

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission Mers)

2 PAGE #
1 of 60

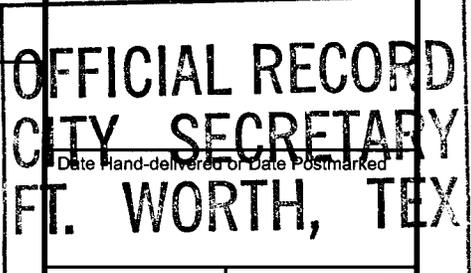
3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Michael J.
NICKNAME LAST SUFFIX
Mike Moncrief

OFFICE USE ONLY
Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
Fort Worth Club Tower, Suite 1030
Fort Worth, TX 76102



Date Hand-delivered or Date Postmarked

Change of Address

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Robert L.
NICKNAME LAST SUFFIX
Herchert

Receipt # Amount
Date Processed
Date Imaged

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
777 Taylor Street, Suite 1030
Fort Worth, TX 76102

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 338-1225

8 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year
07/01/2009 12/31/2009

10 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
 Primary Runoff General Special

11 OFFICE

OFFICE HELD (if any)
Mayor, City of Ft. Worth

12 OFFICE SOUGHT (if known)

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Moncrief, Michael J.

15 ACCOUNT # (Ethics Commission filers)
00020482

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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	79,650.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	40,809.82
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	218,311.97
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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18 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.

(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 15th day of JANUARY, 20 10, to certify which, witness my hand and seal of office.

(Signature)
Signature of officer administering oath

KRISTINA K. TRAVER
Print name of officer administering oath

ADMINISTRATIVE ASSISTANT
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/38 Report: 3/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 09/29/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Acme Brick Company Good Government Fund 6 Contributor address; City; State; Zip Code 2821 West 7th Street Fort Worth, TX 76107	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 10/14/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Albright, Keith 6 Contributor address; City; State; Zip Code 199 Coronado Bend Fort Worth, TX 76108	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 10/26/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander, R. Denny 6 Contributor address; City; State; Zip Code 4200 S. Hulen St., Suite 617 Fort Worth, TX 76109	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 09/29/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andersen, Richard T. 6 Contributor address; City; State; Zip Code 2201 Windsor Pl. Fort Worth, TX 76110	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 09/24/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Appleman, Louise 6 Contributor address; City; State; Zip Code 3855 Bellaire Circle Fort Worth, TX 76109	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/38 Report: 7/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 09/22/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Robert W. 6 Contributor address; City; State; Zip Code 4100 Clarke Ave. Fort Worth, TX 76107-2407	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 10/26/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryant, Vernon W. 6 Contributor address; City; State; Zip Code 1712 Carleton Fort Worth, TX 76107	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/07/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burnett, J. V. 6 Contributor address; City; State; Zip Code 1600 Texas St., #2804 Fort Worth, TX 76102	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 10/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cantey Hanger LLP 6 Contributor address; City; State; Zip Code 600 West 6th St., Suite 300 Fort Worth, TX 76102	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 09/24/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cantrell, Patsy Luther 6 Contributor address; City; State; Zip Code 4954 FM 1187, Box 277 Cresson, TX 76035	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/38 Report: 8/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 09/22/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carrier, Judith J. 6 Contributor address; City; State; Zip Code 3720 Wooten Drive Fort Worth, TX 76133-2038	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 10/26/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carter, Bill Contributor address; City; State; Zip Code 5505 Cedar Creek Lane Dallas, TX 75252	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 10/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carter, Tim H. Contributor address; City; State; Zip Code 3408 Rustwood Ct. Fort Worth, TX 76109-2440	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 09/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carter Burdette Campaign Contributor address; City; State; Zip Code 600 W. 6th St., Suite 300 Fort Worth, TX 76102	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 09/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carvey, Louise Britt Contributor address; City; State; Zip Code 3601 Overton Park Dr. E. Fort Worth, TX 76109	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/38 Report: 14/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 10/26/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Freese, Lee 6 Contributor address; City; State; Zip Code 4055 International Plaza, Suite 200 Fort Worth, TX 76109	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Freese and Nichols PAC Contributor address; City; State; Zip Code 4055 International Plaza, Suite 200 Fort Worth, TX 76109	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frizzell, Ted Contributor address; City; State; Zip Code P.O. Box 471531 Fort Worth, TX 76147	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/21/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ft. Worth Retired Firefighters and Widows Comm for Resp Govt Contributor address; City; State; Zip Code 1617 Tierney Road Fort Worth, TX 76712	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gachman, Arnold Contributor address; City; State; Zip Code 1229 Shady Oaks Lane Fort Worth, TX 76107	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/38 Report: 16/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 10/06/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Girouard, Marvin J. 6 Contributor address; City; State; Zip Code 2433 Medford Court East Fort Worth, TX 76109	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Good Government Fund Contributor address; City; State; Zip Code 201 Main Street, Suite 2500 Fort Worth, TX 76102	Amount of contribution (\$) \$3,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goodwin, Jerry Contributor address; City; State; Zip Code 6308 Estates Lane Fort Worth, TX 76137	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gossage, Melinda Contributor address; City; State; Zip Code 8920 Crest Wood Fort Worth, TX 76179	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grammer, John M. Contributor address; City; State; Zip Code 218 N. Bailey Fort Worth, TX 76107	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/38 Report: 18/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 10/02/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Half Associates State PAC 6 Contributor address; City; State; Zip Code 1201 North Bowser Rd. Richardson, TX 75081	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 07/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hammer and Nails Club - Candidate Contributor address; City; State; Zip Code 6464 Brentwood Stair Rd., Suite 100 Fort Worth, TX 76112	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 09/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hawthorne, Douglas D. Contributor address; City; State; Zip Code 4425 Potomac Ave. Dallas, TX 75205	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Head, Virginia K. Contributor address; City; State; Zip Code 4901 Dexter Ave. Fort Worth, TX 76107	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/13/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hernandez, Francisco Contributor address; City; State; Zip Code P.O. Box 12007 Fort Worth, TX 76110	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 22/38 Report: 24/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 09/25/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowrance, Dan E. 6 Contributor address; City; State; Zip Code 4051 Modlin Ave. Fort Worth, TX 76107	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 11/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luskey Brothers Investment Contributor address; City; State; Zip Code 2601 N. Main St. Fort Worth, TX 76106	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mastin, Thomas F. IV Contributor address; City; State; Zip Code 1009 Henderson Street Fort Worth, TX 76102	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Stephen C. Contributor address; City; State; Zip Code 3904 Driskell Blvd. 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 10/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCollum, Guy M. Contributor address; City; State; Zip Code 5613 Collinwood Fort Worth, TX 76107	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/38 Report: 25/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 10/13/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDonald, Judy 6 Contributor address; City; State; Zip Code 3578 West 4th Fort Worth, TX 76107	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGuffee, Randy Contributor address; City; State; Zip Code 8333 Summer Park Dr. Fort Worth, TX 76123	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/18/2009	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 (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2009	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 (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/29/2009	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)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/38 Report: 29/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 10/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parker, Fred 6 Contributor address; City; State; Zip Code 7051 Allen Place Fort Worth, TX 76116	7 Amount of contribution (\$) \$100.00	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 10/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pavlik & Associates LP Contributor address; City; State; Zip Code 6115 Camp Bowie Blvd., Suite 270 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 10/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perot, H. R. Jr. Contributor address; City; State; Zip Code P.O. Box 269014 Plano, TX 75026-9014	Amount of contribution (\$) \$5,000.00	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 10/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, Gregory J. Contributor address; City; State; Zip Code 1050 5th Avenue, Suite J Fort Worth, TX 76104	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 09/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pigman, Reed Jr. Contributor address; City; State; Zip Code 200 Texas Way Fort Worth, TX 76106-2782	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/38 Report: 30/60	
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482	
4 Date 10/06/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Polikov, E. Scott 6 Contributor address; City; State; Zip Code 2105 Western Ave. Fort Worth, TX 76107	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Price, Betsy Contributor address; City; State; Zip Code 3908 Summercrest Dr. Fort Worth, TX 76109	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PSEL PAC Contributor address; City; State; Zip Code 201 Main St., Suite 2500 Fort Worth, TX 76102	Amount of contribution (\$) \$3,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Purifoy, Amy Contributor address; City; State; Zip Code 3704 Autumn Dr. Fort Worth, TX 76109	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/14/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rabalais, F. W. Contributor address; City; State; Zip Code P.O. Box 1567 Fort Worth, TX 76101-1567	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	