FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

EMB NOMINEE FUND OH-01

ADDRESS (number and street) ▼ 824 S. MILLEDGE AVE. STE. 101

☐ Check if different than previously reported. (ACC)

CITY ▲ ATHENS STATE ▲ GA ZIP CODE ▲ 30605 –

2. **FEC IDENTIFICATION NUMBER ▼** C C00934844

3. IS THIS REPORT ☐ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☒ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 04 / 01 / 2026 through 06 / 30 / 2026

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

Type or Print Name of Treasurer Kilgore, Paul, , ,

Signature of Treasurer *Kilgore, Paul, , ,* Date 07 / 14 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 05/2016)

Write or Type Committee Name

EMB NOMINEE FUND OH-01

Report Covering the Period: From: 04 / 01 / 2026 To: 06 / 30 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2026		0.00
(b) Cash on Hand at Beginning of Reporting Period	25421.10	
(c) Total Receipts (from Line 19)	7484.45	32905.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	32905.55	32905.55
7. Total Disbursements (from Line 31)	32905.55	32905.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0.00
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 05/2016)

Write or Type Committee Name

EMB NOMINEE FUND OH-01

Report Covering the Period: From: 04 / 01 / 2026 To: 06 / 30 / 2026

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	7484.45	32905.55
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	7484.45	32905.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	7484.45	32905.55

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 05/2016)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	1022.59	1022.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	1022.59	1022.59
22. Transfers to Affiliated/Other Party Committees	31882.96	31882.96
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations)	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	32905.55	32905.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	32905.55	32905.55

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 05/2016)

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1022.59	1022.59
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	1022.59	1022.59

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
EMB NOMINEE FUND OH-01

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
EMMER MAJORITY BUILDERS

Mailing Address 824 S. MILLEDGE AVE. STE. 101

City: ATHENS | State: GA | Zip Code: 30605

FEC ID number of contributing federal political committee. C C00859058

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 32905.55

Date of Receipt: M M 06 / D D 30 / Y Y Y Y 2026

Transaction ID : SA12.4123

Amount of Each Receipt this Period: 7484.45

☐ Memo Item

Transfer of Net JFC Funds

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Crivello, Frank, , ,

Mailing Address 2291 Ibis Isle Road East

City: Palm Beach | State: FL | Zip Code: 33480

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Phoenix Investors
Occupation (for Individual): Chairman & Founder

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: M M 05 / D D 11 / Y Y Y Y 2026

Transaction ID : SA12.4123.0

Amount of Each Receipt this Period: 3500.00

☒ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Colburn, Richard, W, ,

Mailing Address 555 Skokie Blvd
Ste 555

City: Northbrook | State: IL | Zip Code: 60062

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Payroll & Insurance Group Inc.
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt: M M 05 / D D 04 / Y Y Y Y 2026

Transaction ID : SA12.4123.1

Amount of Each Receipt this Period: 3500.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 7484.45

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
EMB NOMINEE FUND OH-01

A.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name: Wade, John, P, ,
Mailing Address: 7031 Mayflower Park Dr
City: Zionsville | State: IN | Zip Code: 46077
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): AES Restaurant Group LLC
Occupation (for Individual): CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 02 / 02 / 2026
Transaction ID : SA12.4123.2
Amount of Each Receipt this Period: 1000.00
☒ Memo Item

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name: Batmasian, James, H., ,
Mailing Address: 215 North Federal Highway Ste 1
City: Boca Raton | State: FL | Zip Code: 33432
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Investments Unlimited
Occupation (for Individual): Owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 539.68
Date of Receipt: 12 / 29 / 2025
Transaction ID : SA12.4123.3
Amount of Each Receipt this Period: 539.68
☒ Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name:
Mailing Address:
City: | State: | Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual):
Occupation (for Individual):
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼:
Date of Receipt: MM / DD / YYYY
Amount of Each Receipt this Period:
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 7484.45

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 26 [ ] 27
[ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
EMB NOMINEE FUND OH-01

A.
Full Name (Last, First, Middle Initial): Professional Data Services Inc.
Mailing Address: 824 S. Milledge Ave Ste. 101
City: Athens | State: GA | Zip Code: 30605
Purpose of Disbursement: PAC Compliance Consulting
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 04 / 20 / 2026
FEC Identification Number: C
Transaction ID : SB21B.4120
Amount of Each Disbursement this Period: 500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial): Professional Data Services Inc.
Mailing Address: 824 S. Milledge Ave Ste. 101
City: Athens | State: GA | Zip Code: 30605
Purpose of Disbursement: PAC Compliance Consulting
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 06 / 25 / 2026
FEC Identification Number: C
Transaction ID : SB21B.4132
Amount of Each Disbursement this Period: 522.59
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: | State: | Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1022.59

TOTAL This Period (last page this line number only) ▶ 1022.59

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 21b ☒ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
EMB NOMINEE FUND OH-01

A.
Full Name (Last, First, Middle Initial): CONROY FOR CONGRESS
Mailing Address: 2692 MADISON RD STE N1 BOX 358
City: CINCINNATI | State: OH | Zip Code: 45208
Purpose of Disbursement: Transfer to Affiliated Committee
Category/Type: 008
Candidate Name:
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 01
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 06 / 30 / 2026
FEC Identification Number: C C00912311
Transaction ID : SB22.4133
Amount of Each Disbursement this Period: 31882.96
☐ Memo Item

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: | State: | Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
☐ Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: | State: | Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 31882.96

TOTAL This Period (last page this line number only) ▶ 31882.96