

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
66/84

2 FILER NAME
Michael J. Moncrief

3 ACCOUNT # (Ethics Commission Bars)
00020482

4 Date 05/06/2003	5 Payee name Larry W. Reed	7 Amount (\$) 118.21
6 Payee address; City; State; Zip Code 2509 Pate Fort Worth TX 76115		

8 Purpose of expenditure (See instructions regarding type of information required.) Campaign work	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date 06/05/2003	Payee name Rising Star Missionary Baptist Church	Amount (\$) 100.00
Payee address; City; State; Zip Code 4216 Avenue M Fort Worth TX 76105		

Purpose of expenditure (See instructions regarding type of information required.) Donation	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	--

Date 04/24/2003	Payee name Antennille R. Robinson	Amount (\$) 92.35
Payee address; City; State; Zip Code 4763 Chapman St. Fort Worth TX 76105		

Purpose of expenditure (See instructions regarding type of information required.) Campaign work	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	--

Date 05/05/2003	Payee name Antennille R. Robinson	Amount (\$) 92.35
Payee address; City; State; Zip Code 4763 Chapman St. Fort Worth TX 76105		

Purpose of expenditure (See instructions regarding type of information required.) Campaign work	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	--

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
67/84**2** FILER NAME
Michael J. Moncrief**3** ACCOUNT # (Ethics Commission filers)
00020482

4 Date	5 Payee name	7 Amount (\$)
04/24/2003	Michelle Robinson	29.55
6 Payee address; City; State; Zip Code 1227 E. Powell Ave. Fort Worth TX 76104		

8 Purpose of expenditure (See instructions regarding type of information required.)
Campaign work**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name	Amount (\$)
04/24/2003	Early C. Rogers	59.10
Payee address; City; State; Zip Code 3860 Waldorf Fort Worth TX 76119		

Purpose of expenditure (See instructions regarding type of information required.)
Campaign workComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name	Amount (\$)
05/06/2003	Early C. Rogers	59.10
Payee address; City; State; Zip Code 3860 Waldorf Fort Worth TX 76119		

Purpose of expenditure (See instructions regarding type of information required.)
Campaign workComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name	Amount (\$)
04/24/2003	Phillip J. Ross	59.10
Payee address; City; State; Zip Code 1301 Ramsey Fort Worth TX 76104		

Purpose of expenditure (See instructions regarding type of information required.)
Campaign workComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** Total pages report:
68/84**2** FILER NAME
Michael J. Moncrief**3** ACCOUNT # (Ethics Commission Files)
00020482

4 Date	5 Payee name	7 Amount (\$)
05/06/2003	Phillip J. Ross	88.66
6 Payee address; City; State; Zip Code		
1301 Ramsey		
Fort Worth TX 76104		

8 Purpose of expenditure (See instructions regarding type of information required.)
Campaign work**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name	Amount (\$)
04/29/2003	Andy Shelton	816.50
Payee address; City; State; Zip Code		
2913 West Bowie,Apt. A		
Fort Worth TX 76109		

Purpose of expenditure (See instructions regarding type of information required.)
Campaign workComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name	Amount (\$)
05/15/2003	Andy Shelton	816.50
Payee address; City; State; Zip Code		
2913 West Bowie,Apt. A		
Fort Worth TX 76109		

Purpose of expenditure (See instructions regarding type of information required.)
Campaign workComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date	Payee name	Amount (\$)
05/06/2003	Niki C. Smith	29.55
Payee address; City; State; Zip Code		
4728 Norma St.		
Fort Worth TX 76103		

Purpose of expenditure (See instructions regarding type of information required.)
Campaign workComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 69/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 04/25/2003	5 Payee name Southwestern Bell 6 Payee address; City; State; Zip Code P.O. Box 930170 Dallas TX 75394-0012	7 Amount (\$) 757.98
8 Purpose of expenditure (See instructions regarding type of information required.) Telephone service		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/01/2003	Payee name Southwestern Bell Payee address; City; State; Zip Code P.O. Box 930170 Dallas TX 75394-0012	Amount (\$) 396.30
Purpose of expenditure (See instructions regarding type of information required.) Telephone service		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/18/2003	Payee name Southwestern Bell Payee address; City; State; Zip Code P.O. Box 930170 Dallas TX 75394-0012	Amount (\$) 203.02
Purpose of expenditure (See instructions regarding type of information required.) Telephone service		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Cara D. Sterling Payee address; City; State; Zip Code 3330 Crenshaw Fort Worth TX 76105	Amount (\$) 147.76
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
70/84

2 FILER NAME
Michael J. Moncrief

3 ACCOUNT # (Ethics Commission filers)
00020482

4 Date
06/24/2003

5 Payee name
Tarrant County Medical Society

7 Amount
(\$)
92.60

6 Payee address; City; State; Zip Code
P.O. Box 470098
Fort Worth TX 76147-0098

8 Purpose of expenditure (See instructions regarding type of information required.)
Labels

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date
04/29/2003

Payee name
The Eppstein Group

Amount
(\$)
63810.08

Payee address; City; State; Zip Code
4055 International Plaza, Suite 520
Fort Worth TX 76109

Purpose of expenditure (See instructions regarding type of information required.)
Consulting fees and services

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date
05/05/2003

Payee name
The Eppstein Group

Amount
(\$)
51373.73

Payee address; City; State; Zip Code
4055 International Plaza, Suite 520
Fort Worth TX 76109

Purpose of expenditure (See instructions regarding type of information required.)
Consulting fees and services

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date
05/07/2003

Payee name
The Eppstein Group

Amount
(\$)
13750.00

Payee address; City; State; Zip Code
4055 International Plaza, Suite 520
Fort Worth TX 76109

Purpose of expenditure (See instructions regarding type of information required.)
Consulting fees and services

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 71/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission Bers) 00020482
4 Date 06/05/2003	5 Payee name The Eppstein Group 6 Payee address; City; State; Zip Code 4055 International Plaza, Suite 520 Fort Worth TX 76109	7 Amount (\$) 263.35
8 Purpose of expenditure (See instructions regarding type of information required.) Consulting fees and services		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/18/2003	Payee name The Eppstein Group Payee address; City; State; Zip Code 4055 International Plaza, Suite 520 Fort Worth TX 76109	Amount (\$) 91.60
Purpose of expenditure (See instructions regarding type of information required.) Consulting fees and services		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/24/2003	Payee name Cara Thomas Payee address; City; State; Zip Code 703-B N. Oak St. Arlington TX 76011	Amount (\$) 291.52
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/29/2003	Payee name Cara Thomas Payee address; City; State; Zip Code 703-B N. Oak St. Arlington TX 76011	Amount (\$) 291.52
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 72/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/06/2003	5 Payee name Cara Thomas 6 Payee address; City; State; Zip Code 703-B N. Oak St. Arlington TX 76011	7 Amount (\$) 351.01
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign work		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Tanisha T. Thomas Payee address; City; State; Zip Code 703 N. Oak St., Apt. B Fort Worth TX 76011	Amount (\$) 147.76
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Tiffany T. Thomas Payee address; City; State; Zip Code 2517 McKenzie St. Fort Worth TX 76105	Amount (\$) 88.66
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/24/2003	Payee name Leonard Tolliver Payee address; City; State; Zip Code 1241 Marion Ave. Fort Worth TX 76104	Amount (\$) 58.10
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 73/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission files) 00020482
4 Date 05/06/2003	5 Payee name Lavon C. Tucker 6 Payee address; City; State; Zip Code 1908 Edgewood Terr. Fort Worth TX 76105	7 Amount (\$) 58.10
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign work		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/18/2003	Payee name Chris Turner Payee address; City; State; Zip Code 6908 Hunter Cove Drive Arlington TX 76001	Amount (\$) 5000.00
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/25/2003	Payee name U.S. Postmaster Payee address; City; State; Zip Code 819 Taylor Street Fort Worth TX 76102-9997	Amount (\$) 184.00
Purpose of expenditure (See instructions regarding type of information required.) Postage		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/28/2003	Payee name U.S. Postmaster Payee address; City; State; Zip Code 819 Taylor Street Fort Worth TX 76102-9997	Amount (\$) 120.80
Purpose of expenditure (See instructions regarding type of information required.) Postage		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 74/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/16/2003	5 Payee name U.S. Postmaster <hr/> 6 Payee address; City; State; Zip Code 819 Taylor Street Fort Worth TX 76102-9997	7 Amount (\$) 148.00
8 Purpose of expenditure (See instructions regarding type of information required.) Postage		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/29/2003	Payee name Marc A. Veasey <hr/> Payee address; City; State; Zip Code 5509 Blackmore Ave. Fort Worth TX 76107	Amount (\$) 833.50
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Marc A. Veasey <hr/> Payee address; City; State; Zip Code 5509 Blackmore Ave. Fort Worth TX 76107	Amount (\$) 497.53
Purpose of expenditure (See instructions regarding type of information required.) Gas, campaign food, supplies		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Latisha Watson <hr/> Payee address; City; State; Zip Code 2501 Oakhill Cr., Apt. 2332 Fort Worth TX 76109	Amount (\$) 118.21
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 75/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/02/2003	5 Payee name Bill Wedeking 6 Payee address; City; State; Zip Code 8906 Branchwood Trail Fort Worth TX 76116	7 Amount (\$) 99.97
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign supplies		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Patrick J. Wheeler Payee address; City; State; Zip Code 1116 E. Jessamine St. Fort Worth TX 76104	Amount (\$) 110.21
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/24/2003	Payee name Frank Williams Payee address; City; State; Zip Code 1227 E. Powell Ave. Fort Worth TX 76104	Amount (\$) 73.88
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Frank Williams Payee address; City; State; Zip Code 1227 E. Powell Ave. Fort Worth TX 76104	Amount (\$) 221.64
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 76/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission #s) 00020482
4 Date 05/06/2003	5 Payee name Gloria J. Williams <hr/> 6 Payee address; City; State; Zip Code 2111 Jacocks Ln. Fort Worth TX 76115	7 Amount (\$) 73.88
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign work	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 05/06/2003	Payee name Joyce Williams <hr/> Payee address; City; State; Zip Code 6005 Oakland Knoll Dr.,#280 Fort Worth TX 76112	Amount (\$) 184.70
Purpose of expenditure (See instructions regarding type of information required.) Campaign work	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 05/07/2003	Payee name Joyce Williams <hr/> Payee address; City; State; Zip Code 6005 Oakland Knoll Dr.,#280 Fort Worth TX 76112	Amount (\$) 36.94
Purpose of expenditure (See instructions regarding type of information required.) Campaign work	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 05/06/2003	Payee name Julius C. Williams <hr/> Payee address; City; State; Zip Code 6005 Oakland Knoll,#280 Fort Worth TX 76112	Amount (\$) 142.76
Purpose of expenditure (See instructions regarding type of information required.) Campaign work	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 77/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/07/2003	5 Payee name Julius C. Williams 6 Payee address; City; State; Zip Code 6005 Oakland Knoll,#280 Fort Worth TX 76112	7 Amount (\$) 29.55
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign work		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/24/2003	Payee name Katanta P. Williams Payee address; City; State; Zip Code 4228 Whitehall St. Fort Worth TX 76119	Amount (\$) 58.10
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Katanta P. Williams Payee address; City; State; Zip Code 4228 Whitehall St. Fort Worth TX 76119	Amount (\$) 88.66
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/24/2003	Payee name Matyria L. Williams Payee address; City; State; Zip Code 4228 Whitehall St. Fort Worth TX 76119	Amount (\$) 73.88
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 78/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/06/2003	5 Payee name Matyria L. Williams 6 Payee address; City; State; Zip Code 4228 Whitehall St. Fort Worth TX 76119	7 Amount (\$) 73.88
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign work		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Quincy Williams Payee address; City; State; Zip Code 2111 Jacocks Fort Worth TX 76115	Amount (\$) 59.10
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Ramantha E. Williams Payee address; City; State; Zip Code 5907 Boca Raton Fort Worth TX 76112	Amount (\$) 147.76
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/07/2003	Payee name Ramantha E. Williams Payee address; City; State; Zip Code 5907 Boca Raton Fort Worth TX 76112	Amount (\$) 29.55
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 79/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission files) 00020482
4 Date 04/24/2003	5 Payee name Shirley Ann Williams <hr/> 6 Payee address; City; State; Zip Code 2425 North Glen Dr. Fort Worth TX 76119	7 Amount (\$) 249.97
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign work		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/29/2003	Payee name Shirley Ann Williams <hr/> Payee address; City; State; Zip Code 2425 North Glen Dr. Fort Worth TX 76119	Amount (\$) 269.13
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/06/2003	Payee name Shirley Ann Williams <hr/> Payee address; City; State; Zip Code 2425 North Glen Dr. Fort Worth TX 76119	Amount (\$) 242.58
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/07/2003	Payee name Shirley Ann Williams <hr/> Payee address; City; State; Zip Code 2425 North Glen Dr. Fort Worth TX 76119	Amount (\$) 55.41
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 80/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/06/2003	5 Payee name Sumia Sheree Williams 6 Payee address; City; State; Zip Code 3513 Sydney Fort Worth TX 76119	7 Amount (\$) 142.76
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign work		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/07/2003	Payee name Sumia Sheree Williams Payee address; City; State; Zip Code 3513 Sydney Fort Worth TX 76119	Amount (\$) 29.55
Purpose of expenditure (See instructions regarding type of information required.) Campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/25/2003	Payee name Worth National Bank Payee address; City; State; Zip Code 801 Cherry Street Fort Worth TX 76102	Amount (\$) 200.00
Purpose of expenditure (See instructions regarding type of information required.) Petty cash fund		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/02/2003	Payee name Worth National Bank Payee address; City; State; Zip Code 801 Cherry Street Fort Worth TX 76102	Amount (\$) 5.00
Purpose of expenditure (See instructions regarding type of information required.) Bank fee		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 81/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/02/2003	5 Payee name Worth National Bank <hr/> 6 Payee address; City; State; Zip Code 801 Cherry Street Fort Worth TX 76102	7 Amount (\$) 200.00
8 Purpose of expenditure (See instructions regarding type of information required.) Petty cash fund	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 05/07/2003	Payee name Worth National Bank <hr/> Payee address; City; State; Zip Code 801 Cherry Street Fort Worth TX 76102	Amount (\$) 5064.22
Purpose of expenditure (See instructions regarding type of information required.) Payroll tax deposit	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 06/05/2003	Payee name Worth National Bank <hr/> Payee address; City; State; Zip Code 801 Cherry Street Fort Worth TX 76102	Amount (\$) 4770.76
Purpose of expenditure (See instructions regarding type of information required.) Payroll taxes	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
82/84

2 FILER NAME
Michael J. Moncrief

3 ACCOUNT # (Ethics Commission filers)
00020482

4 Date
06/30/2003

5 Payee name
Mike Moncrief Investments, Inc.

8 Amount (\$)
2000.00

6 Payee address; City; State; Zip Code
777 Taylor Street, Suite 1030
Fort Worth TX 76102

7 Purpose of expenditure (See instructions regarding type of information required.)
Staff time (reimbursement not intended)

Reimbursement from political contributions intended

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 83/84
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/15/2003	5 Business name Mike Moncrief Investments, Inc. 6 Business address; City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth TX 76102	7 Amount (\$) 8.16
8 Purpose of payment (See instructions regarding type of information required.) Reimbursement for fax use		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 06/05/2003	Business name Mike Moncrief Investments, Inc. Business address; City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth TX 76102	Amount (\$) 2.03
Purpose of payment (See instructions regarding type of information required.) Reimbursement for postage		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

CREDITS (optional)**SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
84/84**2** FILER NAME

Michael J. Moncrief

3 ACCOUNT # (Ethics Commission filers)
00020482

4 Date	5 Payor name	8 Amount (\$)
06/09/2003	B.K.'s Creative Catering, Inc. ----- 6 Payor address; City; State; Zip Code 275 University Drive Fort Worth TX 76107 7 Reason for credit Refund of deposit	75.00
05/29/2003	United States Treasury ----- Payor address; City; State; Zip Code Internal Revenue Service Center Ogden UT 84201 Reason for credit Refund of overpayment	517.67
06/04/2003	Worth National Bank ----- Payor address; City; State; Zip Code 801 Cherry Street Fort Worth TX 76102 Reason for credit Return of petty cash	26.45