charge of Address REDACTED PER 254.0313, GOVT CODE Date Hard-delivered or Date Protomarked Date Instructure Charge of Address MS / MRS / MR FIRST MI TREASURER NAME MS / MRS / MR FIRST MI INICKNAME LAST SUFFIX SUFFIX StreET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE CAMPAGN TREASURER NADRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE CAMPAGN TREASURER NADRESS AREA CODE PHONE NUMBER EXTENSION EXECUTED PER 254.0313, GOVT CODE Exceeded modified India value campaign breasurer appointment (Michobder on); * CAMPAGN TYPE January 15 Job day before election Runoft ISM day after campaign breasurer appointment (Michobder on); * July 15 It they before election Exceeded modified Final Report (Attach COH+FR) * PERIOD COVERED Month <td< td=""><td>OFFICEHOLDER</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	OFFICEHOLDER						
INICKNAME LAST SUFFIX 07/02/2024 CANDIDATE/ OFFICEHOLDER MALING ADDRESS ADDRESS / PO BOX: APT / SUITE #; CITY; ZIP CODE Date Hard-delivered or Date Protomarked Charge of Address REDACTED PER 254.0313, GOVT CODE Date Hard-delivered or Date Protomarked Date Instructure Charge of Address MS / MRS / MR FIRST MI TREASURER NAME MS / MRS / MR FIRST MI INICKNAME LAST SUFFIX SUFFIX StreET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE CAMPAGN TREASURER NADRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE CAMPAGN TREASURER NADRESS AREA CODE PHONE NUMBER EXTENSION EXECUTED PER 254.0313, GOVT CODE Exceeded modified India value campaign breasurer appointment (Michobder on); * CAMPAGN TYPE January 15 Job day before election Runoft ISM day after campaign breasurer appointment (Michobder on); * July 15 It they before election Exceeded modified Final Report (Attach COH+FR) * PERIOD COVERED Month <td< td=""><td></td><td></td><td></td><td></td><td></td><td>ELECTRONIC</td><td>ALLY FILED</td></td<>						ELECTRONIC	ALLY FILED
CANDIDATE / OFFICEHOLDER MALING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; OFFICEHOLDER MALING ADDRESS ZIP CODE REDACTED PER 254.0313, GOVT CODE Date Haad-delivered of Date Postmaniand Receipt #			A CT				
I CANDIDATE / OFFICEHOLDER MALING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; PERIOHOLDER MALING ADDRESS ZIP CODE Date Hand delevered or Date Postmarked Hooget # Annount I Change of Address REDACTED PER 254.0313, GOVT CODE Net Mail NG Date Processed Date Processed I Change of Address MS / MRS / MR FIRST Mr. MI I CAMPAIGN TREASURER NAME MS / MRS / MR FIRST Solt J. MI I CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; ZIP CODE I CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION EXTENSION STATE; ZIP CODE I REPORT TYPE January 15 30th day before election Date date frequenting limit I Sth day after campaign reasurer appointment (diffeebidier only) I DERFORD Month Day Year O1/01/2024 Month Day Year O6/30/2024 I OFFICE OFFICE HELD (ff any) 12 OFFICE SOUGHT (ff known) I2 OFFICE SOUGHT (ff known)					SUFFIX	01/02/2021	
OFFICEHOLDER MALING ADDRESS Institution of both, if if house, if if if other maged Institution of both, if if house, if if if other maged Change if Address MS / MRS / MR FIRST Mi TREASURER NAME MS / MRS / MR FIRST Mi NAME LAST Salmans SUFFIX SUFFIX CAMPAIGN TREASURER NAME STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE CAMPAIGN TREASURER NADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE STATE; ZIP CODE CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION Exceeded modified Final Report (Attach COH+FR) PERIOD COVERED Month Day Year Month Day Year 0 ELECTION ELECTION DATE ELECTION TYPE Other Other Special Other 1 OFFICE OFFICE HELD (frany) 12 OFFICE SOUGHT (franyn) 12 OFFICE SOUGHT (franyn) 12 OFFICE Defice <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>							
ADDRESS REDACTED PER 254.0313, GOVT CODE Receipt d mount Change of Address MS / MRS / MR FIRST MI TREASURER MS / MRS / MR FIRST MI NAME Mr. Scott J. MI NICKNAME LAST SUFFIX Salmans SUFFIX State: CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE Resolutionso REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE APT / SUITE #; CITY; STATE; ZIP CODE CAMPAIGN TREASURER AREA CODE PHONE NUMBER EXTENSION Exceeded modified Isin day after campaign treasurer appointment (dificeholder only) PHONE (254) 715-1750 30th day before election Runoff Isin day after campaign treasurer appointment (dificeholder only) REPORT July 15 8th day before election Runoff Isin day after campaign treasurer appointment (dificeholder only) VERIOD Month Day Year O(J/01/2024 THROUGH 06/30/2024 VERIOD ELECTION DATE Month<	OFFICEHOLDER	ADDRESS / PO BOX; APT / S	SUITE #; CITY	, ,	ZIP CODE		
□ Change of Address □ □ Date Processed □ CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI N Mr. Scott J. MI NICKNAME LAST SUFFIX Salmans SUFFIX CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; ZIP CODE CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION EEDACTED PER 254.0313; GOVT CODE CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION Estit day after campaign treasurer appointment (discholder only) I January 15 □ 30th day before election Runoff Isin day after campaign treasurer appointment (discholder only) I July 15 □ ath day before election Exceeded modified Final Report (Attach CIOH-FR) PERIOD COVERED Month Day Year Ol/01/2024 THROUGH Obj30/2024 I DELECTION DATE Primary ELECTION TYPE Other Other I OFFICE Month Day Year Pr		REDACTED PER 254.03	313, GOV'T CO	ODE		Receipt #	Amount
CAMPAIGN TREASURER NAME MS / MRS / MR FIRST Mr. MI Image: Comparison of the second sec	Change of Address						
i CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Mr. Scott J. MI NICKNAME LAST Salmans SUFFIX i CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY: STATE; ZIP CODE I CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION I REPORT January 15 30th day before election Runoff ISth day after campaign treasurer appointment (officieholdier only) I TYPE January 15 30th day before election Exceeded modified Final Report (Attach C/OH-FR) I DELECTION Day Year Of/30/2024 Of/30/2024 Of/30/2024 I DEFICE OFFICE HELD (if any) I2 OFFICE SOUGHT (if known) Defice Sought (if known)						Date Processed	
TREASURER NAME Mr. Scott J. NICKNAME LAST SUFFIX Salmans SUFFIX GCAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE CAMPAIGN TREASURER PHONE AREA CODE (254) 715-1750 PHONE NUMBER EXTENSION EXTENSION REPORT TYPE January 15 January 15 January 15 30th day before election Runoff Exceeded modified reporting limit ISth day after campaign treasurer appointment (officeholder only) PERIOD COVERED Month Day Year Year Month Day Year 0 ELECTION ELECTION DATE Month ELECTION TYPE Sencial Other 1 OFFICE OFFICE HELD (f any) Iz OFFICE SOUGHT (f known)						Date Imaged	
NAME Mr. Scott J. NICKNAME LAST SUFFIX Salmans SUFFIX CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE REPART CAMPAIGN AREA CODE PHONE NUMBER EXTENSION Isth day after campaign treasurer appointment (officeholder only) REPORT January 15 30th day before election Runoff Isth day after campaign treasurer appointment (officeholder only) REPORT Jaly 15 8th day before election Exceeded modified Final Report (Attach C/OH+FR) PERIOD Month Day Year 06/30/2024 06/30/2024 PERIOD ELECTION DATE ELECTION TYPE Other Other 1/05/2024 Year Primary Runoff Other 1/05/2024 OFFICE HELD (f any) I2 OFFICE SOUGHT (f known) Special		MS/MRS/MR F	IRST			MI	
Salmans CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOVT CODE CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified reporting limit Final Report (Attach C/OH-FR) PERIOD COVERED Month Day Year Month Day Year 0 ELECTION ELECTION DATE Month Primary ELECTION TYPE Special Other Other 1 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 12 OFFICE SOUGHT (if known)		Mr. S	Scott J.				
Salmans SCAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOVT CODE CAMPAIGN TREASURER PHONE AREA CODE (254) 715-1750 REPORT TYPE January 15 January 15 30th day before election Bth day before election Exceeded modified (pointment (officeholder only)) July 15 Bth day before election PERIOD COVERED Month Day Year 01/01/2024 THROUGH Month Day Year 11/05/2024 I OFFICE OFFICE HELD (if any)			Λςτ				
i CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOVT CODE REDACTED PER 254.0313, GOVT CODE i REDACTED PER 254.0313, GOVT CODE i CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION i CEPORT (254) 715-1750 Bit day before election Runoff Isth day after campaign treasurer appointment (officeholder only) i January 15 Bith day before election Exceeded modified Final Report (Attach C/OH-FR) i PERIOD Month Day Year Month Day Year i PERIOD Month Day Year HROUGH Month Day Year i DELECTION ELECTION DATE Primary ELECTION TYPE Other i J105/2024 Perimary Runoff Other Other i OFFICE HELD (if any) I2 OFFICE SOUGHT (if known) I2 OFFICE SOUGHT (if known)						JUFFIX	
TREASURER ADDRESS (Residence or Business) REDACTED PER 254.0313, GOV'T CODE CAMPAIGN TREASURER PHONE AREA CODE (254) 715-1750 PHONE NUMBER EXTENSION REPORT TYPE			aimans				
REDACTED PER 254.0313, GOVT CODE (Residence or Business) AREA CODE PHONE NUMBER EXTENSION (ZAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (254) 715-1750 (254) 715-1750 Image: Comparison of the compa	TREASURER	STREET ADDRESS (NO PO B	OX PLEASE);	APT	/ SUITE #; CITY	;; ST	ATE; ZIP CODE
(resublice of business) AREA CODE PHONE NUMBER EXTENSION 7 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION 8 REPORT (254) 715-1750 15th day after campaign treasurer appointment (officeholder only) 8 REPORT Image: state stat	ADDRESS						
TREASURER PHONE (254) 715-1750 REPORT TYPE	(Residence or Business)	REDACTED PER 254.0	313, GOV I CO	JDE			
TREASURER PHONE (254) 715-1750 REPORT TYPE							
PHONE Image: Second			NUMBER EX	XTENSION			
TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) X July 15 8th day before election Exceeded modified reporting limit Final Report (Attach C/OH-FR) PERIOD COVERED Month Day Year THROUGH Month Day Year 0 ELECTION ATE Month Day Year O6/30/2024 Year 0 ELECTION Day Year Primary ELECTION TYPE Other 11/05/2024 Year Primary Special Other 1 OFFICE DFICE HELD (if any) 12 OFFICE SOUGHT (if known)	PHONE	(234) 713-1730					
Image: Standary 10 million of the standary 1	8 REPORT						
Image: Style styl	TYPE	January 15	30th day before e	election	Runoff		
D PERIOD COVERED Month Day Year 01/01/2024 THROUGH Month Day Year 01/01/2024 THROUGH 06/30/2024 06/30/2024 0 ELECTION DATE ELECTION TYPE Other 11/05/2024 Primary Runoff Other 1 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)			9th day before a				
COVERED 01/01/2024 THROUGH 06/30/2024 0 ELECTION ELECTION DATE ELECTION TYPE Month Day Year Primary 11/05/2024 X General Special Special			Sui day belore ei		reporting limit	Final Report (Au	ach C/OH-FR)
0 ELECTION DATE ELECTION TYPE Month Day Year 11/05/2024 Primary Runoff 1 OFFICE OFFICE HELD (if any)		Month Day Year			Month Day	Year	
Month Day Year Primary Runoff Other 11/05/2024 X General Special 1 OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)	COVERED	01/01/2024	THE	ROUGH	06/30/20	24	
Month Day Year Primary Runoff Other 11/05/2024 X General Special 1 OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)							
11/05/2024 Image: Constraint of the second	10 ELECTION	ELECTION DATE			ELECTION TYPE		
I OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)		Month Day Year	Pri	mary	Runoff	Other	
1 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)		11/05/2024		neral			
		OFFICE HELD (if any)				T (if known)	
			cl ennan				
GO TO PAGE 2			GO TO	O PAGE 2			
orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.d378aba	Forms provided by Tex	xas Ethics Commission	www.eth	ics.state.tx.us	;	Versi	ion V4.1.0.d378aba

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 17

I

13 C / OH NAME	Luna, Ryan A. (Mr.)		14 Filer ID 00088281	(Ethics Comm	ission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of candidate / officeholder. <i>consent.</i> Candidates and	the candidate's or offic	ceholder's knov	vledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
				\$	36,350.00
EXPENDITURE TOTALS	· · · · · · · · · · · · · · · · · · ·	PLEDGES, LOANS, OR GUARANTEES OF LOAN IZED POLITICAL EXPENDITURES	15)	\$	0.00
		ICAL EXPENDITURES		\$	8,783.73
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L	AST DAY OF THE	\$	27,566.27
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	19,700.00
17 AFFIDAVIT					
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.	y of perjury, that the ac Ill information required	ccompanying re to be reported	eport is by me
		M	r. Ryan A. Luna		
		Signature of	f Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
	•	aid	, this the		_day
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offi	cer administering oath	Printed name of officer administering oath	Title of office	er administering	g oath
Forms provided by Te	exas Ethics Commissior	www.ethics.state.tx.us		Version V4.1	L.O.d378aba0

SUBTOTALS - JC/OH	FORM JC/OH COVER SHEET PG 3 3 of 17
18 FILER NAME Luna, Ryan A. (Mr.)	19 Filer ID (Ethics Commission Filers) 00088281
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIC	NS (JUDICIAL) \$ 36,350.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL C	ONTRIBUTIONS \$
3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4. SCHEDULE E(J): LOANS (JUDICIAL)	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLIT	TICAL CONTRIBUTIONS \$ 8,783.73
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM PC	S S S S S S S S S S S S S S S S S S S
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARE	\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSO	DNAL FUNDS \$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTI	ONS TO A BUSINESS OF C/OH \$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM PC	LITICAL CONTRIBUTIONS \$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, A TO FILER	ND CONTRIBUTIONS RETURNED

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/11 Rpt: 4/17	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Luna, Ryan A	A. (Mr.)		00088281
4 Date 01/26/2024	5 Full name of contributor out-of-state PAC (ID#: Ammons, Chris (Mrs.)		7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77006		
8 Contributor's P Operations	Principal Occupation	9 Contributor's Job Title Director/Administrator	
10 Contributor's e	mplover/law firm	11 Law firm of contributor's sp	oouse (if anv)
Ammons Lav		Ammons Law Firm	
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/26/2024	Ammons, Rob (Mr.)		\$2,500.00
	Contributor address; City; State; Zip Code		
	Liqueten TX 77006		
	Houston, TX 77006		
	Principal Occupation	Contributor's Job Title	
Attorney		Partner	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Ammons Lav		Ammons Law Firm	
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/25/2024	Brammer, Chris (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Woodway, TX 76712		
Contributor's P	Principal Occupation	Contributor's Job Title	
Sales/Admin Sales/Admin			
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)	
	Aission Waco		
_	a child, law firm of parent(s) (if any)		
Forms provided I	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.d378aba0

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1:
			Sch: 2/11 Rpt: 5/17
2 FILER NAME	A (Mr.)		3 Filer ID (Ethics Commission Filers) 00088281
Luna, Ryan			
4 Date 02/06/2024	5 Full name of contributor out-of-state PAC (ID#: Braus, Dominic (Mr.))	7 Amount of Contribution (\$) \$1,000.00
02/00/2024	6 Contributor address; City; State; Zip Code		, , , , , , , , , , , , , , , , , , ,
	Contributor address, City, State, Zip Code		
	Lorena, TX 76655		
8 Contributor's F	I Principal Occupation	9 Contributor's Job Title	1
Attorney		Partner	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Carlson Law	Firm, PC		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#)	Amount of Contribution (\$)
02/05/2024	Cherry, Craig (Mr.)		\$2,500.00
	Contributor address; City; State; Zip Code		
	Waco, TX 76701	1	
	Principal Occupation	Contributor's Job Title	
Attorney	employer/law firm	Partner Law firm of contributor's sp	nouse (if any)
	son Siegmund James, PLLC	Law IIIII of contributor's Sp	
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
01/30/2024	Curry, Pat (Mr.)	·/	\$1,000.00
	Contributor address; City; State; Zip Code		
	Waco, TX 76712		
Contributor's F	Principal Occupation	Contributor's Job Title	
Investments CEO			
	employer/law firm	Law firm of contributor's sp	oouse (if any)
PJC Investm			
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	cs state tx us	Version V4 1 0 d378aba0

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/11 Rpt: 6/17	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Luna, Ryan A. (Mr.)		00088281	
4 Date 5 Full name of contributor out-of-state PAC (ID#: 03/15/2024 Deaconson, David (Mr.) 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$500.00	
Waco, TX 76701			
8 Contributor's Principal Occupation Attorney	9 Contributor's Job Title Partner		
10 Contributor's employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
Pakis, Giotes, Burleson & Deaconson, P.C			
12 If contributor is a child, law firm of parent(s) (if any)	•		
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/19/2024 Dumas, David (Mr.)		\$500.00	
Contributor address; City; State; Zip Code Waco, TX 76701			
Contributor's Principal Occupation	Contributor's Job Title		
Attorney	Partner		
Contributor's employer/law firm	Law firm of contributor's sp	oouse (if any)	
Dumas Law Firm, PC			
If contributor is a child, law firm of parent(s) (if any)			
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/24/2024 Feazell, Vic (Mr.)		\$1,000.00	
Contributor address; City; State; Zip Code Waco, TX 76710			
Contributor's Principal Occupation	Contributor's Job Title		
Lawyer Partner			
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Law Offices of Vic Feazell			
If contributor is a child, law firm of parent(s) (if any)			
Forms provided by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V4.1.0.d378aba0	

The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/11 Rpt: 7/17
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Luna, Ryan A	A. (Mr.)		00088281
4 Date 02/13/2024	5 Full name of contributor out-of-state PAC (ID#: Firmin, Mark (Mr.))	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	Woodway, TX 76712		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	·
Attorney		Partner	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
_	n Brophy Bostwick & Dickson, PLLC		
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/30/2024	Gary, Martin (Mr.)		\$2,500.00
	Contributor address; City; State; Zip Code		
	Marble Falls, TX 78654		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Investments/	Energey	President	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Falcon Bay E			
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/15/2024	Hering , James (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		•
	Waco, TX 76701		
Contributor's Principal Occupation Contributor's Job Title		·	
Attorney Partner			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
	s, Burleson & Deaconson, P.C		
If contributor is	a child, law firm of parent(s) (if any)		
l Forms provided l	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V4.1.0.d378aba0

The Instruc	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/11 Rpt: 8/17	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Luna, Ryan A	A. (Mr.)		00088281	
4 Date 02/12/2024	5 Full name of contributor out-of-state PAC (ID#:_ Hutchison, Ron (Mr.)		7 Amount of Contribution (\$) \$1,000.00	
	6 Contributor address; City; State; Zip Code			
	Longview, TX 75604			
	rrincipal Occupation	9 Contributor's Job Title		
Communicati		CEO		
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)	
Network Con				
	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/05/2024	Johnson, Ryan (Mr.)		\$2,500.00	
	Contributor address; City; State; Zip Code		1	
	Waco, TX 76701			
Contributor's P	rincipal Occupation	Contributor's Job Title		
Attorney		Partner		
	mployer/law firm	Law firm of contributor's sp	bouse (if any)	
	son Siegmund James, PLLC			
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/16/2024	Ker, Jon (Colonel)		\$250.00	
	Contributor address; City; State; Zip Code			
	Hewitt, TX 76643			
Contributor's P	rincipal Occupation	Contributor's Job Title		
Attorney		Partner		
	mployer/law firm	Law firm of contributor's sp	oouse (if any)	
Jon R. Ker, F				
If contributor is	a child, law firm of parent(s) (if any)			
Forms provided I	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.d378aba0	

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/11 Rpt: 9/17	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Luna, Ryan /	A. (Mr.)		00088281
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)
01/30/2024	Lanier, Mark (Mr.)		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77070		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	
Attorney		Partner	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's s	pouse (if any)
Lanier Law F	irm		
12 If contributor is	a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor 🛛 out-of-state PAG	C (ID#:)	Amount of Contribution (\$)
01/26/2024	Lewis, Jurdon (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	McGregor, TX 76657		
	Principal Occupation	Contributor's Job Title	
Financial Exe		VP	
	mployer/law firm	Law firm of contributor's s	pouse (if any)
MasTec, Inc.			
II contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC Long, Gina (Mrs.)	C (ID#:)	Amount of Contribution (\$)
02/15/2024	Contributor address; City; State; Zip Code		\$250.00
	Contributor address, City, State, Zip Code		
	Axtell, TX 76624		
Contributor's F	rincipal Occupation	Contributor's Job Title	
Attorney Partner			
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)	
Harrison Dav	ris Morrison Jones, PC		
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www	.ethics.state.tx.us	Version V4.1.0.d378aba0

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/11 Rpt: 10/17	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Luna, Ryan	A. (Mr.)		00088281
4 Date	5 Full name of contributor Out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/30/2024	Martin, Beverly (Mrs.)		\$2,500.00
	6 Contributor address; City; State; Zip Code		
	Marble Falls, TX 78654		
	Principal Occupation	9 Contributor's Job Title	
Retired		Retired	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
N/A			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/06/2024	Martin, Paul (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Montgomery, TX 77316		
Contributor's I	Principal Occupation	Contributor's Job Title	
Retire		Retired	
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
Retired			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/23/2024	Martin, Tyler (Mr.)		\$2,500.00
	Contributor address; City; State; Zip Code		
	Waco, TX 76708		
	Principal Occupation	Contributor's Job Title	
Healthcare		CEO	
PALS Home	employer/law firm	Law firm of contributor's sp	bouse (if any)
	s a child, law firm of parent(s) (if any)		
	s a child, law little of parenics) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 d378aba0

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/11 Rpt: 11/17	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Luna, Ryan A	A. (Mr.)		00088281
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/30/2024	Milam, Jason (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Waco, TX 76701		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Partner	
10 Contributor's e		11 Law firm of contributor's sp	
Milam and Fa	anning, PLLC	TSTC General Counsel	
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/29/2024	ONeill, Colin (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	Waco, TX 76712		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Partner	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Fulbright Wir			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/06/2024	Pattillo, Andy (Mr.)		\$100.00
	Contributor address; City; State; Zip Code		
	Woodway, TX 76712	1	
Contributor's Principal Occupation Contributor's Job Title			
Attorney Partner			
Contributor's employer/law firm Law firm of contributor's sp			bouse (if any)
Beard Kultge			
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V4.1.0.d378aba0

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/11 Rpt: 12/17	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Luna, Ryan J	A. (Mr.)		00088281
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/25/2024	Rainey, James (Mr.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Waco, TX 76710	I	
	Principal Occupation	9 Contributor's Job Title Partner	
Attorney	and a set fine		
10 Contributor's e	iney Attorneys at Law	11 Law firm of contributor's sp Rainey & Rainey Attorn	
	s a child, law firm of parent(s) (if any)	Rainey & Rainey Auom	
	s a child, law infit of parend(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/26/2024	Ressetar, J.D. (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Waco, TX 76710		
	Principal Occupation	Contributor's Job Title	
Attorney		Partner	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
Zimmerman			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/07/2024	Roy, Barrett (Mr.))	\$500.00
	Contributor address; City; State; Zip Code		
	Waco, TX 76701		
Contributor's Principal Occupation Contributor's Job Title			
Attorney Partner			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
Naman Howell Smith & Lee, PLLC			
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V4.1.0.d378aba0

The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 10/11 Rpt: 13/17	
2 FILER NAME Luna, Ryan A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088281	
01/26/2024 Sawyer, John (Mr.)	5 Full name of contributor Image: Out-of-state PAC (ID#:) 5/2024 Sawyer, John (Mr.)		
Waco, TX 76701			
8 Contributor's Principal Occupation Hemisphere Aerospace	9 Contributor's Job Title CEO		
 10 Contributor's employer/law firm Hemisphere Aerospace 12 If contributor is a child, law firm of parent(s) (if any) 	pouse (if any)		
01/23/2024 Talbert, Tyler (Mr.)	Talbert, Tyler (Mr.)		
Waco, TX 76712			
Contributor's Principal Occupation Attorney	Contributor's Job Title Partner		
Contributor's employer/law firm Scanes Yelverton Talbert, LLP	Law firm of contributor's sp	oouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date Full name of contributor out-of-state PAC (ID# 02/02/2024 Tekell, David (Mr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00	
Waco, TX 76701			
Contributor's Principal Occupation Attorney	Contributor's Job Title Partner	1	
Contributor's employer/law firm	Law firm of contributor's sp	oouse (if any)	
Tekell & Tekell, LLP If contributor is a child, law firm of parent(s) (if any)	Tekell & Tekell, LLP		
Forms provided by Texas Ethics Commission www.eth	ics.state.tx.us	Version V4.1.0.d378aba0	

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A(J)1: Sch: 11/11 Rpt: 14/17		
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)	
Luna, Ryan A. (Mr.)				00088281		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)		
02/01/2024					\$1,000.00	
	6 Contributor address; City; State; Zip Code		1			
	Lorena, TX 76655					
8 Contributor's	Principal Occupation	9 Contributor's Job Title				
Attorney		Partner				
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	ou	se (if any)		
	& Thomas, PLLC	City of Temple Attorney				
12 If contributor	is a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)		
02/12/2024	VILLARRIAL, GERALD (Mr.)	,		()	\$2,500.00	
	Contributor address; City; State; Zip Code		1			
	Waco, TX 76710					
Contributor's	Principal Occupation	Contributor's Job Title	-			
Attorney		Partner				
Contributor's	employer/law firm	Law firm of contributor's sp	ou	se (if any)		
Dunnam & [Dunnam LLP	Dunnam & Dunnam LLF	D			
If contributor	is a child, law firm of parent(s) (if any)					

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			I Committee Legal Services Salaries/Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		quipment & Related Expense		
		_	The Instruction Guide explair	ns how to	comp	olete this form.	_		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/1 Rpt: 15/17		Luna, Ryan A. (Mr.)					00088281	
4	Date	5	Payee name						
	04/01/2024		Luna, Ryan (Mr.)						
6	Amount (\$)	7	Payee address; City; Sta	te; Zip	Code	1			
	\$3,300.00		4300 W. Waco Dr.	· •					
	,		Ste. B2-260						
			Waco, TX 76710						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	schedule)	(b) Description			
	EXPENDITURE		Loan Repayment/Reimbursement					ide of Texas. Com , officeholder living	•
						Repayment of) expense
						Repayment		Journ	
_			Condidate (Office bolder repres	Office				Office he	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	ougn	t		Office he	910
	Date		Payee name						
	02/02/2024		Luna, Ryan (Mr.)						
	Amount (\$)		Payee address; City; Sta	te; Zip	Code				
	\$5,000.00		4300 W. Waco Dr.						
	+0,000100		Ste. B2-260						
			Waco, TX 76710						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	schedule)	(b	Description			
	EXPENDITURE		Loan Repayment/Reimbursement					ide of Texas. Com , officeholder living	
						Repayment of			l exhense
						Repayment		Jan	
	Complete ONLY if direct		Candidate/Officeholder name	Office s		+		Office he	bld
	expenditure to benefit C/OF		andidate/Onicenolder name	Onice 3	ouyn	ι		Onice ne	5iu
	Date		Payee name						
	06/07/2024		Raise The Money, Inc.						
	Amount (\$)		Payee address; City; Sta	te; Zip	Code	•			
	\$483.73		P.O. Box 26466						
			Little Rock, AR 72221						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b) Description			
	OF EXPENDITURE		Accounting/Banking					ide of Texas. Com	
	EXPENDITORE							, officeholder living) expense
						Fundraising I	Fee	9	
	Complete ONLY if direct		Candidate/Officeholder name	Office s	ough	t		Office he	eld
	expenditure to benefit C/OF	Η							

OUTSTAN	NDING LOANS	SCHEDULE L
The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 16/17
2 FILER NAME Luna, Ryan A. ((Mr.)	3 Filer ID (Ethics Commission Filers) 00088281
LENDER	 4 Name of lender Luna, Ryan (Mr.) 5 Lender address; City; State; Zip Code 	
	Waco, TX 76710	
GUARANTOR INFORMATION	6 Name of guarantor	
X not applicable	7 Guarantor address; City; State; Zip Code	

TEXT ANNOTATION

Sch: 1/1 Rpt: 17/17

FILER NAME	Filer ID (Ethics Commission Filers)
Luna, Ryan A. (Mr.)	00088281

Schedule L

Information entered by filer as a memo:

\$19,700 outstanding as of July 1, 2024.