

# 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 Filer ID</b> (Ethics Commission Filers) 00086152	<b>2 Total pages filed:</b>  9		
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR Mr.	FIRST Ryan W.	MI MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b> 01/14/2025	
	NICKNAME	LAST Hill	SUFFIX		
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 3000 S. Hulen Ste. 124, Box 271 Fort Worth, TX 76109		Date Hand-delivered or Date Postmarked		
			Receipt #	Amount	
			Date Processed		
			Date Imaged		
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR Mr.	FIRST Nicholas	MI MI		
	NICKNAME	LAST Pappas	SUFFIX		
<b>6 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3700 W. 7th Street Fort Worth, TX 76107				
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE (817)	PHONE NUMBER 569-6582	EXTENSION		
<b>8 REPORT TYPE</b>	<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)				
<b>9 PERIOD COVERED</b>	Month    Day    Year 07/01/2024		THROUGH	Month    Day    Year 12/31/2024	
<b>10 ELECTION</b>	ELECTION DATE Month    Day    Year 11/08/2022		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
<b>11 OFFICE</b>	OFFICE HELD (if any) District Judge District 371 Tarrant		<b>12 OFFICE SOUGHT (if known)</b>		

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

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**13** C / OH NAME Hill, Ryan W. (Mr.) **14** Filer ID (Ethics Commission Filers)  
00086152

**15** NOTICE FROM POLITICAL COMMITTEE(S)  
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16</b> CONTRIBUTION TOTALS	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> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	994.32
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,746.80
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	66,979.69

**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.

Mr. Ryan W. Hill  
\_\_\_\_\_  
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

<b>18 FILER NAME</b> Hill, Ryan W. (Mr.)		<b>19 Filer ID</b> 00086152	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b> 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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	894.32
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	100.00
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	2.19

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/2 Rpt: 4/9	<b>2</b> FILER NAME Hill, Ryan W. (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00086152
<b>4</b> Date 08/28/2024	<b>5</b> Payee name Circle Donuts	
<b>6</b> Amount (\$) \$51.04	<b>7</b> Payee address; City; State; Zip Code 3506 Blue Bonnet Cir,  Fort Worth, TX 76109	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food For Court Staff
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2024	Payee name Esperanzas Bakery	
Amount (\$) \$158.82	Payee address; City; State; Zip Code 1601 Park Pl Ave  Fort Worth, TX 76110	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food For Judicial Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2024	Payee name Greenwood Florist	
Amount (\$) \$180.77	Payee address; City; State; Zip Code 3344 White Settlement Rd  Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers sent to the funeral of Justice Lee Ann Dauphinot
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/2 Rpt: 5/9	<b>2</b> FILER NAME Hill, Ryan W. (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00086152
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<b>4</b> Date 12/27/2024	<b>5</b> Payee name Pack N Mail
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<b>6</b> Amount (\$) \$264.00	<b>7</b> Payee address; City; State; Zip Code 3000 S Hulen St Suite 124  Fort Worth, TX 76109
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailbox
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/29/2024	Payee name Taco Cabana
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Amount (\$) \$129.84	Payee address; City; State; Zip Code 801 N. Beach St.  Fort Worth, TX 76111
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast when court hosted Tarrant CSCD pre-trial services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/10/2024	Payee name Torchy's Taco
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Amount (\$) \$109.85	Payee address; City; State; Zip Code 928 Northton St.  Fort Worth, TX 76104
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Court Staff
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/1 Rpt: 6/9	<b>2</b> FILER NAME Hill, Ryan W. (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00086152
<b>4</b> Date 07/09/2024	<b>5</b> Payee name Rick, Barnes	
<b>6</b> Amount (\$)  \$100.00  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 9121 Belshire Dr  North Richland Hills, TX 76182	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Campaign for Tax Assessor
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Barnes, Rick	Office sought County Tax Assessor-      Office held None District Tarrant

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

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/2 Rpt: 7/9
<b>2</b> FILER NAME Hill, Ryan W. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00086152
<b>4</b> Date 07/09/2024	<b>5</b> Name of person from whom amount is received Frost Bank	<b>8</b> Amount (\$) \$0.42
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Fort Worth, TX 76109	
	<b>7</b> Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 08/08/2024	Name of person from whom amount is received Frost Bank	Amount (\$) \$0.44
	Address of person from whom amount is received; City; State; Zip Code  Fort Worth, TX 76109	
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 09/10/2024	Name of person from whom amount is received Frost Bank	Amount (\$) \$0.47
	Address of person from whom amount is received; City; State; Zip Code  Fort Worth, TX 76109	
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 10/08/2024	Name of person from whom amount is received Frost Bank	Amount (\$) \$0.31
	Address of person from whom amount is received; City; State; Zip Code  Fort Worth, TX 76109	
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	
Date 11/08/2024	Name of person from whom amount is received Frost Bank	Amount (\$) \$0.30
	Address of person from whom amount is received; City; State; Zip Code  Fort Worth, TX 76109	
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	

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

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 2/2 Rpt: 8/9
<b>2</b> FILER NAME Hill, Ryan W. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00086152
<b>4</b> Date 12/09/2024	<b>5</b> Name of person from whom amount is received Frost Bank	<b>8</b> Amount (\$) \$0.25
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Fort Worth, TX 76109	
	<b>7</b> Purpose for which amount is received interest	<input type="checkbox"/> Check if political contribution returned to filer



# OUTSTANDING LOANS

## SCHEDULE L

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule L: Sch: 1/1 Rpt: 9/9
<b>2</b> FILER NAME Hill, Ryan W. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00086152
LENDER INFORMATION	<b>4</b> Name of lender Nick, Pappas	
	..... <b>5</b> Lender address; City; State; Zip Code  Fort Worth, TX 76109	
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>6</b> Name of guarantor	
	..... <b>7</b> Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender Ryan, Hill (The Honorable)	
	..... Lender address; City; State; Zip Code  Fort Worth, TX 76109	
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor	
	..... Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender Stefani, Hill	
	..... Lender address; City; State; Zip Code  Fort Worth, TX 76109	
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor	
	..... Guarantor address; City; State; Zip Code	