



STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

Date Initial Filing Received

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Harrison, Ryan

1. Office, Agency, or Court

Agency Name (Do not use acronyms) State Bar of California
Division, Board, Department, District, if applicable Your Position
Board of Trustees Board Member
If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: Position:

2. Jurisdiction of Office (Check at least one box)

[X] State [] Judge (Supreme, Appellate, Superior Court), Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
[] Multi-County [] County of
[] City of [] Other

3. Type of Statement (Check at least one box)

[X] Annual: The period covered is January 1, 2025, through December 31, 2025.
-or- The period covered is 04 / 26 / 2025, through December 31, 2025.
[] Assuming Office: Date assumed
[] Candidate: Date of Election and office sought, if different than Part 1:
[] Leaving Office: Date Left (Check one circle below.)
[] The period covered is January 1, 2025, through the date of leaving office.
-or- [] The period covered is through the date of leaving office.

4. Schedule Summary (required)

Total number of pages including this cover page: 3

Schedules attached

[] Schedule A-1 - Investments - schedule attached [X] Schedule C - Income, Loans, & Business Positions - schedule attached
[X] Schedule A-2 - Investments - schedule attached [] Schedule D - Income - Gifts - schedule attached
[] Schedule B - Real Property - schedule attached [] Schedule E - Income - Gifts - Travel Payments - schedule attached
[] Attachment 700-P - Prospective Employment (87200 Filers Only) - schedule attached

-or- [] None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
621 Capitol Mall Suite 2400 Sacramento CA 95814
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(916) 281-4024 rharrison@fisherphillips.com

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02 / 26 / 2026 Signature Ryan Harrison
(month, day, year) (File the originally signed paper statement with your filing official.)

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Harrison, Ryan

▶ 1. BUSINESS ENTITY OR TRUST

Fisher & Phillips LLP
Name
621 Capitol Mall Ste. 2400
Sacramento, CA 95814
Address (Business Address Acceptable)

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Law Firm

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED: ___/___/25 DISPOSED: ___/___/25

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Employee Other

YOUR BUSINESS POSITION Attorney

▶ 1. BUSINESS ENTITY OR TRUST

Name
Address (Business Address Acceptable)

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED: ___/___/25 DISPOSED: ___/___/25

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED: ___/___/25 DISPOSED: ___/___/25

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold ___ Yrs. remaining Other ___

Check box if additional schedules reporting investments or real property are attached

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED: ___/___/25 DISPOSED: ___/___/25

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold ___ Yrs. remaining Other ___

Check box if additional schedules reporting investments or real property are attached

Comments: _____

