

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TEX

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT #
 (Ethics Commission filers)
 00020482

2 PAGE #
 1 of 13

3 CANDIDATE / OFFICEHOLDER NAME

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

OFFICE USE ONLY

Date Received

RECEIVED
JUL 13 2011
 CITY OF FORT WORTH
 CITY SECRETARY

Date Hand-delivered to Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

Change of Address

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

5 CAMPAIGN TREASURER NAME

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

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
 01/01/2011 06/30/2011

10 ELECTION

ELECTION DATE Month Day Year ELECTION TYPE
 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

additional pages

... 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

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**

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **\$ 0.00**

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED **\$ 0.00**

4. TOTAL POLITICAL EXPENDITURES **\$ 23,753.93**

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 148,411.99**

OUTSTANDING LOAN TOTALS

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

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 12th day of JULY, 20 11, 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

ADMIN. ASST.
Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/8 Report: 3/13		2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (TEC filers) 00020482	
4 Date 03/04/2011		5 Payee name A Wish With Wings, Inc.			
6 Amount (\$) \$1,750.00		7 Payee address City; State; Zip Code 917 West Sanford Arlington, TX 76012			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsorship donation for benefit luncheon event	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 03/30/2011		Payee name A Wish With Wings, Inc.			
Amount (\$) \$750.00		Payee address City; State; Zip Code 917 West Sanford Arlington, TX 76012			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsorship donation for benefit luncheon event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 03/31/2011		Payee name Air Center Helicopters, Inc.			
Amount (\$) \$1,730.00		Payee address City; State; Zip Code 150 Aviation Way, Hangar 17N Fort Worth, TX 76106-2757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transportation, Texas Motor Speedway race ceremonies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 03/04/2011		Payee name Ben Hogan Foundation			
Amount (\$) \$500.00		Payee address City; State; Zip Code P.O. Box 121518 Fort Worth, TX 76121			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for scholarships and children's programs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/8 Report: 4/13	2 FILER NAME Moncrief, Michael J.	3 ACCOUNT # (TEC filers) 00020482
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4 Date 03/28/2011	5 Payee name Catholic Charities
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6 Amount (\$) \$300.00	7 Payee address City; State; Zip Code 249 West Thornhill Dr. Fort Worth, TX 76115
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for family services programs
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/17/2011	Payee name Code Blue Golf Tournament
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Amount (\$) \$750.00	Payee address City; State; Zip Code P.O. Box 40012 Fort Worth, TX 76140
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsorship donation to support Citizens on Patrol program
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/02/2011	Payee name Danny Scarth Campaign Fund
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Amount (\$) \$250.00	Payee address City; State; Zip Code 505 High Woods Trail Fort Worth, TX 76112
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to Fort Worth district 4 city council candidate
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 04/19/2011	Payee name Danny Scarth Campaign Fund
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Amount (\$) \$250.00	Payee address City; State; Zip Code 505 High Woods Trail Fort Worth, TX 76112
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to Fort Worth district 4 city council candidate
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/8 Report: 5/13		2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (TEC filers) 00020482	
4 Date 03/29/2011	5 Payee name Dennis Shingleton Campaign				
6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code P.O. Box 470336 Fort Worth, TX 76147				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to Fort Worth district 7 city council candidate		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/08/2011	Payee name Dennis Shingleton Campaign				
Amount (\$) \$500.00	Payee address City; State; Zip Code P.O. Box 470336 Fort Worth, TX 76147				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to Fort Worth district 7 city council candidate		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 02/14/2011	Payee name Downtown Fort Worth Initiatives, Inc.				
Amount (\$) \$4,000.00	Payee address City; State; Zip Code 777 Taylor Street, Suite 100 Fort Worth, TX 76102				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for JFK Tribute event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/14/2011	Payee name Downtown Fort Worth Initiatives, Inc.				
Amount (\$) \$1,000.00	Payee address City; State; Zip Code 777 Taylor Street, Suite 100 Fort Worth, TX 76102				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for JFK Tribute event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/8 Report: 6/13	2 FILER NAME Moncrief, Michael J.	3 ACCOUNT # (TEC filers) 00020482
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4 Date 03/02/2011	5 Payee name Fort Worth Police Officers' Award Foundation
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6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code P.O. Box 17659 Fort Worth, TX 76102
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsorship, 59th Annual Awards Dinner
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/25/2011	Payee name Fort Worth Sister Cities International
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Amount (\$) \$250.00	Payee address City; State; Zip Code 808 Throckmorton Fort Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to support commemoration project at the Stockyards
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/10/2011	Payee name Frank Moss Campaign
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Amount (\$) \$250.00	Payee address City; State; Zip Code 5625 Eisenhower Fort Worth, TX 76112
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to Ft. Worth district 5 city council candidate
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/10/2011	Payee name Gary Fickes Campaign
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Amount (\$) \$250.00	Payee address City; State; Zip Code 2875 Exchange Southlake, TX 76092
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to county commissioner candidate
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/8 Report: 7/13	2 FILER NAME Moncrief, Michael J.	3 ACCOUNT # (TEC filers) 00020482
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4 Date 01/20/2011	5 Payee name Hedgepeth, Jane
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6 Amount (\$) \$260.00	7 Payee address City; State; Zip Code 1339 Bonham Terrace Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign finance reporting services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/14/2011	Payee name Joel Burns Campaign
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Amount (\$) \$250.00	Payee address City; State; Zip Code P.O. Box 12663 Fort Worth, TX 76110
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to Fort Worth district 9 city council candidate
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 04/15/2011	Payee name Jungus Jordan Campaign
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Amount (\$) \$500.00	Payee address City; State; Zip Code 5316 Starry Court Fort Worth, TX 76123
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution to Fort Worth district 6 city council candidate
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/02/2011	Payee name Kay Granger Campaign Fund
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Amount (\$) \$500.00	Payee address City; State; Zip Code 715 Jones Street, Suite 101 Fort Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/8 Report: 8/13	2 FILER NAME Moncrief, Michael J.	3 ACCOUNT # (TEC filers) 00020482
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4 Date 03/02/2011	5 Payee name Roger Williams U.S. Senate Committee
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6 Amount (\$) \$1,500.00	7 Payee address City; State; Zip Code P.O. Box 1504 Austin, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/02/2011	Payee name Sal Espino Campaign
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Amount (\$) \$250.00	Payee address City; State; Zip Code 3009 Race Street Fort Worth, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution to Ft. Worth district 2 city council candidate
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/06/2011	Payee name Tarrant Area Food Bank
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Amount (\$) \$200.00	Payee address City; State; Zip Code P.O. Box 11527 Fort Worth, TX 76110
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to support summer food programs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/14/2011	Payee name Tarrant Literacy Coalition
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Amount (\$) \$1,000.00	Payee address City; State; Zip Code P.O. Box 470744 Fort Worth, TX 76147
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsorship donation, Tarrant Literacy Coalition corporate spelling bee fundraiser
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/8 Report: 9/13	2 FILER NAME Moncrief, Michael J.	3 ACCOUNT # (TEC filers) 00020482
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4 Date 01/14/2011	5 Payee name Texas Health Harris Methodist Foundation
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6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code 6100 Western Place, Suite 1001 Fort Worth, TX 76107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation for care coordination program
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/18/2011	Payee name The Hope Walk Foundation
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Amount (\$) \$5,000.00	Payee address City; State; Zip Code 44330 Mercure Circle, Suite 220 Dulles, VA 20166
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsorship of Super Bowl-connected event to benefit Cook Children's Hospital and Ft. Worth ISD
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 02/14/2011	Payee name Thing Design
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Amount (\$) \$510.00	Payee address City; State; Zip Code 3821 Clarke Avenue Fort Worth, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Equipment rental for press conference
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 02/11/2011	Payee name U.S. Postmaster
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Amount (\$) \$202.00	Payee address City; State; Zip Code 819 Taylor Fort Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Post office box rental and keys
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/8 Report: 10/13	2 FILER NAME Moncrief, Michael J.	3 ACCOUNT # (TEC filers) 00020482
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4 Date 05/03/2011	5 Payee name Union Gospel Mission of Tarrant County
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6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 1321 E. Lancaster Avenue Fort Worth, TX 76102
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Donation to support services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 11/13	2 FILER NAME Moncrief, Michael J.	3 ACCOUNT # (TEC filers) 00020482
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4 Date 02/14/2011	5 Business name Mike Moncrief Investments, Inc.
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6 Amount (\$) \$0.44	7 Business address City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth, TX 76102
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage used for candidate/officeholder purposes
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 03/04/2011	Business name Mike Moncrief Investments, Inc.
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Amount (\$) \$1.05	Business address City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage used for candidate/officeholder purposes
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 04/15/2011	Business name Mike Moncrief Investments, Inc.
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Amount (\$) \$0.44	Business address City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage used for candidate/officeholder purposes
-------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 12/13
2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (Ethics Commission filers) 00020482
4 Date	5 Payor name Southwest Bank	8 Amount (\$)
01/31/2011	6 Payor address; City; State; Zip Code P.O. Box 962020 Fort Worth, TX 76162	\$119.44
	7 Reason for credit Interest on campaign accounts	
Date	Payor name Southwest Bank	Amount (\$)
02/28/2011	Payor address; City; State; Zip Code P.O. Box 962020 Fort Worth, TX 76162	\$107.97
	Reason for credit Interest on campaign accounts	
Date	Payor name Southwest Bank	Amount (\$)
03/31/2011	Payor address; City; State; Zip Code P.O. Box 962020 Fort Worth, TX 76162	\$106.61
	Reason for credit Interest on campaign accounts	
Date	Payor name Southwest Bank	Amount (\$)
04/29/2011	Payor address; City; State; Zip Code P.O. Box 962020 Fort Worth, TX 76162	\$96.89
	Reason for credit Interest on campaign accounts	
Date	Payor name Southwest Bank	Amount (\$)
05/31/2011	Payor address; City; State; Zip Code P.O. Box 962020 Fort Worth, TX 76162	\$106.99
	Reason for credit Interest on campaign accounts	

CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/2 Report: 13/13

2 FILER NAME Moncrief, Michael J.

3 ACCOUNT # (Ethics Commission filers)
00020482

4 Date

06/30/2011

5 Payor name
Southwest Bank

8 Amount (\$)

\$95.10

6 Payor address; City; State; Zip Code
P.O. Box 962020
Fort Worth, TX 76162

7 Reason for credit
Interest on campaign accounts