

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:					
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr NICKNAME FIRST Muzaffar LAST Vohra MI SUFFIX	OFFICE USE ONLY Date Received RCVD VIA EMAIL 07/15/2026 Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged						
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; 13108 Sunset cliff ct APT / SUITE #; CITY; Sugar Land TX STATE; ZIP CODE 77478							
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (832) PHONE NUMBER 5491915 EXTENSION							
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. NICKNAME FIRST Imtiyaz LAST Arab MI SUFFIX							
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 13722 Hudson Ct APT / SUITE #; CITY; Sugar Land STATE; TX ZIP CODE 77478							
8 CAMPAIGN TREASURER PHONE	AREA CODE (832) PHONE NUMBER 7686804 EXTENSION							
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 Month Day Year 1 / 1 / 26 THROUGH 06 / 30 / 26							
11 ELECTION	ELECTION DATE Month Day Year 3 / 3 / 26 ELECTION TYPE ☒ Primary ☐ Runoff ☐ Other Description ☐ General ☐ Special							
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Fort Bend District Clerk					
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. <table border="1"><tr><td rowspan="4">COMMITTEE TYPE ☐ GENERAL ☐ SPECIFIC</td><td>COMMITTEE NAME</td></tr><tr><td>COMMITTEE ADDRESS</td></tr><tr><td>COMMITTEE CAMPAIGN TREASURER NAME</td></tr><tr><td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td></tr></table>			COMMITTEE TYPE ☐ GENERAL ☐ SPECIFIC	COMMITTEE NAME	COMMITTEE ADDRESS	COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS
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	COMMITTEE ADDRESS							
	COMMITTEE CAMPAIGN TREASURER NAME							
	COMMITTEE CAMPAIGN TREASURER ADDRESS							
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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

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)

\$

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$

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 _____ 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

OR

(2) Unsworn Declaration

My name is Muzaffar Vohra, and my date of birth is 09/22/1967.

My address is 13108 Sunset Cliff CT, Sugar Land, TX, 77478, Fort Bend.
(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of TX, on the 07 day of 15, 2026.
(month) (year)

Signature of Candidate/Officeholder (Declarant)