

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME Moncrief, Michael J.

14 ACCOUNT # (Ethics Commission filers)
00020482

15 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

16 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)	\$	0.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	12,052.44
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	30,350.93
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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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17 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 10th day of JULY, 2014, 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: 1/6 Report: 3/8 **2** FILER NAME Moncrief, Michael J. **3** ACCOUNT # (TEC filers) 00020482

4 Date 02/25/2014 **5** Payee name A Wish With Wings, Inc.

6 Amount (\$) \$1,750.00 **7** Payee address City; State; Zip Code
3817 Alamo Avenue
Fort Worth, TX 76107

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) Donation to 501(c)(3) charitable organization supporting children

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

Date 01/31/2014 Payee name Betsy Price Campaign

Amount (\$) \$250.00 Payee address City; State; Zip Code
P.O. Box 100066
Fort Worth, TX 76185-0066

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) Political contribution

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

Date 05/23/2014 Payee name Day Resource Center for the Homeless

Amount (\$) \$500.00 Payee address City; State; Zip Code
1415 E. Lancaster Avenue
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) Donation to 501(c)(3) charitable organization to support homeless shelter and services

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

Date 03/26/2014 Payee name Depression Connection for Recovery

Amount (\$) \$100.00 Payee address City; State; Zip Code
3212 Collinsworth Street
Suite 3A
Fort Worth, TX 76107

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) Donation to 501(c)(3) charitable organization for depression support groups

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: 2/6 Report: 4/8		2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (TEC filers) 00020482	
4 Date 03/07/2014		5 Payee name Fort Worth Police Officers' Award Foundation			
6 Amount (\$) \$100.00		7 Payee address City; State; Zip Code P.O. Box 17659 Fort Worth, TX 76102			
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 police service awards foundation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/31/2014		Payee name Fort Worth S.W.A.T. Support Group			
Amount (\$) \$5,000.00		Payee address City; State; Zip Code 4827 Camp Bowie Blvd. Fort Worth, TX 76107			
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 501(c)(3) charitable organization to support Fort Worth S.W.A.T. team	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/06/2014		Payee name Fort Worth Stockyards National Historic District			
Amount (\$) \$200.00		Payee address City; State; Zip Code 130 E. Exchange Avenue Fort Worth, TX 76164			
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 National Historic District Cowtown Goes Green event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 04/02/2014		Payee name Friends of Weatherford FFA			
Amount (\$) \$100.00		Payee address City; State; Zip Code P.O. Box 1341 Weatherford, TX 76086			
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 non-profit organization supporting scholarships for FFA members	
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: 3/6 Report: 5/8		2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (TEC filers) 00020482	
4 Date 01/22/2014		5 Payee name Hedgepeth, Jane			
6 Amount (\$) \$243.75		7 Payee address City; State; Zip Code 1339 Bonham Terrace Austin, TX 78704			
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	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/25/2014		Payee name Kay Granger Campaign Fund			
Amount (\$) \$250.00		Payee address City; State; Zip Code 715 Jones Street, Suite 101 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"/> Political contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/23/2014		Payee name Mike Moncrief Investments, Inc.			
Amount (\$) \$0.69		Payee address City; State; Zip Code 777 Taylor Street, Suite 1030 Fort Worth, TX 76102			
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"/> Office postage used	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/28/2014		Payee name Ramon Romero Campaign			
Amount (\$) \$250.00		Payee address City; State; Zip Code 3907 E. Lancaster Avenue Fort Worth, TX 76103			
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"/> Political contribution	
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: 4/6 Report: 6/8		2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (TEC filers) 00020482	
4 Date 06/10/2014		5 Payee name Sanford, Baumeister & Frazier LLP			
6 Amount (\$) \$608.00		7 Payee address City; State; Zip Code 512 Main St Suite 1500 Fort Worth, TX 76102			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political funds auditing and accounting services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/01/2014		Payee name Southwestern Exposition and Livestock Show			
Amount (\$) \$100.00		Payee address City; State; Zip Code P.O. Box 150 Fort Worth, TX 76101-0150			
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 501(c)(3) charitable organization for Equine Youth Scholarship Program	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/22/2014		Payee name Steve Dugan Campaign			
Amount (\$) \$200.00		Payee address City; State; Zip Code 3605 Lakeshore Drive Weatherford, TX 76087			
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"/> Political contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/26/2014		Payee name Tarrant Area Community of Churches			
Amount (\$) \$1,000.00		Payee address City; State; Zip Code 2601 Clover Lane Fort Worth, TX 76109			
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 501(c)(3) charitable organization for homeless day laborers' lunches	
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)

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1 PAGE # Schedule: 5/6 Report: 7/8		2 FILER NAME Moncrief, Michael J.		3 ACCOUNT # (TEC filers) 00020482	
4 Date 04/16/2014		5 Payee name Tarrant Area Food Bank			
6 Amount (\$) \$200.00		7 Payee address City; State; Zip Code 2600 Cullen Street Fort Worth, TX 76107-1302			
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 501(c)(3) charitable organization supporting food services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/22/2014		Payee name Tarrant County Junior Livestock Association			
Amount (\$) \$200.00		Payee address City; State; Zip Code 6713 Telephone Road Fort Worth, TX 76135			
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 501(c)(3) charitable organization to support junior livestock show participants	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 03/26/2014		Payee name Tarrant Literacy Coalition			
Amount (\$) \$250.00		Payee address City; State; Zip Code P.O. Box 470744 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"/> Donation to 501(c)(3) charitable organization to support literacy services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 06/10/2014		Payee name The Women's Center			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1723 Hemphill Fort Worth, TX 76110			
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 501(c)(3) charitable organization to support women's services	
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: 6/6 Report: 8/8	2 FILER NAME Moncrief, Michael J.	3 ACCOUNT # (TEC filers) 00020482
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4 Date 03/26/2014	5 Payee name Voters Supporting Fort Worth's Future
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6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 777 Taylor Street Suite 900 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"/> Political contribution supporting bond 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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