**FEC** 

## STATEMENT OF

PAGE 1 / 7 =

FORM 1		ORGANI	ZATION		
1. NAME OF		(Chack if name	Evample: If typing type		ce Use Only
COMMITTEE (in	full)	X (Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ELECTING I	MAJORIT	ΓΥ MAKING E	FFECTIVE REPUBL	ICANS PAC	1
ADDRESS (number a		PO BOX 183			
(Check if a	address				
is changed	•	ANOKA CITY A		MN 5530 STATE ▲	3 ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRESS				
(Check if a is changed		emmerpac@pdscompli	ance.com		
Ü	0	ptional Second E-Mail			
COMMITTEE'S WEB  (Check if a is changed	address	ESS (URL)			
2. DATE 03	8 28	2024			
3. FEC IDENTIFIC	CATION NUME	BER ▶ C	C00592089		
4. IS THIS STATEM	MENT	NEW (N) OR	AMENDED (A)		
certify that I have e	examined this S	Statement and to the b	pest of my knowledge and belief it	t is true, correct and o	complete.
Type or Print Name of	of Treasurer	Kilgore, Paul, , ,			
Signature of Treasure	er Kilgore, F	Paul, , ,		Date 03	28 2024
NOTE: Submission of			tion may subject the person signing		enalties of 52 U.S.C. §30109
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

Local 202-694-1100

E	EC Form 1 (Revised 03/2022)	Page 2
	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 information below.)	candidate
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	2.0
	Name of Candidate	
	Party Committee:  (d) This committee is a (National, State or subordinate) committee of the Republican,	etc.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	l organization is a:
	Corporation Corporation w/o Capital Stock Labor Or	ganization
	Membership Organization Trade Association Cooperat	ive
	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 committee. (i.e., nonconnected committee)	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 accounts (Hybrid PAG	<b>C</b> ).
	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1C	
	$\mathbf{C}$	

Page 3

Write or Type Committee Name	
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	// // // // // // // // // // // // //	$\mathbf{N} \mathbf{I} \mathbf{N} \mathbf{I} \mathbf{Z} \mathbf{I} \mathbf{N} \mathbf{I} \mathbf{Z}$	<b>EFFECTIVE</b>	-DLDHDH	CANIC	$\mathbf{I}$
	/IA.IL.JR I I Y	IVIANIUS		REPUDII	1 .AII.	
 -						1 / 1

		ORTH MARING ETTEC							
6.		Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor							
	EMMER VICTORY C	OMMITTEE							
	Mailing Address	824 S MILLEDGE AVE STE 101							
	<b>5</b>								
		ATHENS		GA 3	80605				
		CITY ▲		STATE ▲	ZIP CODE ▲				
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising	Representative	Leadership PAC Sponsor				
					_				
7.		ify by name, address (phone number optic	onal) and position o	of the person in po	ossession of committee				
	books and records.								
	Kilgore, Pa	ul, , ,							
	Full Name								
	Mailing Address	824 S Milledge Ave Ste 101							
		1							
		Athens		GA 1 13	30605				
		CITY ▲		STATE ▲	ZIP CODE ▲				
	Title or Position ▼								
	Treasurer		Telephone num	706 hber	_ 534 _ 7780				
8.	<b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	ne treasurer of the	committee; and	the name and address of				
	Full Name Kilgore, Pa	ul,							
	of Treasurer								
	Mailing Address	824 S Milledge Ave Ste 101							
		1			1				
		Athens		GA   3	80605				
		OITV. A		CTATE A	ZID CODE A				
	Title or Position ▼	CITY ▲		STATE ▲	ZIP CODE ▲				
	Treasurer			<sub>1</sub> 706	534     7780				
			Telephone num	nber	]-[				
1					I				

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent	Goode, Michael, , ,		
Mailing Address	Athens  CITY	GA STATE A	30605 ZIP CODE ▲
Title or Position		SIAIL	ZIF CODE A
Assistant Treasur	er Telephone	number 700	534 7780
	Depositories: List all banks or other depositories in which the come kes or maintains funds.	mittee deposits fui	nds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Wings Financial Credit Union		
Mailing Address	14985 Glazier Avenue Ste 100		
	Apple Valley	MN	55124
	CITY A	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Wells Fargo		
Mailing Address	1200 Mitchell Bridge Road		
	Athens	GA	30606
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

		7
Page	of '	

	undraising Particip	ant:			
1			FEC ID	number	C
2			FEC ID	number	C
3.			FEC ID	number	C
4			FEC ID	number	С
Name of Any Co	onnected Organizat	ion, Affiliated Committee, Joint F	undraising Repre	esentative	, or Leadership PAC Sponsor
EMMER, TH	HOMAS EARL J	R., , ,		1 1 1	
Mailin a Ada	, PO BO	X 279			
Mailing Add	ress				
	ELK D	NED			55000
	ELK RI			MN	55330
Relationship	):	CITY A	;	STATE A	ZIP CODE ▲
Full Name	it: identify by name,	, address (phone number – optiona	<b>')</b>		
Mailing Addre	SS				
				1 1 1	
TITLE OR P	OSITION ▼	CITY A	ST	[ATE ▲	ZIP CODE A
TITLE OR P	OSITION ▼	CITY A	Si Telephone Nur		ZIP CODE <b>A</b>
TITLE OR P	OSITION ▼	ı			ZIP CODE A
			Telephone Nur	nber	
Banks or Other		all banks or other depositories in w	Telephone Nur	nber	
Banks or Other	Depositories: List a	all banks or other depositories in winds.	Telephone Nur	nber	
Banks or Other safety deposit box	Depositories: List a xes or maintains fun Classic City Ba	all banks or other depositories in winds.	Telephone Nur	nber	
Banks or Other safety deposit box Name of Bank, Depository, etc.	Depositories: List a xes or maintains fun Classic City Ba	all banks or other depositories in winds.	Telephone Nur	nber	
Banks or Other safety deposit box Name of Bank, Depository, etc.	Depositories: List a xes or maintains fun Classic City Ba	all banks or other depositories in winds.	Telephone Nur	nber	

FEC Form 1S (Revised 02/2017)

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

Page	of <sup>7</sup>	
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1.					
			FEC ID n	umber	C
2.			FEC ID n	umber	C
3.			FEC ID n	umber	C
4.			FEC ID n	umber	C
Name of Any Conne	cted Organizati	on, Affiliated Committee, Joint	Fundraising Repre	sentative	e, or Leadership PAC Spon
TEAM EMMER					
Mailing Address	824 S M	IILLEDGE AVE			
	STE 10	1 			
	ATHEN	S 		GA L	30605
<b>—</b>		CITY ▲	S	TATE A	ZIP CODE ▲
	nected Organization		Soint Fundraising R	lepresenta	tive Leadership PAC S
Conn	-	on Affiliated Committee	Soint Fundraising R	lepresenta	Leadership PAC S
Conn	-	on Affiliated Committee	Soint Fundraising R	depresenta	Leadership PAC S
Connue Co	-	on Affiliated Committee	Soint Fundraising R	depresenta	Leadership PAC S
esignated Agent: Id	-	address (phone number – option	Joint Fundraising R		
esignated Agent: Id	lentify by name,	on Affiliated Committee	Joint Fundraising R	depresenta	Leadership PAC S

FEC Form 1S (Revised 02/2017)

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

Done	of 7	
Page	of '	

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
EMMER MAJORITY	BUILDERS		
Mailing Address	824 S. MILLEDGE AVE. STE. 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Jointy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
Connecte		int Fundraising Representa	Leadership PAC Sp
Connecte		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identification		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identification		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address	y by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Sp
esignated Agent: Identification	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in whice aintains funds.	STATE A  Telephone Number	ZIP CODE A