

FEC
FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

EM BUSINESS HOLDINGS, INC. POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

1421 JEFFERSON DAVIS HIGHWAY

☐

(Check if address
is changed)

SUITE 500

ARLINGTON

VA

22202

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

EMBH.PAC@EMSOLVE.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

703 - 413 - 0900

2. DATE

12

15

2008

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

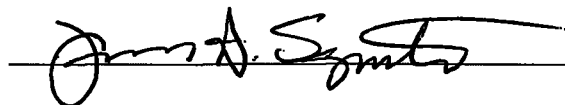
AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES A. SAPUTO

Signature of Treasurer



Date

12

15

2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 12/2007)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☒ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☒ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | | |
|----|----------------------|---------------|----------------------|
| 1. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 2. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 3. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 4. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 5. | <input type="text"/> | FEC ID number | <input type="text"/> |

Write or Type Committee Name

EM BUSINESS HOLDINGS, INC. POLITICAL ACTION COMMITTEE

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

EM BUSINESS HOLDINGS, INC.

Mailing Address

1421 JEFFERSON DAVIS HIGHWAYSUITE 500ARLINGTONVA22202

CITY

STATE

ZIP CODE

Relationship:

☐

Connected Organization

☒

Affiliated Committee

☐

Leadership PAC Sponsor

☐

Joint Fundraising Representative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

JAMES A. SABUTO

Mailing Address

1421 JEFFERSON DAVIS HIGHWAYSUITE 500ARLINGTONVA22202

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

703 - 413 - 8002

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of TreasurerJAMES A. SABUTO

Mailing Address

1421 JEFFERSON DAVIS HIGHWAYSUITE 500ARLINGTONVA22202

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

703 - 413 - 8002

Full Name of
Designated
Agent

ROBERT BROWN

Mailing Address

1421 JEFFERSON DAVIS HIGHWAY

SUITE 500

ARLINGTON

CITY

VA

STATE

22202

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

703 - 413 - 8002

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

SONABANK NA

Mailing Address

550 Broadview Avenue

Suite LL

Warrenton

CITY

VA

STATE

20186

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>12/16/08</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>[Signature]</i> PREPARER	<i>12/23/08</i> DATE PREPARED

(3/2005)

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