**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Team Emmer 824 S Milledge Ave ADDRESS (number and street) Ste 101 (Check if address is changed) Athens 30605 GΑ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address teamemmer@pdscompliance.com is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00836403 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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,, Date 01 24 2024 Signature of Treasurer Kilgore, Paul, , , 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

<b>—</b>	
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. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	on below.)
(b) This committee is an authorized committee, and is NOT a principal campaign commit information below.)	ttee. (Complete the candidate
Name of Candidate	<u></u>
Candidate Office Party Affiliation Sought: House Senate	State President
(c) This committee supports/opposes only one candidate, and is NOT an authorized com	District
(c) This committee supports/opposes only one candidate, and is NOT an authorized com	millioc.
Name of Candidate	
Party Committee: (National, State	(Democratic,
(d) This committee is a or subordinate) committee of the	Republican, etc.) Party
Political Action Committee (PAC):	
Political Action Committee (PAC):  (e) This committee is a separate segregated fund. (Identify connected organization on lin	ne 6 ) Its connected organization is a:
(e) This committee is a separate segregated fund. (Identify connected organization on lin	le o.) 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 secommittee. (i.e., nonconnected committee)	eparate segregated fund or party
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 ac	counts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
This committee collects contributions have fundraising expenses and disburses net of	proceeds for two or more political
committees/organizations, at least one of which is an authorized committee of a feder	·
(j) This committee collects contributions, pays fundraising expenses and disburses net p committees/organizations, none of which is an authorized committee of a federal cand	·
Committees Participating in Joint Fundraiser	
1. EMMER FOR CONGRESS	C C00545749
ELECTING MAJORITY MAKING EFFECTIVE REPUBLICANS (EMMER PAC)	C C00592089

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V	/rite or Type Committee Name		
	Team Emmer		
6.		ganization, Affiliated Committee, Joint Fundraising Representativ	re, or Leadership PAC Sponsor
	NONE		
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Represent	entative Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the pers	son in possession of committee
	Kilgore, Pa	л,,,	
	Full Name	1824 S Milledge Ave	
	Mailing Address		
		Ste 101	
		Athens	30605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	706 - 534 - 7780
3.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committed ssistant treasurer).	ee; and the name and address of
	Full Name Kilgore, Pa	<b>,l</b> , , ,	
	Mailing Address	824 S Milledge Ave	
		Ste 101	
		Athens	30605
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	706

Full Name of Designated Agent  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number  Telephone number  Telephone number  CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone number  CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.  Classic City Bank  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.	FEC Form 1	(Revised 02/2009)	Page <b>4</b>
CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number	Designated		
Title or Position  Telephone number  Telephone n	Mailing Address		
Title or Position  Telephone number  Telephone n			
Title or Position  Telephone number  Telephone n			
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  Althens  CITY A  STATE A  ZIP CODE A  Mailing Address  Mailing Address		CITY ▲ STATE	ZIP CODE ▲
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  Athens  CITY ▲  STATE ▲  ZIP CODE ▲  Mailing Address  Mailing Address	Title or Position ▼		
Name of Bank, Depository, etc.  Classic City Bank  Mailing Address  Athens  CITY ▲  STATE ▲  ZIP CODE ▲  Mailing Address		Telephone number	
Classic City Bank  Mailing Address    Athens			sits funds, holds accounts, rents
Mailing Address    2365 W Broad St	Name of Bank, De	epository, etc.	
Athens  CITY   STATE   ZIP CODE   Name of Bank, Depository, etc.  Mailing Address	l	Classic City Bank	
CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.  Mailing Address	Mailing Address	2365 W Broad St	
CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.  Mailing Address			
Name of Bank, Depository, etc.  Mailing Address		Athens	30606
Mailing Address  Line Indian Address		CITY ▲ STATE	▲ ZIP CODE ▲
Mailing Address	Name of Bank, De	epository, etc.	
	l		
	Mailing Address		
CITY ▲ STATE ▲ ZIP CODE ▲			
		CITY ▲ STATE	▲ ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ing Participant:		
1. CD6 GOP FEDERAL	COMMITTEE	FEC ID number	C C00550467
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connecte	d Organization, Affiliated Committee, Joint F	undraising Representativ	re, or Leadership PAC Spons
Mailing Address			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	and Organization Affiliated Committee	Joint Fundraising Represen	tative Leadership PAC Sp
		-	tative Leadership PAC Sp
esignated Agent: Iden		-	tative Leadership PAC Sp
esignated Agent: Iden Full Name		-	tative Leadership PAC Sp
esignated Agent: Iden Full Name		-	Leadership PAC Sp
esignated Agent: Iden Full Name	tify by name, address (phone number – optional	-	Leadership PAC Sp
esignated Agent: Iden  Full Name   Mailing Address  TITLE OR POSITIO	tify by name, address (phone number – optional	al)	
esignated Agent: Iden  Full Name   Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional nu	STATE A	
esignated Agent: Iden  Full Name	ify by name, address (phone number – optional stories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
esignated Agent: Iden  Full Name	ify by name, address (phone number – optional stories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
esignated Agent: Iden  Full Name	cify by name, address (phone number – optional content of the cont	STATE  Telephone Number	ZIP CODE A
esignated Agent: Iden  Full Name	cify by name, address (phone number – optional content of the cont	STATE A  Telephone Number	ZIP CODE A  ts funds, holds accounts, rent
esignated Agent: Iden  Full Name	ify by name, address (phone number – optional content of the conte	STATE A  Telephone Number	ZIP CODE A  ts funds, holds accounts, rent
esignated Agent: Iden  Full Name	ify by name, address (phone number – optional content of the conte	STATE A  Telephone Number	ZIP CODE A  ts funds, holds accounts, rent