#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086533 3 COMMITTEE NAME **OFFICE USE ONLY Red Wave Texas** Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1314 W McDermott Dr Ste 106 Date Hand-delivered or Date Postmarked Box 186 Change of Address Allen, TX 75013 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. John L. NAME NICKNAME LAST **SUFFIX** Montes STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 701 Addie Ln. STREET **ADDRESS** (Residence or Business) McKinney, TX 75071 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 662-0901 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 05/19/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other X Runoff 05/28/2024 General Special **GO TO PAGE 2**

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID (E	Ethics Commission Filers)
Red Wave Texas			00086533	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Keresa Richardson State Re	presentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed		
	Officeholders     Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			14.24
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of particle and correct and includes all info under Title 15, Election Code.		
		Mr. Joh	ın L. Montes	
		Signature of C	Campaign Treasurer	_
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said		, this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer a	dministering oath

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC ADDENDUM

Page 3 of 6

						rage 3 01 0
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Red Wave Texas				00086533	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Andy Hopper State Representat	tive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		Measures     (Describe by date and location of election and nature of issue.)	A. Supported			
		nature of issue.)	B. Opposed			
		Officeholders     Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Darrell Day U.S. House CD32		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		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.)				
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Jamie Kohlmann State Board O	f Education	
	(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.)				

#### **GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE**

### FORM GPAC **ADDENDUM**

						Page 4 of 6
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Red Wave Texas					00086533	
ACTIVITY (Id	Candidates lentify by name or, if plicable, classify by party.)		Jace Yarbroug	h State Senator		
paper to complete this report if necessary.)		B. Opposed				
(Delloc	Measures escribe by date and cation of election and ture of issue.)	A. Supported				
		B. Opposed				
3. (Id ap)	Officeholders Assisted lentify by name or, if plicable, classify by party.)					
ACTIVITY	Candidates lentify by name or, if plicable, classify by party.)		Katrina Pierson	n State Represen	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
(Delloc	escribe by date and cation of election and ture of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted lentify by name or, if plicable, classify by party.)					
ACTIVITY (Id	Candidates lentify by name or, if plicable, classify by party.)		Joel Petrazio	District Judge		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
(Delloc	Measures escribe by date and cation of election and ture of issue.)	A. Supported				
		B. Opposed				
(Id	Officeholders Assisted lentify by name or, if plicable, classify by party.)					
•	•					

#### **GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE**

### FORM GPAC **ADDENDUM**

MITTEE NAME Wave Texas		-			13 Filer ID	(Ethin 0
Mayo Tayoo					13 1 11c1 1D	(Ethics Commission Filers)
wave rexas					00086533	
MITTEE /ITY	Candidates (Identify by name or, if applicable, classify by party.)		Ellen Loveless	County Party Ch	air	
th lists on plain to complete this if necessary.)		B. Opposed				
	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.)					
MITTEE /ITY	Candidates (Identify by name or, if applicable, classify by party.)		Shelby Williams	County Party C	hair	
th lists on plain to complete this if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					
	MITTEE //ITY	(Identify by name or, if applicable, classify by party.)  th lists on plain to complete this if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  th lists on plain to complete this if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	In lists on plain to complete this if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  MITTEE //ITY  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  A. Supported  B. Opposed  B. Opposed  B. Opposed  A. Supported  B. Opposed  A. Supported  B. Opposed	It lists on plain to complete this if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  MITTEE //ITY  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  A. Supported  B. Opposed  A. Supported Shelby Williams  A. Supported Shelby Williams  A. Supported Shelby Williams  Clearity by name or, if applicable, classify by party.)  B. Opposed  A. Supported Shelby Williams  A. Supported Shelby Williams  A. Supported Shelby Williams  B. Opposed  B. Opposed  3. Officeholders (Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed	In lists on plain to complete this if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  MITTEE //TY  In Candidates (Identify by name or, if applicable, classify by party.)  In Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  Shelby Williams County Party C  Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed  B. Opposed  B. Opposed	In lists on plain to complete this if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  MITTEE //TTY  In Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  B. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  B. Opposed  B. Opposed  B. Opposed  B. Opposed  3. Officeholders A. Supported  B. Opposed  B. Opposed

### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

			6 of 6	
17 COMMITT Red Wav		<b>18</b> Filer ID 00086533	(Ethics Commission Filers)	
19 SCHEDUL	T	_		
NAME OF	SUBTOTAL AMOUNT			
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.0	)0
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	)R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	1	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	