CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages file	2 2		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Dr. Ramiro	MI		USE ONLY		
TVAIVIE	NICKNAME LAST	SUFFIX	Date Received			
	Caballero	,	AT 4:55	CEIVED O'CLOCK AMA		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 819 W. Moore Rd. Pharr TX 78577 JAN 15 2021					
Change of Address	CITY MANAGER'S OF					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (956) 655-0850	EXTENSION	BY:	ula nur		
6 CAMPAIGN	MS / MRS / MR FIRST	МІ	Receipt #	Amount \$		
TREASURER NAME	Mrs. Marilanda	P	Date Processed			
	NICKNAME LAST Caballero	SUFFIX	Date Imaged			
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT /	SUITE #; CITY;	STATE;	ZIP CODE		
ADDRESS (Residence or Business)	819 W. Moore Rd	Pharr	TX	78577		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (956) 655-0850	EXTENSION				
9 REPORT TYPE	X January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH - FR)					
10 DEBIOD		Month	Day			
10 PERIOD COVERED	Month Day Year 07 01 2020	THROUGH 12	31 Year 202			
11 ELECTION	ELECTION DATE ELECTION TYPE					
	Month Day Year Primary	y Runoff Other Description				
	Genera		n/a			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	1)			
	Commissioner, Pl. 3 City of Pharr					
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Dr. Ramiro Caballero			5 Filer ID (Ethics Commission Filers)	
16 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	Pharr Forward SPAC		
	X SPECIFIC	612 W. Nolana, Suite 250 McAllen , T	X 78504	
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages		Dr. Eliza Alvarado		
	COMMITTEE CAMPAIGN TREASURER ADDRESS			
		401 Xanthisma McAllen, TX 78504		
17 CONTRIBUTION TOTALS			\$ 0	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0	
EXPENDITURE TOTALS	3. TOTAL UNLESS	\$ 0		
	4. TOTAL POLITICAL EXPENDITURES		\$ 0	
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		PAY \$ 0	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		HE \$ 0	
18 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. NOTARY ID 12427237-6				
Signature of Candidate or Officeholder				
AFFIX NOTARY STAMP / SEALABOVE				
Sworn to and subscribed before me, by the said Ramiro Caballero , this the 15th				
day of January , 2021 , to certify which, witness my hand and seal of office.				
William Hada Pedraia notary Aublic Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				