### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**3 CANDIDATE / OFFICEHOLDER NAME**
- **FIRST**: Vincent
- **MI**: T
- **LAST**: Griffin

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**
- **ADDRESS**: 15330 LBJ Frwy
- **CITY**: Mesquite
- **STATE**: TX
- **ZIP CODE**: 75150

**5 CANDIDATE / OFFICEHOLDER PHONE**
- **AREA CODE**: (972)
- **PHONE NUMBER**: 978-6225

**6 CAMPAIGN TREASURER NAME**
- **FIRST**: Robert
- **MI**: III
- **LAST**: Canady

**7 CAMPAIGN TREASURER ADDRESS**
- **STREET ADDRESS**: 5146 S. Country Club Pkwy
- **CITY**: Garland
- **STATE**: TX
- **ZIP CODE**: 75043

**8 CAMPAIGN TREASURER PHONE**
- **AREA CODE**: (972)
- **PHONE NUMBER**: 303-6511

**9 REPORT TYPE**
- January 15
- July 15

**10 PERIOD COVERED**
- Month
- Day
- Year

**11 ELECTION**
- **ELECTION DATE**: 11/8/22
- **ELECTION TYPE**: General

**12 OFFICE**
- **OFFICE HELD (if any)**: Dallas County Constable Pct 2

**13 OFFICE SOUGHT (if known)**
- **DESCRIPTION**: Dallas County Constable Pct 2

**14 NOTICE FROM POLITICAL COMMITTEE(S)**
- **COMMITTEE TYPE**: GENERAL
- **COMMITTEE NAME**:
- **COMMITTEE ADDRESS**:
- **COMMITTEE CAMPAIGN TREASURER NAME**:
- **COMMITTEE CAMPAIGN TREASURER ADDRESS**:

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**Forms provided by Texas Ethics Commission**

**www.ethics.state.tx.us**

**Revised 8/17/2020**
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## FORM C/OH COVER SHEET PG 2

### 15 C/OH NAME
Griffin, Vincent T.

### 16 Filer ID (Ethics Commission Filers)

### 17 CONTRIBUTION TOTALS

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<thead>
<tr>
<th></th>
<th>TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</th>
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<th>TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD</th>
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<th>TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</th>
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### 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]

Please complete either option below:

### (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____.

__________________________
Signature of Candidate/Officeholder (Declarant)

[Notary Seal]

PATRIC RUTH MORRIS
My Notary ID # 128800782
Expires February 10, 2025

Sworn to and subscribed before me this the __________ day of __________.

[Signature]

________________________________________
Signature of officer administering oath

[Printed Name]
Printed name of officer administering oath

[Title]
Title of officer administering oath

Forms provided by Texas Ethics Commission  www.ethics.state.tx.us  Revised 8/17/2020