

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:

11

OFFICE USE ONLY

Date Received

RECEIVED

OCT 04 2021

**CITY OF MESQUITE
CITY SECRETARY**

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

Tandy

K

NICKNAME

LAST

SUFFIX

Boroughs

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1204 Lakeshore Dr., Mesquite TX 75149

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(972)

571-3500

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

Nadine

NICKNAME

LAST

SUFFIX

Ward

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

425 Walnut Dr., Mesquite TX 75149

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)

801-2930

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month

Day

Year

7

/

1

/

21

THROUGH

Month

Day

Year

9

/

23

/

21

11 ELECTION

ELECTION DATE

Month

Day

Year

11

/

2

/

21

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

City Council District 4

13 OFFICE SOUGHT (if known)

City Council District 4

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.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

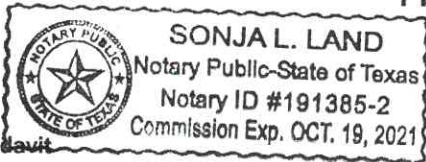
FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Tandy Boroughs		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)	\$ 250.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,313.18
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 841.25
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4,982.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,450.00

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.

Tandy Boroughs
Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Tandy Boroughs this the 4 day of Oct., 2021, to certify which, witness my hand and seal of office.
Sonja L. Land Sonja L. Land Notary
 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 Tandy Boroughs		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 5,070.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 243.18
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 841.25
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:

6

2 FILER NAME

Tandy Boroughs

3 Filer ID (Ethics Commission Filers)

4 Date

08/19/2021

5 Full name of contributor

Ted Barron

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State;

Zip Code

7708 Drew Ct, McKinney TX 75071

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

08/19/2021

Full name of contributor

Charles Creech

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

320 Birchwood Circle, Mesquite TX 75149

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

08/19/2021

Full name of contributor

Bill Porter

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

2521 Heatherdale Dr. Mesquite TX 75149

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

08/19/2021

Full name of contributor

David Belt

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

318 Riggs Circle, Mesquite TX 75149

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

White Properties

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 6

2 FILER NAME

Tandy Boroughs

3 Filer ID (Ethics Commission Filers)

4 Date

08/19/2021

5 Full name of contributor

Gene Zwillenberg

out-of-state PAC (ID#: _____)

6 Contributor address;

City;

State;

Zip Code

8044 FM 1827, McKinney TX 75071

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

08/19/2021

Full name of contributor

Fernando & Barbara Rojas

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

2423 Lagoon Dr., Mesquite TX 75149

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Manager

Employer (See Instructions)

Williams Paint & Body

Date

08/19/2021

Full name of contributor

Rickey McGilvry

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

1014 Majors Dr., Mesquite TX 75149

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Epps Property Mgmt - Owner

Date

08/19/2021

Full name of contributor

Kelly Wagner

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

625 Pecan Dr., Mesquite TX 75149

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 6

2 FILER NAME

Tandy Boroughs

3 Filer ID (Ethics Commission Filers)

4 Date

08/19/2021

5 Full name of contributor

Helen Ethridge

out-of-state PAC (ID#: _____)

6 Contributor address;

City;

State;

Zip Code

1614 Greywood, Mesquite TX 75149

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

Florist / Retired

9 Employer (See Instructions)

Windsor Florist

Date

08/19/2021

Full name of contributor

George & Bennye Rice

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

1004 Craig Dr., Mesquite TX 75149

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

08/19/2021

Full name of contributor

Denise Childs

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

8820 FM 1565, Royse City TX 75189

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Human Resource

Employer (See Instructions)

City of Mesquite

Date

08/19/2021

Full name of contributor

Mary Jo Pickett

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

512 Woodstream Place, Mesquite TX 75149

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Retired

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.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4 of 6

2 FILER NAME

Tandy Boroughs

3 Filer ID (Ethics Commission Filers)

4 Date

08/19/2021

5 Full name of contributor

Tony Boroughs

out-of-state PAC (ID#: _____)

6 Contributor address;

City;

State;

Zip Code

11779 CR 354, Terrell TX 75161

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

Firefighter

9 Employer (See Instructions)

Sunnyvale Fire Department

Date

08/19/2021

Full name of contributor

Penny Boroughs

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

11779 CR 354, Terrell TX 75161

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Accounts Payable

Employer (See Instructions)

EI Dorado Chemical

Date

08/19/2021

Full name of contributor

Eddie Rose

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

516 Woodstream Place, Mesquite TX 75149

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Firefighter

Employer (See Instructions)

Mesquite Fire Department

Date

08/19/2021

Full name of contributor

James Terry

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

2320 Heatherdale, Mesquite TX 75149

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Retired

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.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

5 of 6

2 FILER NAME

Tandy Boroughs

3 Filer ID (Ethics Commission Filers)

4 Date

08/19/2021

5 Full name of contributor

Terry Brimer

out-of-state PAC (ID#: _____)

6 Contributor address;

City;

State;

Zip Code

909 Lakeland Dr., Mesquite TX 75149

7 Amount of contribution (\$)

300.00

8 Principal occupation / Job title (See Instructions)

Director of Sales

9 Employer (See Instructions)

Eric Davis Engineering

Date

08/26/2021

Full name of contributor

Belinda Epps

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

213 E. Davis St., Mesquite TX 75149

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Real Estate

Employer (See Instructions)

Epps Realty - Owner

Date

08/26/2021

Full name of contributor

Melinda Epps

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

213 E. Davis St., Mesquite TX 75149

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Real Estate

Employer (See Instructions)

Epps Property Mgmt - Owner

Date

09/04/2021

Full name of contributor

Melody Rohde

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

1210 Majors Dr., Mesquite TX 75149

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Retired

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.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>6 of 6</i>
2 FILER NAME Tandy Boroughs		3 Filer ID (Ethics Commission Filers)
4 Date 09/09/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Meg Dorman 6 Contributor address; City; State; Zip Code 5270 Milam Rd., Mesquite TX 75181	7 Amount of contribution (\$) 400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/09/2021	Full name of contributor out-of-state PAC (ID#: _____) Brent Williams Contributor address; City; State; Zip Code 924 Military Parkway, Mesquite TX 75149	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Williams Paint & Body
Date 09/10/2021	Full name of contributor out-of-state PAC (ID#: _____) CM Schade Contributor address; City; State; Zip Code P O Box 850069 Mesquite TX 75185	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Retired		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)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 1	
2 FILER NAME Tandy Boroughs		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 08/19/2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stan & Mary Jo Pickett	8 Amount of Contribution \$ 243.18	9 In-kind contribution description Fundraiser
7 Contributor address; City; State; Zip Code 512 Woodstream Place Mesquite TX 75149		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retail Businessowner		11 Employer (FOR NON-JUDICIAL)(See Instructions) Quality Furniture	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

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: 1	2 FILER NAME Tandy Boroughs	3 Filer ID (Ethics Commission Filers)
4 Date 08/26/2021	5 Payee name Shannon Long	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 1009 Ashland Dr., Mesquite TX 75149	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expenses	(b) Description Door hangers
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
Date 09/15/2021	Payee name Mesquite Signs	
Amount (\$) 541.25	Payee address; City; State; Zip Code 417 N Bryan-Belt Line Rd, Suite A Mesquite TX 75149	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expenses	Description Political Yard Signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>
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. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <input type="checkbox"/> Office held <input type="checkbox"/>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED