

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:

4

3 COMMITTEE NAME

PHARR FORWARD SPAC

OFFICE USE ONLY

Date Received

RECEIVED

JUL 15 2026

**CITY CLERK'S OFFICE
ALESSANDRA GARCIA**

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

4 COMMITTEE
ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE

☒ Change of Address

401 Xanthisma McAllen TX 78504

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Dr.

Eliza

NICKNAME

LAST

SUFFIX

Alvarado

6 CAMPAIGN
TREASURER
STREET ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE

401 Xanthisma McAllen TX 78504

7 CAMPAIGN
TREASURER
MAILING ADDRESS

STREET ADDRESS OR PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE

☐ Change of Address

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(956) 451-3005

9 REPORT TYPE

☒

January 15

☐

30th day before election

☐

Exceeded Modified Reporting Limit

☐

July 15

☐

8th day before election

☐

Dissolution Report (Attached PAC-FR)

☐

Runoff

☐

10th day after campaign treasurer termination

10 PERIOD
COVERED

Month

Day

Year

01 / 01 / 2026

THROUGH

Month

Day

Year

06 / 30 / 2026

11 ELECTION

ELECTION DATE

Month

Day

Year

/ /

☐ Primary

☐ Runoff

☒ Other

☐ General

☐ Special

Description: JAN.2026 Semi-Annu

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

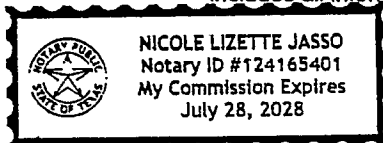
FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME PHARR FORWARD SPAC 13 Filer ID (Ethics Commission Filers)

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) ☒ SUPPORT (Candidate or Measure) ☐ OPPOSE (Candidate or Measure) ☐ ASSIST (Officeholder)	☐ CANDIDATE	CANDIDATE / OFFICEHOLDER NAME Ambrosio Hernandez-Mayor, Michael Pacheco-Pl.1, Bobby Carrillo-Pl.2, Ramiro Caballero-Pl.3, Daniel Chavez-Pl.4 ONCE COMPLETED BY OFFICEHOLDER
	☒ OFFICEHOLDER	Ricardo Medina-Pl.5, Itza Flores-Pl.6 (all officeholders)
	☐ MEASURE	BALLOT IDENTIFICATION / # ELECTION DATE Month / Day / Year DESCRIPTION

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)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 6,300.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 58,564.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 487,020.16

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.



[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 ELIZA ALVARADO, this the 14th day of July, 2024, to certify which, witness my hand and seal of office.
[Signature] NICOLE JASSO Notary Public
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 Campaign Treasurer (Declarant)

SUBTOTALS - SPAC**FORM SPAC
COVER SHEET PG 3**

17 COMMITTEE NAME PHARR FORWARD SPAC		18 Filer ID (Ethics Commission Filers)
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 D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	\$
7.	☐ SCHEDULE E: LOANS	\$
8.	☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,300.00
9.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
14.	☐ 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	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 PHARR FORWARD SPAC	3 Filer ID (Ethics Commission Filers)
4 Date 02/23/2026	5 Payee name Prisylla Jasso	
6 Amount (\$) \$3,300.00	7 Payee address; City; State; Zip Code 612 W. Nolana, Ste. 250 McAllen TX 78504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) consulting expense	
	(b) Description compliance & consulting	
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2026	Candidate / Officeholder name Jorge Zambrano	
Amount (\$) \$3,000.00	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) donation by SPAC	
	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	
	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought Office held	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	
	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED