CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM **COR-PAC**

1 Filer ID (Ethics Commission Filers) 00089700	**2** Total pages filed: 5

3 COMMITTEE NAME: Vote Wise Political Action Committee

4 TREASURER NAME: Mohammed, Raphe (Mr.)

5 ORIGINAL REPORT TYPE
- [ ] January 15
- [X] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] 10th day after campaign treasurer resignation
- [X] Dissolution report
- [ ] Other (specify) _____

6 ORIGINAL PERIOD COVERED

Month	Day	Year		Month	Day	Year
	04/01/2025		THROUGH		07/15/2025	

7 EXPLANATION OF CORRECTION

i entered the dates wrong for the dates covered on the semi annual report

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

- [X] **Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

- [ ] **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Raphe Mohammed
_____
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

_____
Signature of officer administering oath   Printed name of officer administering oath   Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

The GPAC Instruction Guide explains how to complete this form.	**1** Filer ID (Ethics Commission Filers) 00089700	**2** Total pages filed: 5

3 COMMITTEE NAME Vote Wise Political Action Committee	**OFFICE USE ONLY**

OFFICE USE ONLY

Date Received
ELECTRONICALLY FILED
01/14/2026

Date Hand-delivered or Date Postmarked

Receipt #   Amount

Date Processed

Date Imaged

4 COMMITTEE ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 11106 SarranoDrive Richmond, TX 77406

5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Raphe .... NICKNAME LAST SUFFIX Mohammed

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 11106 Saronno Drive Richmond, TX 77406

7 CAMPAIGN TREASURER MAILING ADDRESS ☐ Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 11106 Saronno Drive Richmond, TX 77406

8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (404) 917-7531

9 REPORT TYPE	☐ January 15 ☐ 30th day before election ☒ Dissolution (Attach PAC-DR) ☒ July 15 ☐ 8th day before election ☐ 10th day after campaign treasurer termination ☐ Runoff

10 PERIOD COVERED	Month Day Year Month Day Year 04/01/2025 THROUGH 07/15/2025

11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year ☐ Primary ☐ Runoff ☒ Other 06/01/2025 ☐ General ☐ Special

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

12 COMMITTEE NAME	**13** Filer ID	(Ethics Commission Filers)
Vote Wise Political Action Committee	00089700	

14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) ☐ check here if this report qualifies for the higher itemization threshold	$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

16 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.

Mr. Raphe Mohammed
_____
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of_____, 20_____, to certify which, witness my hand and seal of office.

_____ _____ _____
Signature of officer administering oath   Printed name of officer administering oath   Title of officer administering oath

SUBTOTALS - GPAC

17 COMMITTEE NAME	**18** Filer ID	(Ethics Commission Filers)
Vote Wise Political Action Committee	00089700	

19 SCHEDULE SUBTOTALS

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. ☐	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$
2. ☐	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3. ☐	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4. ☐	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
5. ☐	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
6. ☐	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	$
7. ☐	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	$
8. ☐	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
9. ☐	SCHEDULE E: LOANS	$
10. ☐	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
11. ☐	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
12. ☐	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$
13. ☐	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
14. ☐	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
15. ☐	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

POLITICAL COMMITTEE
AFFIDAVIT OF DISSOLUTION

The Instruction Guide explains how to complete this form. **Complete only if "Report Type" on page 1 is marked "Dissolution" **

1 COMMITTEE NAME	2 Filer ID (Ethics Commission Filers)
Vote Wise Political Action Committee	00089700

3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

Mr. Raphe Mohammed
_____
Signature of Campaign Treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____ , this the _____ day of _____ , 20_____ , to certify which, witness my hand and seal of office.

_____

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath