

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

EMMER MAJORITY BUILDERS

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

(Check if address is changed)

ATHENS

CITY ▲

GA

STATE ▲

30605

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

ADMIN@PDSCOMPLIANCE.COM

Optional Second E-Mail Address

EMMERMAJORITY@PDSCOMPLIANCE.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 06 / 17 / 2026

3. FEC IDENTIFICATION NUMBER ▶ C C00859058

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 KILGORE, PAUL, , ,

Signature of Treasurer KILGORE, PAUL, , ,

Date 06 / 17 / 2026

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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

FEC FORM 1 (Revised 06/2012)

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

In addition, this committee is a Lobbyist/Registrant PAC.

- (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 Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

- (g) This committee is an independent expenditure-only political committee (Super PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

- (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) 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.
- (j) 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. MONICA FOR CONGRESS _____
2. EMB NOMINEE FUND OH-09 _____

C C00765719

C C00928184

Write or Type Committee Name

EMMER MAJORITY BUILDERS

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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

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 KILGORE, PAUL, , ,

Mailing Address 824 S. MILLEDGE AVE. STE. 101

ATHENS

GA

30605

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

TREASURER

Telephone number 706 - 534 - 7780

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 Treasurer KILGORE, PAUL, , ,

Mailing Address 824 S. MILLEDGE AVE. STE. 101

ATHENS

GA

30605

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

TREASURER

Telephone number 706 - 534 - 7780

Full Name of Designated Agent

GOODE, MICHAEL, , ,

Mailing Address

824 S. MILLEDGE AVE. STE. 101

ATHENS

GA

30605

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

ASST TREASURER

Telephone number

706

534

7780

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.

CLASSIC CITY BANK

Mailing Address

2365 W BROAD ST

ATHENS

GA

30606

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. EMB NOMINEE FUND WA-03
- 2. EMMER FOR CONGRESS
- 3. ELECTING MAJORITY MAKING EFFECTIVE REPUBLICANS PAC
- 4. NRCC

FEC ID number	C00928218
FEC ID number	C00545749
FEC ID number	C00592089
FEC ID number	C00075820

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

Mailing Address _____

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone Number _____-_____-_____

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. _____
Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. CONGRESSIONAL LEADERSHIP FUND
- 2. MILLER-MEEKS FOR CONGRESS
- 3. ELECTGABEEVANS.COM
- 4. MACKENZIE FOR CONGRESS COMMITTEE

FEC ID number	C	C00504530
FEC ID number	C	C00558825
FEC ID number	C	C00849844
FEC ID number	C	C00846501

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

Mailing Address _____

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
 Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 _____ Telephone Number _____-_____-_____

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. _____
 Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. PATRIOTS FOR PERRY
- 2. ROB FOR PA
- 3. BRIAN FITZPATRICK FOR ALL OF US
- 4. ALASKANS FOR NICK BEGICH

FEC ID number	C	C00510164
FEC ID number	C	C00852137
FEC ID number	C	C00607416
FEC ID number	C	C00792341

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

Mailing Address _____

Relationship: _____ CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone Number _____-_____-_____

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. _____
Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. CISCOMANI FOR CONGRESS
- 2. VAN ORDEN FOR CONGRESS
- 3. TOM BARRETT FOR CONGRESS
- 4. IOWANS FOR ZACH NUNN

FEC ID number	C C00786194
FEC ID number	C C00742007
FEC ID number	C C00793976
FEC ID number	C C00784389

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

Mailing Address _____

Relationship: _____ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____

Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ Telephone Number _____-_____-_____

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Name of Bank, Depository, etc. _____

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. KIGGANS FOR CONGRESS
- 2. KEAN FOR CONGRESS INC
- 3. LAWLER FOR CONGRESS, INC.
- 4. VALADAO FOR CONGRESS

FEC ID number	C	C00776120
FEC ID number	C	C00703058
FEC ID number	C	C00815415
FEC ID number	C	C00499392

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

Mailing Address _____

Relationship: _____ CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
 Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 _____ Telephone Number _____-_____-_____

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Name of Bank, Depository, etc. _____
 Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. ELI CRANE FOR CONGRESS
- 2. ANNA PAULINA LUNA FOR CONGRESS
- 3. STEIL FOR WISCONSIN, INC.
- 4. LALOTA FOR CONGRESS

FEC ID number	C	C00784934
FEC ID number	C	C00718239
FEC ID number	C	C00677286
FEC ID number	C	C00806018

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

Mailing Address _____

Relationship: _____ CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone Number _____-_____-_____

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Name of Bank, Depository, etc. _____
Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

1.	LAUREL LEE FOR CONGRESS, INC.	FEC ID number	C C00815373
2.	EMB NOMINEE FUND FL-23	FEC ID number	C C00934695
3.	EMB NOMINEE FUND MI-08	FEC ID number	C C00934711
4.	EMB NOMINEE FUND MI-10	FEC ID number	C C00934745

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

Mailing Address _____

_____ CITY ▲ STATE ▲ ZIP CODE ▲

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
Mailing Address _____

_____ CITY ▲ STATE ▲ ZIP CODE ▲
TITLE OR POSITION ▼ Telephone Number _____-_____-_____

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Name of Bank, Depository, etc. _____
Mailing Address _____

_____ CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. EMB NOMINEE FUND NM-02
- 2. EMB NOMINEE FUND NV-01
- 3. EMB NOMINEE FUND NV-03
- 4. EMB NOMINEE FUND OH-09

FEC ID number	C	C00934794
FEC ID number	C	C00934802
FEC ID number	C	C00934828
FEC ID number	C	C00928184

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

Mailing Address _____

Relationship: _____ CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone Number _____-_____-_____

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Name of Bank, Depository, etc. _____
Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. ERIC FLORES FOR CONGRESS
- 2. PAUL LEPAGE FOR CONGRESS
- 3. KEVIN LINCOLN FOR CONGRESS
- 4. TANO TIJERINA FOR CONGRESS INC

FEC ID number	C	C00912246
FEC ID number	C	C00904094
FEC ID number	C	C00845826
FEC ID number	C	C00929174

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Mailing Address _____

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Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. FEELY FOR CONGRESS
- 2. FLINT FOR MONTANA
- 3. LAURIE BUCKHOUT FOR CONGRESS
- 4. BRINKER HARDING FOR CONGRESS

FEC ID number	C00903088
FEC ID number	C00941575
FEC ID number	C00853499
FEC ID number	C00909515

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Name of Bank, Depository, etc. _____
Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. PETER FOR NY INC
- 2. LIPETRI FOR CONGRESS
- 3. EMB NOMINEE FUND FL-22
- 4. EMB NOMINEE FUND FL-25

- FEC ID number C C00921668
- FEC ID number C C00732768
- FEC ID number C C00951087
- FEC ID number C C00951103

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

Mailing Address _____

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 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

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Name of Bank, Depository, etc. _____
 Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

1.	DEREK MERRIN FOR CONGRESS	FEC ID number	C C00909630
2.	MARTY FOR CONGRESS	FEC ID number	C C00900910
3.	CONROY FOR CONGRESS	FEC ID number	C C00912311
4.	CUNNINGHAM FOR NM	FEC ID number	C C00921791

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Mailing Address _____

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Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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Telephone Number _____-_____-_____

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Name of Bank, Depository, etc. _____

Mailing Address _____

_____ CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. JEFF CRANK FOR CONGRESS
- 2. CARRIE BUCK FOR CONGRESS
- 3. FINSTAD FOR CONGRESS
- 4. JOHN BRAUN FOR CONGRESS

FEC ID number	C00865592
FEC ID number	C00914804
FEC ID number	C00807743
FEC ID number	C00915884

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 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone Number _____-_____-_____

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Name of Bank, Depository, etc. _____
Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

- 1. JOE MITCHELL FOR CONGRESS
- 2. HUIZENGA FOR CONGRESS
- 3. CARLOS FOR CONGRESS
- 4.

- FEC ID number C C00918979
- FEC ID number C C00459297
- FEC ID number C C00922013
- FEC ID number C

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

Mailing Address _____

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
 Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 _____ Telephone Number _____-_____-_____

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Name of Bank, Depository, etc. _____
 Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲