

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/56 Report: 30/63	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kasal, Nataraj G. 6 Contributor address; City; State; Zip Code 2205 Indian Creek Drive Fort Worth, TX 76107	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kay Granger Campaign Fund Contributor address; City; State; Zip Code 715 Jones Street, Suite 101 Fort Worth, TX 76102	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kearney, Terry M. Contributor address; City; State; Zip Code 7432 Lochwood Ct. Fort Worth, TX 76179-3134	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keenum, Ken L. Contributor address; City; State; Zip Code 1300 S. University Drive, Suite 409 Fort Worth, TX 76107	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kelley, Russell T. Contributor address; City; State; Zip Code 98 San Jacinto Blvd., Suite 900 Austin, TX 78701	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 29/56 Report: 31/63	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Klabzuba, Robert 6 Contributor address; City; State; Zip Code 930 West First Street Fort Worth, TX 76102	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/01/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kolba, Robert E. Contributor address; City; State; Zip Code 5950 Forest Highlands Fort Worth, TX 76132	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Komatsu, Albert S. Contributor address; City; State; Zip Code 602 Roaring Springs Rd. Fort Worth, TX 76114	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Komatsu, Karl A. Contributor address; City; State; Zip Code 3905 Lenox Dr. Fort Worth, TX 76107	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kouri, Gene Contributor address; City; State; Zip Code 2921 Lackland Road, #201 Fort Worth, TX 76116	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Krueger, Shari D. 6 Contributor address; City; State; Zip Code 6474 Orchid Ln. Dallas, TX 75230	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lamensdorf, Hugh Contributor address; City; State; Zip Code 5125 Turtle Creek Ct. Fort Worth, TX 76116	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lancaster, Carlton Contributor address; City; State; Zip Code 4722 Michelle Arlington, TX 76016	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Landreth, W. A. Jr. Contributor address; City; State; Zip Code 306 W. 7th St., Suite 504 Fort Worth, TX 76102-4905	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Landrum, Tony Contributor address; City; State; Zip Code 2308 Stadium Dr. Fort Worth, TX 76109	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCallum, Jack E. 6 Contributor address; City; State; Zip Code 1 Stevens Dr. Fort Worth, TX 76126	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniel, Bruce L. Jr. Contributor address; City; State; Zip Code 2319 Ryan Place Dr. Fort Worth, TX 76110-2546	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDonald, Judy Contributor address; City; State; Zip Code 3578 West 4th Fort Worth, TX 76107	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDonald Sanders, A Professional Corporation Contributor address; City; State; Zip Code 777 Main Street, Suite 1300 Fort Worth, TX 76102	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKinzie, Susie Contributor address; City; State; Zip Code 2332 Primrose Ave. Fort Worth, TX 76111	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 06/08/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McLean, Robert H. 6 Contributor address; City; State; Zip Code 226 Bailey Ave., No. 101 Fort Worth, TX 76107	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McMillen, H. L. Contributor address; City; State; Zip Code 7013 Allen Place Dr. Fort Worth, TX 76116	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meadows, William W. Contributor address; City; State; Zip Code 3904 Hamilton Fort Worth, TX 76107	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meihaus, M.S. Contributor address; City; State; Zip Code 4705 Harley Ave. Fort Worth, TX 76107-3713	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mendoza, Rufino Contributor address; City; State; Zip Code 5505 Rutland Ave. Fort Worth, TX 76133	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/09/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, B. Nelson Jr. 6 Contributor address; City; State; Zip Code 5705 Morlaix Court Colleyville, TX 76034	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Robert J. Contributor address; City; State; Zip Code 3501 Bellaire Drive North, #15 Fort Worth, TX 76109	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Molder, John Contributor address; City; State; Zip Code 1901 Lotus Ave. Fort Worth, TX 76111	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Molina, J. Mauro Contributor address; City; State; Zip Code 1125 Trammell Dr. Fort Worth, TX 76126	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montesi, Terry R. Contributor address; City; State; Zip Code 301 Commerce St., Suite 3635 Fort Worth, TX 76102	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Andrea 6 Contributor address; City; State; Zip Code 8120 Cleburne Highway Granbury, TX 76049	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/01/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morgan, John S. Contributor address; City; State; Zip Code 1905 Hillcrest Street Fort Worth, TX 76107-3932	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moroneso, Philip A. Contributor address; City; State; Zip Code 306 W. 7th St., Suite 888 Fort Worth, TX 76102-4912	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/18/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morris, Clifton H. Jr. Contributor address; City; State; Zip Code 1409 Indian Creek Fort Worth, TX 76107	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morse, Greg Contributor address; City; State; Zip Code 2600 Colonial Parkway Fort Worth, TX 76109	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 46/56 Report: 48/63	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Jeffrey J. 6 Contributor address; City; State; Zip Code 5612 Odom Ave. Fort Worth, TX 76114	7 Amount of contribution (\$) \$10.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose, Matthew K. Contributor address; City; State; Zip Code 1406 Post Oak Place Westlake, TX 76282	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/18/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosenthal, William E. Contributor address; City; State; Zip Code 604 E. 4th St., Suite 201 Fort Worth, TX 76102	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rutherford, Betty Contributor address; City; State; Zip Code 4919 Black Oak Lane Fort Worth, TX 76114-2933	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/18/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryffel, James A. Contributor address; City; State; Zip Code 3113 S. University Dr., No. 600 Fort Worth, TX 76109	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saleh, Mary E. 6 Contributor address; City; State; Zip Code 1400 Driftwood Dr. Euless, TX 76040	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sandford, W. R. Contributor address; City; State; Zip Code 601 W. Main Decatur, TX 76234	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scherrieb, Carl L. Contributor address; City; State; Zip Code 674 Baldrige Burleson, TX 76028	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schlansker, Jane E. Contributor address; City; State; Zip Code 1614 Sunset Terrace Fort Worth, TX 76102	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/14/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schwarz, Herbert L. Contributor address; City; State; Zip Code 4321 Woodwick Ct. Fort Worth, TX 76109	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shafer, Teresa 6 Contributor address; City; State; Zip Code 7250 Tamarack Road Fort Worth, TX 76116-9225	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shaw-Stites Construction, Ltd. Contributor address; City; State; Zip Code 5208A Pershing Ave. Fort Worth, TX 76107	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Carol M. Contributor address; City; State; Zip Code 5331 Collinwood Ave. Fort Worth, TX 76107	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Snyder, R. E. Contributor address; City; State; Zip Code 1201 EMS Rd. East. Fort Worth, TX 76116	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/18/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spears, Katherine C. Contributor address; City; State; Zip Code 3881 South Hills Circle Fort Worth, TX 76109	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Toal, James 6 Contributor address; City; State; Zip Code 341 Nursery Ln. Fort Worth, TX 76114	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tracy, J. David Contributor address; City; State; Zip Code 2734 Colonial Parkway Fort Worth, TX 76109-1211	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Traver, Audrey M. Contributor address; City; State; Zip Code 2650 W. Park Row Dr., #125 Pantego, TX 76013	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trevino, T. Oscar Jr. Contributor address; City; State; Zip Code 7805 Amy North Richland Hills, TX 76180	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tubb, L. C. Jr. Contributor address; City; State; Zip Code P.O. Box 161639 Fort Worth, TX 76161	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Uberman, Sid 6 Contributor address; City; State; Zip Code 500 W. 7th St., Suite 1218 Fort Worth, TX 76102	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, William H. 6 Contributor address; City; State; Zip Code 13600 Heritage Parkway Fort Worth, TX 76177	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 06/15/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ware, Morton G. (Mrs.) 6 Contributor address; City; State; Zip Code 1501 Thomas Place Fort Worth, TX 76107-2473	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/09/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wells, Jerry D. 6 Contributor address; City; State; Zip Code 1240 Southridge Ct., No. 105 Hurst, TX 76053	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) West, Robert G. 6 Contributor address; City; State; Zip Code 7012 Allen Place Dr. Fort Worth, TX 76116-9300	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

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2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 05/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Alan B. 6 Contributor address; City; State; Zip Code 2911 Turtle Creek Blvd., Suite 700 Dallas, TX 75219	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wier, N. Richard Contributor address; City; State; Zip Code 2109 Hillcrest Fort Worth, TX 76107	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wiley, Wade W. III Contributor address; City; State; Zip Code 6708 Brants Ln. Fort Worth, TX 76116	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/22/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Patty Contributor address; City; State; Zip Code 2908 San Rocendo St. Fort Worth, TX 76116-0672	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Willkie, Valteau Jr. Contributor address; City; State; Zip Code 309 Main St. Fort Worth, TX 76102	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3 Report: 59/63
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/15/2007	5 Payee name Air Center Helicopters, Inc. 6 Payee address; City; State; Zip Code 150 Aviation Way, Hangar 17N Fort Worth, TX 76106-2757	7 Amount (\$) \$1,050.00
8 Purpose of payment (See instructions regarding type of information required.) Transportation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/15/2007	Payee name City of Fort Worth Payee address; City; State; Zip Code 1000 Throckmorton Street Fort Worth, TX 76102	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Cowntown Brush Up donation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 06/02/2007	Payee name Como Alumni Club Inc. Payee address; City; State; Zip Code P.O. Box 100292 Fort Worth, TX 76185-0292	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Scholarship sponsorship donation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/24/2007	Payee name Day Resource Center Payee address; City; State; Zip Code P.O. Box 2323 Fort Worth, TX 76113-2323	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Donation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/3 Report: 60/63
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/24/2007	5 Payee name Hirsch, Andrew 6 Payee address; City; State; Zip Code 1108 W. Jessamine Fort Worth, TX 76110	7 Amount (\$) \$100.00
8 Purpose of payment (See instructions regarding type of information required.) Donation for Junior State of America program (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 06/02/2007	Payee name NAACP Building Renovation Fund Payee address; City; State; Zip Code 1063 Evans Avenue Fort Worth, TX 76104	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Donation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/15/2007	Payee name The Eppstein Group Payee address; City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109	Amount (\$) \$862.58
Purpose of payment (See instructions regarding type of information required.) Yardsigns (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/15/2007	Payee name The Eppstein Group Payee address; City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109	Amount (\$) \$1,918.13
Purpose of payment (See instructions regarding type of information required.) Phonebank services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/3 Report: 61/63

2 FILER NAME Moncrief, Michael J.

3 ACCOUNT # (Ethics Commission filers)
00020482

4 Date	5 Payee name The Eppstein Group	7 Amount (\$)
05/15/2007	6 Payee address; City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109	\$1,376.50

8 Purpose of payment (See instructions regarding type of information required.)
Advertising placement

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date	Payee name The Eppstein Group	Amount (\$)
05/15/2007	Payee address; City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109	\$11,416.56

Purpose of payment (See instructions regarding type of information required.)
Mailing services

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date	Payee name U.S. Postmaster	Amount (\$)
05/15/2007	Payee address; City; State; Zip Code 819 Taylor Fort Worth, TX 76102	\$123.00

Purpose of payment (See instructions regarding type of information required.)
Postage

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 62/63
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date 05/15/2007	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 (\$) \$1.47
8 Purpose of payment (See instructions regarding type of information required.) Reimbursement for postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 06/21/2007	Business name Mike Moncrief Investments, Inc. Business address; City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth, TX 76102	Amount (\$) \$10.25
Purpose of payment (See instructions regarding type of information required.) Reimbursement for postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 63/63

2 FILER NAME Moncrief, Michael J.

3 ACCOUNT # (Ethics Commission filers)
00020482

4 Date	5 Payor name Worth National Bank	8 Amount (\$)
05/31/2007	6 Payor address; City; State; Zip Code 801 Cherry Street Fort Worth, TX 76102	\$52.64
	7 Reason for credit Interest on accounts	
05/31/2007	Payor name Worth National Bank ----- Payor address; City; State; Zip Code 801 Cherry Street Fort Worth, TX 76102	\$196.80
	Reason for credit Interest on accounts	
06/30/2007	Payor name Worth National Bank ----- Payor address; City; State; Zip Code 801 Cherry Street Fort Worth, TX 76102	\$31.44
	Reason for credit Interest on accounts	
06/30/2007	Payor name Worth National Bank ----- Payor address; City; State; Zip Code 801 Cherry Street Fort Worth, TX 76102	\$569.90
	Reason for credit Interest on accounts	