

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **7**

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	NICKNAME	LAST	SUFFIX		
Mr.		Michael	D.	Date Received	
Crain				CSO REC'D JAN 15 '25 PM1:37	
Change of Address					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
Fort Worth, TX 76109					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
Mr.		Wade		Receipt #	
Chappell				Amount \$	
Date Processed		Date Imaged			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
(Residence or Business)	6329 Klamath Road			Fort Worth	TX 76116
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
(817)		965-3524			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
	7	1	24		12 31 24
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
	5	3	25	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
	District 3, Fort Worth City Council		District 3, Fort Worth City Council		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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.				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS			
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Michael D. Crain		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 8,250.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 16,821.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 513,875.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE 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 of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Michael Crain this the 15th day of January.

2025, to certify which, witness my hand and seal of office.

Beth Ellis Signature of officer administering oath Beth Ellis Printed name of officer administering oath Notary Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____ (month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Michael D. Crain		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,250.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 16,821.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2
2 FILER NAME Michael D. Crain		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#: _____) See Attached	7 Amount of contribution (\$)
	6 Contributor address; City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

Date	Amount	First Name	Last Name	Address 1	Address 2	City	State	Zip	Employer	Occupation
10/28/24	\$5,000.00	Dan	McDonald	2501 Parkview Drive	400	Fort Worth	TX	76102	McDonald Law Firm	Attorney
10/21/24	\$1,000.00	Ashley Frederick	Booth	2001 Bryan Street	1500	Dallas	TX	75201	HNTB Corporation	Office Leader
8/14/24	\$150.00	Megan	Wills	8601 Elmwood Drive		Benbrook	TX	76116	TSCRA	CPA
8/14/24	\$100.00	Cheryl	Kimberling	2306 Park Place 4B		Fort Worth	TX	76110	unknown	Dr
7/9/24	\$1,000.00	David	Doll	P.O. Box 27552		Houston	TX	77227	Retired	Retired
7/1/24	\$1,000.00	Martha	Leonard	1411 Shady Oaks Lane		Fort Worth	TX	76107	Retired	Retired

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME Michael D. Crain	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name See Attached	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Post Date	Payee	Amount	Category	Description
12/18/2024	CAPITAL GRILLE	\$1,024	Event Expense	F&B
12/17/2024	ATT	\$294	Office Overhead	Phone
12/13/2024	Prime Video	\$10	Office Overhead	Misc
12/12/2024	ATT	\$116	Office Overhead	Phone
12/12/2024	EIG*CONSTANTCONT	\$325	Office Overhead	Email
12/10/2024	TC Sales	\$500	Travel	Transportation
12/09/2024	Walmart.com	\$341	Office Overhead	Misc
12/04/2024	GOOGLE *Google	\$2	Office Overhead	Email
12/03/2024	PUBLIC STORAGE	\$268	Office Overhead	Storage
12/02/2024	USPS.COM	\$630	Office Overhead	Postage
12/02/2024	ZAZZLE INC	\$89	Office Overhead	Misc
12/02/2024	GOOGLE*GSUITE	\$31	Office Overhead	Email
11/27/2024	SP OXFORD PENNAN	\$129	Office Overhead	Misc
11/25/2024	AMERICAN HEART	\$500	Other	Donation
11/25/2024	PAYPAL *OPPUKRI	\$108	Office Overhead	Misc
11/19/2024	LVTRise	\$200	Other	Donation
11/18/2024	ATT	\$294	Office Overhead	Phone
11/12/2024	ATT	\$111	Office Overhead	Phone
11/12/2024	EIG*CONSTANTCONT	\$325	Office Overhead	Email
11/07/2024	TC Sales	\$500	Travel	Transportation
11/05/2024	GOOGLE	\$2	Office Overhead	Email
11/04/2024	PUBLIC STORAGE	\$268	Office Overhead	Storage
11/04/2024	Google GSUITE	\$31	Office Overhead	Email
10/31/2024	PONCHO	\$184	Advertising	Paraphernalia
10/21/2024	STRONGER TOGETHE	\$710	Other	Donation
10/21/2024	GB* FORT WORTH	\$124	Other	Donation
10/21/2024	Defender Defend Fort Worth	\$60	Other	Donation
10/18/2024	2024 Rise Lunch	\$100	Event Expense	F&B
10/17/2024	TC Sales	\$500	Travel	Transportation
10/17/2024	ATT	\$462	Office Overhead	Phone
10/15/2024	ATT	\$111	Office Overhead	Phone
10/15/2024	EIG*CONSTANTCONT	\$325	Office Overhead	Email
10/15/2024	ATO FORT WORTH	\$50	Other	Donation
10/07/2024	One Safe Place Donation	\$1,000	Other	Donation
10/07/2024	GOOGLE	\$2	Office Overhead	Email
10/07/2024	ATO FORT WORTH	\$10	Other	Office
10/03/2024	PUBLIC STORAGE	\$268	Office Overhead	Storage
10/02/2024	GOOGLE *GSUITE	\$31	Office Overhead	Email
09/30/2024	PAPPASITOS	\$68	Event Expense	F&B
09/30/2024	Prime Video	\$18	Office Overhead	Misc
09/17/2024	ATT	\$293	Office Overhead	Phone
09/12/2024	EIG*CONSTANTCONT	\$325	Office Overhead	Email
09/11/2024	ATT	\$111	Office Overhead	Phone
09/11/2024	HF CUSTOM SOLUTIONS	\$368	Advertising	Paraphernalia
09/10/2024	NTX*LVTRISE	\$100	Other	Donation
09/06/2024	TC Sales	\$500	Travel	Transportation
09/05/2024	GOOGLE	\$2	Office Overhead	Email
09/03/2024	PUBLIC STORAGE	\$268	Office Overhead	Storage
09/03/2024	GOOGLE *GSUITE	\$31	Office Overhead	Email
08/23/2024	CNK*CINEMARK	\$348	Event Expense	Tickets
08/19/2024	TC Sales	\$500	Travel	Transportation
08/19/2024	ATT	\$381	Office Overhead	Phone
08/19/2024	CNK*CINEMARK	\$349	Event Expense	Tickets
08/12/2024	ATT	\$111	Office Overhead	Phone
08/12/2024	EIG*CONSTANTCONT	\$325	Office Overhead	Email
08/05/2024	PUBLIC STORAGE	\$268	Office Overhead	Storage
08/05/2024	GOOGLE	\$2	Office Overhead	Email
08/02/2024	GOOGLE GSUITE	\$31	Office Overhead	Email
07/22/2024	Murphy Nasica	\$500	Consulting Expense	Fee
07/17/2024	ATT	\$293	Office Overhead	Phone
07/12/2024	ATT	\$111	Office Overhead	Phone
07/12/2024	CAKEBREAD	\$453	Event Expense	F&B
07/12/2024	EIG*CONSTANTCONT	\$325	Office Overhead	Email
07/11/2024	SQ *RODEO	\$375	Event Expense	F&B
07/05/2024	GOOGLE	\$2	Office Overhead	Email
07/03/2024	PUBLIC STORAGE	\$268	Office Overhead	Storage
07/02/2024	GOOGLE *GSUITE	\$31	Office Overhead	Email
07/01/2024	CHICK-FIL-A	\$31	Event Expense	F&B
		\$16,821		