

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC  
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <span style="font-size: 2em; color: blue;">6</span>
3 COMMITTEE NAME <span style="font-size: 1.5em; color: blue;">Pharr Forward SPAC</span>		<b>OFFICE USE ONLY</b>	
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <span style="font-size: 1.2em; color: blue;">612 W. Nolana, Suite 250 McAllen TX 78504</span>	
5 CAMPAIGN TREASURER NAME  <input type="checkbox"/> Change of Address		MS / MRS / MR      FIRST      MI <span style="font-size: 1.2em; color: blue;">Mr. Michael Anthony</span> NICKNAME      LAST      SUFFIX <span style="font-size: 1.5em; color: blue;">Vargas</span>	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <span style="font-size: 1.2em; color: blue;">349 S. Helen Moore Rd. #4102 San Benito TX 78586</span>	
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address		STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <span style="font-size: 1.5em; color: blue;">-same as above-</span>	
8 CAMPAIGN TREASURER PHONE		AREA CODE      PHONE NUMBER      EXTENSION <span style="font-size: 1.2em; color: blue;">(956) 357-5506</span>	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution Report (Attached PAC-FR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination	
10 PERIOD COVERED		Month      Day      Year      THROUGH      Month      Day      Year <span style="font-size: 1.5em; color: blue;">07 / 01 / 2022      12 / 31 / 2022</span>	
11 ELECTION		ELECTION DATE      ELECTION TYPE Month      Day      Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other <span style="font-size: 1.5em; color: blue;">/      /      /      Jan. 15, 2023</span> <input type="checkbox"/> General <input type="checkbox"/> Special      Description: <span style="font-size: 1.2em; color: blue;">Semi-Annual</span>	

**GO TO PAGE 2**

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

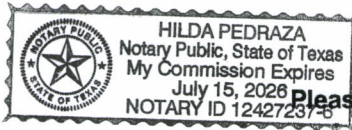
FORM SPAC  
COVER SHEET PG 2

12 COMMITTEE NAME Pharr Forward SPAC 13 Filer ID (Ethics Commission Filers)

<b>14 COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure)  <input type="checkbox"/> OPPOSE (Candidate or Measure)  <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> CANDIDATE  <input checked="" type="checkbox"/> OFFICEHOLDER	CANDIDATE / OFFICEHOLDER NAME <u>Ambrosio Hernandez - Mayor</u> <u>Bobby Carrillo, Place 2</u> <u>Dr. Ramiro Caballero, Place 3</u> <u>David Chavez, Place 4</u>	<u>Ricardo Medina, Place 5</u> <u>Itza Flores, Place 6</u>
	<input type="checkbox"/> MEASURE	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) <u>Dr. Ramiro Caballero, Place 3</u> <u>David Chavez, Place 4</u>	BALLOT IDENTIFICATION / # <u>N/A</u>
		DESCRIPTION <u>N/A</u>	

15 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)	\$ <u>0</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>62,336.<sup>74</sup></u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>34,400.<sup>45</sup></u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>487,020.16</u>

16 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.



*[Handwritten Signature]*  
Signature of Campaign Treasurer (Declarant)

Please complete either option below:

**(1) Affidavit**

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael Anthony Vargas, this the 17<sup>th</sup> day of January, 20 23, to certify which, witness my hand and seal of office.

Signature of officer administering oath: [Signature] Printed name of officer administering oath: Hilda Pedraza Title of officer administering oath: Notary Public

**(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 Campaign Treasurer (Declarant)

# SUBTOTALS - SPAC

# FORM SPAC COVER SHEET PG 3

17 COMMITTEE NAME <i>Pharr Forward SPAC</i>		18 Filer ID (Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. <input type="checkbox"/>	SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/>	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5. <input type="checkbox"/>	SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6. <input type="checkbox"/>	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	\$
7. <input type="checkbox"/>	SCHEDULE E: LOANS	\$
8. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>62,336.<sup>74</sup></i>
9. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
11. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12. <input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13. <input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
14. <input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# 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 Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>1/3</i>	<b>2</b> FILER NAME <i>Pharr Forward SPAC</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>11/30 - 12/30/22</i>	<b>5</b> Payee name <i>IBC - International Bank of Commerce</i>	
<b>6</b> Amount (\$) <i>\$28.30</i>	<b>7</b> Payee address; City; State; Zip Code <i>ibc.com</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Fees</i>	<b>(b)</b> Description <i>banking fees</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <i>11/10/22</i>	<b>Payee name</b> <i>Oscar Gutierrez</i>	
<b>Amount (\$)</b> <i>\$3,600</i>	<b>Payee address; City; State; Zip Code</b> <i>400 W. 12th St. San Juan TX 78589</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <i>Contract labor</i>	<b>Description</b> <i>general campaign labor</i>
	<b>(c)</b> 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      Office held
<b>Date</b> <i>11/4/22</i>	<b>Payee name</b> <i>Upper Valley Mail Service</i>	
<b>Amount (\$)</b> <i>\$10,554.22</i>	<b>Payee address; City; State; Zip Code</b> <i>1418 Beech Ave. #109 McAllen TX 78501</i>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <i>Office overhead</i>	<b>Description</b> <i>postal service</i>
	<b>(c)</b> 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      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# 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.

<b>1</b> Total pages Schedule F1: <i>2/3</i>	<b>2</b> FILER NAME <i>Pharr Forward SPAC</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>10/25/22</i>	<b>5</b> Payee name <i>Carlos Villegas</i>	
<b>6</b> Amount (\$) <i>\$11,000-</i>	<b>7</b> Payee address; City; State; Zip Code <i>1308 S. Kumquat St. Pharr TX 78577</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <i>donation by political committee for candidate</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>10/25/22</i>	Payee name <i>Upper Valley Mail Services</i>	
Amount (\$) <i>\$10,554.22</i>	Payee address; City; State; Zip Code <i>1418 Beech Ave. # 109 McAllen TX 78501</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <i>office overhead postal service</i>
	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 Office held
Date <i>10/25/22</i>	Payee name <i>Diana Serna</i>	
Amount (\$) <i>\$11,000-</i>	Payee address; City; State; Zip Code <i>602 E. Gore Ave. Pharr TX 78577</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <i>donation by political committee for candidate</i>
	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 Office held

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# 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 Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>3/3</i>	<b>2</b> FILER NAME <i>Pharr Fwd SPAC</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>10/25/22</i>	<b>5</b> Payee name <i>Yolanda Castillo</i>	
<b>6</b> Amount (\$) <i>\$10,000-</i>	<b>7</b> Payee address; <i>1036 S. Cesar Chavez Rd.</i>	City; State; Zip Code <i>Alamo TX 78516</i>
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <i>donation by political committee to candidate</i>
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>10/6/22</i>	Payee name <i>Oscar Gutierrez</i>	
Amount (\$) <i>\$3,600-</i>	Payee address; <i>400 W. 12<sup>th</sup> St.</i>	City; State; Zip Code <i>San Juan TX 78589</i>
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <i>contract labor general campaign labor</i>
	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 Office held
Date <i>9/29/22</i>	Payee name <i>Eddie Lucio, Jr.</i>	
Amount (\$) <i>\$2,000</i>	Payee address; <i>P.O. Box 5958</i>	City; State; Zip Code <i>Brownsville TX 78523</i>
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <i>donation by political committee to Senate member</i>
	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 Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED