

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 27
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Eric	MI N
	NICKNAME	LAST Contreras	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	19 Crown Rd Willow Park TX 76087		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (817)	PHONE NUMBER 901 - 9949	EXTENSION
	OFFICE USE ONLY		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr	FIRST Brian	MI S
	NICKNAME	LAST Lixey	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	431 Addison Dr Hudson Oaks TX 76087		
8 CAMPAIGN TREASURER PHONE	AREA CODE (254)	PHONE NUMBER 289 - 2292	EXTENSION
9 REPORT TYPE	<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)		
	10 PERIOD COVERED		
Month Day Year		Month Day Year	
7 / 26 / 2021		THROUGH 12 / 31 / 2021	
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description	
3 / 1 / 2022		<input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
		Parker County Commissioner Precinct 4	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME

ERIC CONTRERAS

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 39,036.86

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 16,718.99

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 22,317.87

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

18 SIGNATURE

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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is Eric Contreras, and my date of birth is Aug 8, 1982

My address is 19 Crown Rd, Willow Park, TX, 76087, USA
(street) (city) (state) (zip code) (country)

Executed in Parker County, State of Texas, on the 18 day of January, 2022.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME ERIC CONTRERAS		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 39,036. ⁸⁶
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 750. ⁰⁰
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 15,190. ⁹⁵
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 778. ⁰⁴
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>ERIC CONTRERAS</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>7/26</i> <i>2021</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Eric Contreras for Willow Park City Council Place 1</i> 6 Contributor address; City; State; Zip Code <i>19 Crown Rd Willow Park TX 76087</i>	7 Amount of contribution (\$) <i>\$ 935.86</i>
8 Principal occupation / Job title (See Instructions) <i>Marketing</i>		9 Employer (See Instructions) <i>BNSF Railway Co</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME ERIC CONTRERAS		3 Filer ID (Ethics Commission Filers)
4 Date 8/23 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RJ Caster 6 Contributor address; City; State; Zip Code 1569 Larue Ave, Apt 7 Jacksonville FL 32207	7 Amount of contribution (\$) \$ 1.00
8 Principal occupation / Job title (See Instructions) Digital / Media Manager		9 Employer (See Instructions) Go Big Media
Date 8/24 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Praveen Pinnamneni Contributor address; City; State; Zip Code 11601 Lago Vista W Dallas TX 75234	Amount of contribution (\$) \$ 250.00
Principal occupation / Job title (See Instructions) Builder		Employer (See Instructions) Praveen Pinnamneni
Date 8/25 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Williams Contributor address; City; State; Zip Code 5 Crown Rd Willow Park TX 76087	Amount of contribution (\$) \$ 500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Roger Williams CDJR
Date 8/25 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaclyn Williams Contributor address; City; State; Zip Code 19 Crown Rd Willow Park TX 76087	Amount of contribution (\$) \$ 250.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Roger Williams CDJR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME ERIC CONTRENTAS		3 Filer ID (Ethics Commission Filers)
4 Date 8/27 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brice Mitchell 6 Contributor address; City; State; Zip Code 500 Throckmorton St Fort Worth TX 76102	7 Amount of contribution (\$) \$ 1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Ranch House Storage
Date 9/13 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beverly + Gary Martin Contributor address; City; State; Zip Code 130 Northridge Rd Marble Falls TX 78654	Amount of contribution (\$) \$ 1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) R J Machine Co.
Date 9/15 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zach Etheredge Contributor address; City; State; Zip Code 913 Crown Valley Dr. Weatherford TX 76087	Amount of contribution (\$) \$ 250.00
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Mopac Management
Date 9/16 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Brown Contributor address; City; State; Zip Code 3913 Arroyo Drive Weatherford TX 76087	Amount of contribution (\$) \$ 200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME ERIC CONTRERAS		3 Filer ID (Ethics Commission Filers)
4 Date 9/17 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Williams 6 Contributor address; City; State; Zip Code 5 Crown Rd Willow Park TX 76087	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Roger Williams CDJR
Date 9/27 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beverly Reilly Contributor address; City; State; Zip Code 1017 S FM 5 Aledo TX 76008	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Knox Contributor address; City; State; Zip Code 3838 Oak Lawn Ave Dallas TX 75219	Amount of contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Private Investor		Employer (See Instructions) SELF
Date 10/30 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Ellington Contributor address; City; State; Zip Code 148 Links Ln Aledo TX 76008	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Medical Equip Sales		Employer (See Instructions) LSS Medical

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME ERIC CONTRERAS		3 Filer ID (Ethics Commission Filers)
4 Date 11/8 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Josh Wright 6 Contributor address; City; State; Zip Code 750 Jenkins Rd Aledo TX 76008	7 Amount of contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Investment		9 Employer (See Instructions) Self
Date 11/9 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeremy Day Contributor address; City; State; Zip Code 14828 Gentry Dr. Aledo TX 76008	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Prospera Financial
Date 11/10 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Williams Contributor address; City; State; Zip Code 2900 Wingate St. #200 Fort Worth TX 76107	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Co-Founder		Employer (See Instructions) Vaquero Ventures
Date 11/12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerry & Teena Conway Contributor address; City; State; Zip Code PO Box 177 Cresson TX 76035	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Ranch		Employer (See Instructions) Putteet Hill Ranch

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME ERIC CONTRERAS		3 Filer ID (Ethics Commission Filers)
4 Date 11/21 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson Contreras 6 Contributor address; City; State; Zip Code 8100 Sylvan Creek Dr Weatherford TX 76087	7 Amount of contribution (\$) \$ 1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/22 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken Davis Contributor address; City; State; Zip Code 3538 Four Trees Dr Weatherford TX 76087	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) Strategic Director		Employer (See Instructions) JMK International, Inc.
Date 11/22 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landon Meeker Contributor address; City; State; Zip Code 236 Granny B Rd Millsap TX 76066	Amount of contribution (\$) \$ 200.00
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) JRS Construction
Date 11/22 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louis-Philippe Ladouceur Contributor address; City; State; Zip Code 9320 Bear Creek Rd Aledo TX 76008	Amount of contribution (\$) \$ 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Eric Contreras</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>11/22</i> <i>2021</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Wesley (Sr.) Cooper</i> 6 Contributor address; City; State; Zip Code <i>1328 Steeple Chase Ln. Alledo TX 76008</i>	7 Amount of contribution (\$) <i>\$ 1,000.00</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>11/22</i> <i>2021</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Wesley (Jr.) Cooper</i> Contributor address; City; State; Zip Code <i>10 W Wembly Rogers AR 72758</i>	Amount of contribution (\$) <i>\$ 250.00</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>11/22</i> <i>2021</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ever Gomez</i> Contributor address; City; State; Zip Code <i>401 Emsley Dr. Willow Park TX 76087</i>	Amount of contribution (\$) <i>\$ 100.00</i>
Principal occupation / Job title (See Instructions) <i>Administrator</i>		Employer (See Instructions) <i>Acclaim</i>
Date <i>11/22</i> <i>2021</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Devin Sanders</i> Contributor address; City; State; Zip Code <i>4024 Pershing Ave Fort Worth TX 76107</i>	Amount of contribution (\$) <i>\$ 300.00</i>
Principal occupation / Job title (See Instructions) <i>Administrator</i>		Employer (See Instructions) <i>Tarrant County</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>ERIC CONTRERAS</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>11/25</i> <i>2021</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Phil King</i> 6 Contributor address; City; State; Zip Code <i>2158 Ftw Hwy Weatherford TX 76086</i>	7 Amount of contribution (\$) <i>\$1,000.00</i>
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions) <i>Eggleston King, LLP</i>
Date <i>12/2</i> <i>2021</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charlie Gilchrist</i> Contributor address; City; State; Zip Code <i>90 Crown Rd Willow Park TX 76087</i>	Amount of contribution (\$) <i>\$1,000.00</i>
Principal occupation / Job title (See Instructions) <i>Owner</i>		Employer (See Instructions) <i>Southwest Ford Dealership</i>
Date <i>12/6</i> <i>2021</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tyler Van Sant</i> Contributor address; City; State; Zip Code <i>204 Crown Point Blvd #1212 Willow Park TX 76087</i>	Amount of contribution (\$) <i>\$250.00</i>
Principal occupation / Job title (See Instructions) <i>Strategic Planner</i>		Employer (See Instructions) <i>Lockheed Martin</i>
Date <i>12/9</i> <i>2021</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jim Martin</i> Contributor address; City; State; Zip Code <i>P.O. Box 1840 Aledo TX 76008</i>	Amount of contribution (\$) <i>\$5,000.00</i>
Principal occupation / Job title (See Instructions) <i>Owner</i>		Employer (See Instructions) <i>Railhead Reality</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME ERIC CONTRERAS		3 Filer ID (Ethics Commission Filers)
4 Date 12/6 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold Gachman 6 Contributor address; City; State; Zip Code 1229 Shady Oaks Lane FortWorth TX 76107	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/10 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve Gould Contributor address; City; State; Zip Code 313 Buena Vista Dr. Weatherford TX 76087	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) North Texas Contracting
Date 12/14 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marissa Morlock Contributor address; City; State; Zip Code 8203 Rosebud St. Alta Loma CA 91701	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) ACERM
Date 12/21 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Reilly Contributor address; City; State; Zip Code 5600 Clearfork Main St. #170 Fort Worth TX 76109	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME ERIC CONTRERAS		3 Filer ID (Ethics Commission Filers)
4 Date 12/24 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Haake 6 Contributor address; City; State; Zip Code 1305 Greenview Dr. Alledo TX 76008	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Sales Manager		9 Employer (See Instructions) Panini America
Date 12/29 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K. Wayne Lee Contributor address; City; State; Zip Code 1601 Regal Oaks SouthLake TX 76092	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Motivator		Employer (See Instructions) Self
Date 12/30 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Williams Contributor address; City; State; Zip Code 5 Crown Rd Willow Park TX 76087	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Roger Williams CO.JR
Date 12/30 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Mahroum Contributor address; City; State; Zip Code 5820 Trail Lake Dr. FortWorth TX 76133	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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.

1 Total pages Schedule F1:	2 FILER NAME ERIC CONTRERAS	3 Filer ID (Ethics Commission Filers)
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4 Date 11/13/2021	5 Payee name Parker County Republican Party
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6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 908 South Main Street suite G Weatherford TX 76086
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Filing Fee for Ballot
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>8/18/2021</i>	6 Payee name <i>GoDaddy.com LLC</i>	
7 Amount (\$) <i>\$81.85</i>	8 Payee address: City: State: Zip Code <i>14455 N. Hayden Rd suite 219 Scottsdale AZ 85260</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Other: Website Purchase</i>	(b) Description <i>WWW.TEXANSFORERIC.COM</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>8/20/2021</i>	Payee name <i>P.S. The Letter</i>	
Amount (\$) <i>\$250.06</i>	Payee address: City: State: Zip Code <i>2100 Hulen Street Fort Worth TX 76107</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	Description <i>100 Stationery with envelopes 100 Business Cards</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>8/23/2021</i>	6 Payee name <i>Williams Sign Company</i>	
7 Amount (\$) <i>\$128.20</i>	8 Payee address; City; State; Zip Code <i>3933 E. California Pkwy Suite C Fort Worth TX 76119</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description <i>100 Bumper stickers</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>8/31/2021</i>	Payee name <i>Go Daddy.com LLC</i>	
Amount (\$) <i>\$25.49</i>	Payee address; City; State; Zip Code <i>14455 N. Hayden Rd. Suite 219 Scottsdale AZ 85260</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Other; Email</i>	Description <i>Purchase E-mail function</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>9/7/2021</i>	6 Payee name <i>P.S. The Letter</i>	
7 Amount (\$) <i>\$111.50</i>	8 Payee address; City; State; Zip Code <i>2100 Hulen Street Fort Worth TX 76107</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description <i>1,000 Business Cards</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>9/16/2021</i>	Payee name <i>Kassie Moore Photography, LLC</i>	
Amount (\$) <i>\$460.06</i>	Payee address; City; State; Zip Code <i>1578 Kelly Rd Alledo TX 76008</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Other: Photography</i>	Description <i>Campaign Photo's</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>10/26/2021</i>	6 Payee name <i>East Parker County Chamber of Commerce</i>	
7 Amount (\$) <i>\$165.00</i>	8 Payee address; City; State; Zip Code <i>100 Chuckwagon Trail Willow Park TX 76087</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Other: Membership</i>	(b) Description <i>1 year membership</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>11/2/2021</i>	Payee name <i>East Parker County Chamber of Commerce</i>	
Amount (\$) <i>\$75.00</i>	Payee address; City; State; Zip Code <i>100 Chuckwagon Trail Willow Park TX 76087</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Go-West Community Advertising Showcase</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 11/4/2021	6 Payee name Alpha Graphics Weatherford	
7 Amount (\$) \$879.88	8 Payee address; City; State; Zip Code 608 South Main Street Weatherford TX 76086	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Pop-up Binner Stand, Flag, Yard Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/13/2021	Payee name Hobby Lobby	
Amount (\$) \$54.10	Payee address; City; State; Zip Code 324 W I-20 Weatherford TX 76086	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other: Display Holders	Description (2) Display Easel's
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>11/18/2021</i>	6 Payee name <i>Parker County Republican Party Women's</i>	
7 Amount (\$) <i>\$35.00</i>	8 Payee address; City; State; Zip Code <i>502 N. Main, Box 5 Weatherford TX 76086</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Other: Membership</i>	(b) Description <i>1 year membership</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
12 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office held
Date <i>11/18/2021</i>	Payee name <i>Alpha Graphix Weatherford</i>	
Amount (\$) <i>\$648.10</i>	Payee address; City; State; Zip Code <i>608 South Main Street Weatherford TX 76086</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	Description <i>3 Flags 4 Signs</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>11/19/2021</i>	6 Payee name <i>Alpha Graphix Weatherford</i>	
7 Amount (\$) <i>\$287.66</i>	8 Payee address; City; State; Zip Code <i>608 South Main St. Weatherford TX 76086</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Material</i>	(b) Description <i>1,000 Pushcards</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>11/19/2021</i>	Payee name <i>Go BIG Media</i>	
Amount (\$) <i>\$400.00</i>	Payee address; City; State; Zip Code <i>44 Canal Center Plz, Suite 315 Alexandria VA 22314</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Other: Website Management</i>	Description <i>1 year of WIX - website mgmt.</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>11/19/2021</i>	6 Payee name <i>Go BIG Medra</i>	
7 Amount (\$) <i>\$2,773.00</i>	8 Payee address; City; State; Zip Code <i>44 Canal Center Plz, Suite 315 Alexandria VA 22314</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	(b) Description <i>Branding, consulting, + service</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>11/22/2021</i>	Payee name <i>Vino Co</i>	
Amount (\$) <i>\$482.40</i>	Payee address; City; State; Zip Code <i>405 FM 1187 N Alledo TX 76008</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>Kickoff Event for Campaign</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>12/6/2021</i>	6 Payee name <i>Williams Sign Company</i>	
7 Amount (\$) <i>\$6,847.90</i>	8 Payee address; City; State; Zip Code <i>3933 E California Pkwy Suite C Fort Worth TX 76119</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description <i>800 yard signs, 800 yard stakes 50 4'x4' signs</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date <i>12/6/2021</i>	Payee name <i>Go BIG Media</i>	
Amount (\$) <i>\$550.00</i>	Payee address; City; State; Zip Code <i>44 Canal Center Plz, Suite 315 Alexandria VA 22314</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	Description <i>Design / Develop Post Cards</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(a)

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|--|-------------------------------|--------------------------------|--|
| 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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME ERIC CONTRERAS	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
6 Date 12/10/2021	6 Payee name Lowels Home Centers, LLC	
7 Amount (\$) \$133.02	8 Payee address; City; State; Zip Code 110 E I-20 Weatherford TX 76087	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other: 4' x 4' sign securement	(b) Description (16) Packs of Zip Ties (Heavy Duty)
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2021	Payee name United States Postal Service	
Amount (\$) \$96.00	Payee address; City; State; Zip Code 1145 Santa Fe Dr. Weatherford TX 76086	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense or Other: Postal for Post Cards	Description (240) Post Card Stamps
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME <i>ERIC CONTRERAS</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date <i>12/13/2021</i>	6 Payee name <i>Alpha Graphix Weatherford</i>	
7 Amount (\$) <i>\$78.76</i>	8 Payee address; City; State; Zip Code <i>608 South Main St. Weatherford TX 76086</i>	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description <i>(250) Post Cards</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office held
Date <i>12/14/2021</i>	Payee name <i>Alpha Graphix Weatherford</i>	
Amount (\$) <i>\$454.91</i>	Payee address; City; State; Zip Code <i>608 South Main St. Weatherford TX 76086</i>	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	Description <i>(2,500) Door Hangers</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME ERIC CONTRERAS	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 12/29/2021	6 Payee name Alpha Graphix Weatherford
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7 Amount (\$) \$173.06	8 Payee address; City; State; Zip Code 608 South Main St. Weatherford TX 76086
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (1) 4' x 8' Banner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS**

SCHEDULE I

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:	2 FILER NAME ERIC CONTRERAS	3 Filer ID (Ethics Commission Filers)
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4 Date 8/23/2021 - 12/31/2021	5 Payee name Win Red Technical Services LLC.
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6 Amount (\$) \$778. ⁰⁴	7 Payee address; City State Zip Code 1776 Wilson Blvd. Suite 530 Arlington VA 22219
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8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Fees	(b) Description (See instructions regarding type of information required.) Website Donations
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Date	Payee name
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Amount (\$)	Payee address; City State Zip Code
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
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Date	Payee name
------	------------

Amount (\$)	Payee address; City State Zip Code
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
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Date	Payee name
------	------------

Amount (\$)	Payee address; City State Zip Code
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED