

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT #(Ethics Commission files)

16 NOTICE FROM POLITICAL COMMITTEE(S)

-- This box is for notice of political expenditures 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

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 NO REPORTABLE ACTIVITY

Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

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

\$ 146823.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

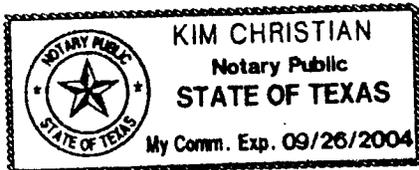
\$ 160839.32

OUTSTANDING LOAN TOTALS

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

\$ 0.00

19 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.

[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael J. Moncrief, this the 25th day of April, 2003, 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

Kim Christian

Notary Public

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 3/80	
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 04/14/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rex Akers 6 Contributor address; City; State; Zip Code 3305 Scarborough Lane Court Colleyville TX 76034	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) R. Denny Alexander Contributor address; City; State; Zip Code 4200 S. Hulen St., Suite 617 Fort Worth TX 76109	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/08/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Richard T. Andersen Contributor address; City; State; Zip Code 2201 Windsor Pl. Fort Worth TX 76110	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/10/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David D. Anderson Contributor address; City; State; Zip Code 3808 Hidden Hollow Austin TX 78731	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/02/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lee S. Anderson Contributor address; City; State; Zip Code 2605 Colonial Parkway Fort Worth TX 76109	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 4/80	
2 FILER NAME: Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 04/08/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Danny Anfin 6 Contributor address; City; State; Zip Code 405 Park Meadows Dr. Crowley TX 76036	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Apartment Assoc. Tarrant Co. Political Action Committee Contributor address; City; State; Zip Code 6350 Baker Blvd. Fort Worth TX 76118-6219	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/17/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Garland P. Asher Contributor address; City; State; Zip Code 4001 Monticello Drive Fort Worth TX 76107	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James T. Ayres Contributor address; City; State; Zip Code 2728 Mercedes Fort Worth TX 76107	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/14/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jeanmarie Baer Contributor address; City; State; Zip Code 3303 Kessler Blvd. Wichita Falls TX 76309	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 5/80	
2 FILER NAME: Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 04/11/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) George Ann Carter Bahan 6 Contributor address; City; State; Zip Code 29 Valley Ridge Rd. Fort Worth TX 76107	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/14/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jason Bailey Contributor address; City; State; Zip Code 7392 Brace St. Houston TX 77061	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/02/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John T. Bailey Contributor address; City; State; Zip Code P.O. Box 9450 Fort Worth TX 76147	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/23/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Christopher E. Baker Contributor address; City; State; Zip Code 4955 Overton Woods Ct. Fort Worth TX 76109	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/02/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kara T. Baker Contributor address; City; State; Zip Code 6500 Haig Point Ct. Fort Worth TX 76132	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 6/80	
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 04/10/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kay Baker	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3713 W. 4th Fort Worth TX 76107			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/23/2003	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC(ID# C00128512) Bank One Corporation PAC	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1 Bank One Plaza Chicago IL 60670			
Principal occupation (Optional)		Employer (Optional)	
Date 04/22/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mrs. Walter B. Barbour	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1904 Bunche Dr. Fort Worth TX 76112			
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James B. Barlow	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3815 Lisbon Street Fort Worth TX 76107			
Principal occupation (Optional)		Employer (Optional)	
Date 04/08/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Edward P. Bass	Amount of contribution (\$) 2000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 201 Main Street, Suite 3100 Fort Worth TX 76102			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
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The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 7/80	
2 FILER NAME: Michael J. Moncrief		3 ACCOUNT # (Ethics Commission files) 00020482	
4 Date 04/04/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robert M. Bass	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 201 Main St. Fort Worth TX 76102		
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/08/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gus Bates	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 4250 Sarita Ct. Fort Worth TX 76109		
Principal occupation (Optional)		Employer (Optional)	
Date 04/14/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tab Beall	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code P.O. Box 1513 Tyler TX 75710-1513		
Principal occupation (Optional)		Employer (Optional)	
Date 04/02/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) C. C. Bearden Jr.	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code P.O. Box 101717 Fort Worth TX 76185		
Principal occupation (Optional)		Employer (Optional)	
Date 04/22/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cliff H. Beasley	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 4717 Harley Avenue Fort Worth TX 76107-3713		
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
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The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 8/80	
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission files) 00020482	
4 Date 04/04/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Daniel L. Bechtel	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 11281 Fort Worth TX 76110			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/08/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Grant R. Bell	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3710 Green Hollow Dr. Grand Prairie TX 75052			
Principal occupation (Optional)		Employer (Optional)	
Date 04/09/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Robert D. Benda	Amount of contribution (\$) 2000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 608 Paint Pony Trail N. Fort Worth TX 76108			
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Johnnie M. Benson	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1704 Martel Fort Worth TX 76103			
Principal occupation (Optional)		Employer (Optional)	
Date 04/09/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Minion Ann Benson	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5109 Laurel Lane Fort Worth TX 76180			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
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The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 9/80	
2 FILER NAME: Michael J. Moncrief		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 04/02/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Barclay E. Berdan	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 3639 Encanto Dr. Fort Worth TX 76109		
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/15/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Howard L. Bernstein	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 4963 Overton Woods Ct. Fort Worth TX 76109		
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Michael K. Berry	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 6217 Genoa Fort Worth TX 76116		
Principal occupation (Optional)		Employer (Optional)	
Date 04/11/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) David M. Beyer	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 4201 Camp Bowie Blvd. Fort Worth TX 76107-3997		
Principal occupation (Optional)		Employer (Optional)	
Date 04/11/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bonnie Birkel	Amount of contribution (\$) 2000.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code Route 3, Box 745 Franklin TX 77856		
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 10/80	
2 FILER NAME Michael J. Moncrief		3 ACCOUNT # (Ethics Commission files) 00020482	
4 Date 04/09/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Donna Blanck	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 116 Crestwood Drive Fort Worth TX 76107			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) R. E. Bolen	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4213 Candlewind Fort Worth TX 76133			
Principal occupation (Optional)		Employer (Optional)	
Date 04/08/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jim Bradshaw	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4613 Briarhaven Rd. Fort Worth TX 76109			
Principal occupation (Optional)		Employer (Optional)	
Date 04/14/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Larry Brandon	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 9132 Amarillo TX 79105			
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Trellise W. Brennan	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 Hazelwood Dr. Fort Worth TX 76107			
Principal occupation (Optional)		Employer (Optional)	