

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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: 1

1

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR	FIRST Vincent	MI T
	NICKNAME Vince	LAST Griffin	SUFFIX

**OFFICE USE ONLY**

Date Received

2021 JUL 12 AM 11:26

FILED

BY \_\_\_\_\_

JOHN F. WARREN  
COUNTY CLERK  
DALLAS COUNTY

Date Hand-delivered or Date Postmarked

Receipt # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; PO Box 471	APT / SUITE #;	CITY; Wylie	STATE; TX	ZIP CODE 75098
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Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (972 )	PHONE NUMBER 978-6225	EXTENSION
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6 CAMPAIGN TREASURER NAME	MS / MRS / MR MR	FIRST Robert	MI MI
	NICKNAME	LAST Canady	SUFFIX III

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 5146 S. Country Club Pkwy	APT / SUITE #;	CITY; Garland	STATE; TX	ZIP CODE 75043
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8 CAMPAIGN TREASURER PHONE	AREA CODE (972 )	PHONE NUMBER 303-6511	EXTENSION
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9 REPORT TYPE	<input 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 checked="" 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
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11 ELECTION	ELECTION DATE Month / Day / Year 11 / 8 / 22	ELECTION TYPE Primary Runoff <input checked="" type="checkbox"/> General Special	Other Description
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12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Dallas County Constable Pct 2
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14 NOTICE FROM POLITICAL COMMITTEE(S)  Additional Pages	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.		
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	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**

Vincent T. Griffin

**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) \$ **0.00**

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ **2,046.80**

**EXPENDITURE TOTALS**

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ **0.00**

4. TOTAL POLITICAL EXPENDITURES \$ **735.13**

**CONTRIBUTION BALANCE**

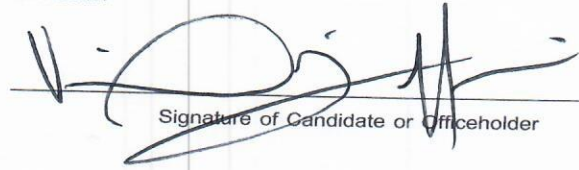
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ **6,370.66**

**OUTSTANDING LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ **5,000.00**

**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

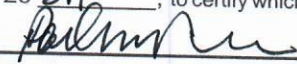
Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by VINCENT T. Griffin this the 11 day of JULY

2021, to certify which, witness my hand and seal of office.



PATRICE R. MORRIS

NOTARY PUBLIC

Signature of officer administering oath

Printed name of officer administering oath

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

Vincent T. Griffin

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,046.80
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 735.13
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: **4**  
1 of 4

2 FILER NAME

Vincent T. Griffin

3 Filer ID (Ethics Commission Filers)

4 Date

06/10/2021

5 Full name of contributor

Derek Crist

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

**250.00**

6 Contributor address;

City;

State;

Zip Code

5146 S. Country Club Rd Garland TX 75043

8 Principal occupation / Job title (See Instructions)

Accounting

9 Employer (See Instructions)

ANF Church

Date

06/10/2021

Full name of contributor

George Mount

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**50.00**

Contributor address;

City;

State;

Zip Code

1404 Scottsboro Rich, TX 75082

Principal occupation / Job title (See Instructions)

Doctor

Employer (See Instructions)

Self

Date

06/11/2021

Full name of contributor

David Rogers

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**100.00**

Contributor address;

City;

State;

Zip Code

10233 N Emerald Ranch LN Forney TX 75126

Principal occupation / Job title (See Instructions)

Realtor

Employer (See Instructions)

Self

Date

06/11/2021

Full name of contributor

Ronisue Cahill

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**50.00**

Contributor address;

City;

State;

Zip Code

6113 Homewood Ave Rowlett, TX 75089

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

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1 Total pages Schedule A1:

2 of 4

2 FILER NAME

Vincent T. Griffin

3 Filer ID (Ethics Commission Filers)

4 Date

06/12/2021

5 Full name of contributor

Darren Dailey

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State;

Zip Code

Box 974 Lindale TX 75771

8 Principal occupation / Job title (See Instructions)

Law Enforcement

9 Employer (See Instructions)

City of Rowlett

Date

06/12/2021

Full name of contributor

Kenderick Shaw

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

50.00

Contributor address;

City;

State;

Zip Code

Unk

Principal occupation / Job title (See Instructions)

Unk

Employer (See Instructions)

Unk

Date

06/13/2021

Full name of contributor

Bertha Roop

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

6820 LBJ Frwy Dallas, TX 75240

Principal occupation / Job title (See Instructions)

Law Enforcement

Employer (See Instructions)

Dallas County

Date

06/13/2021

Full name of contributor

House of Job #13

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

300.00

Contributor address;

City;

State;

Zip Code

15330 LBJ Frwy Ste108 Mesquite, TX 75150

Principal occupation / Job title (See Instructions)

Self

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:

3 of 4

2 FILER NAME

Vincent T. Griffin

3 Filer ID (Ethics Commission Filers)

4 Date

06/19/2021

5 Full name of contributor

Ron Busby

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

50.00

6 Contributor address;

City;

State;

Zip Code

9701 Castleroy Ln Rowlett, TX 75089

8 Principal occupation / Job title (See Instructions)

Unk

9 Employer (See Instructions)

Unk

Date

06/19/2021

Full name of contributor

Jim Bookhout

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

314 Stroud Garland, TX 75043

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

06/20/2021

Full name of contributor

Robert Canady III

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

5146 S Country Club Rd Garland, TX 75043

Principal occupation / Job title (See Instructions)

Pastor

Employer (See Instructions)

ANF Church

Date

06/21/2021

Full name of contributor

larry Byers

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

96.80

Contributor address;

City;

State;

Zip Code

6820 LBJ Frwy Dallas, TX 75240

Principal occupation / Job title (See Instructions)

Law Enforcement

Employer (See Instructions)

Dallas County

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

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1 Total pages Schedule A1: **4 of 4**

2 FILER NAME

Vincent T. Griffin

3 Filer ID (Ethics Commission Filers)

4 Date

06/23/2021

5 Full name of contributor

Robert Williams

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

**100.00**

6 Contributor address;

City;

State;

Zip Code

6358 Los Altos Mesquite, TX 75150

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

06/28/2021

Full name of contributor

Jehanara Makda

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**50.00**

Contributor address;

City;

State;

Zip Code

6109 Livingstone Rowlett, TX 75089

Principal occupation / Job title (See Instructions)

Owner operator

Employer (See Instructions)

Self

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

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.

**LOANS**

**SCHEDULE E**

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 E:

2 FILER NAME

Vincent T. Griffin

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

06/01/2021

7 Name of lender

Vincent T. Griffin

out-of-state PAC (ID#: \_\_\_\_\_ )

9 Loan Amount (\$)

5,000.00

6 Is lender a financial Institution?  
 Y  N

8 Lender address;

P O Box 471

City;

Wylie

State; Zip Code

TX 75098

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

Law Enforcement

13 Employer (See Instructions)

Dallas County

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address;

City;

State; Zip Code

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

out-of-state PAC (ID#: \_\_\_\_\_ )

Loan Amount (\$)

Is lender a financial Institution?  
 Y  N

Lender address;

City;

State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address;

City;

State; Zip Code

not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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



Filer Name: Vincent T. Griffin

F1

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

<u>Date</u>	<u>Vender</u>	<u>Expenditure</u>	<u>Amount</u>
05/25/21	Quick ID	Advertising Expense	\$30.65
05/25/21	USPS	Postage	\$22.00
05/26/21	Leadership Inst.	Class	\$25.00
05/31/21	Amazon	Checks	\$13.23
06/02/21	Magento	Advertising Expense	\$60.87
06/04/21	Amazon	Advertising Expense	\$10.80
06/08/21	Vista Print	Advertising Expense	\$57.82
06/13/21	Quick Trip	Fuel	\$60.45
06/14/21	Fastsigns	Advertising Expense	\$48.72
06/17/21	TMPA	Dues	\$11.96
06/19/21	Ernesto's	Food Expense	\$31.01
06/20/21	RaceTrac	Fuel	\$51.35
06/22/21	Ihop	Food Expense	\$11.27
<u>07/05/21</u>	<u>Affordable Uniforms</u>	<u>Advertising Expense</u>	<u>\$300</u>
			<b><u>Total \$735.13</u></b>