

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

EMANUEL JONES FOR CONGRESS

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|---------------------------------------|--------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | <input type="text" value="1636.00"/> | <input type="text" value="1636.00"/> |
| (b) Total Contribution Refunds (from Line 20(d)) | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | <input type="text" value="1636.00"/> | <input type="text" value="1636.00"/> |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | <input type="text" value="181.90"/> | <input type="text" value="181.90"/> |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | <input type="text" value="181.90"/> | <input type="text" value="181.90"/> |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | <input type="text" value="16954.10"/> | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="16051.25"/> | |

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

EMANUEL JONES FOR CONGRESS

Report Covering the Period: From: / / To: / /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-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..... | 131.00 | 131.00 |
| (iii) TOTAL of contributions from individuals ▶ | 131.00 | 131.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 1500.00 | 1500.00 |
| (d) The Candidate..... | 5.00 | 5.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 1636.00 | 1636.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 15500.00 | 15500.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 15500.00 | 15500.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 17136.00 | 17136.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 181.90 | 181.90 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. 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 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 181.90 | 181.90 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 0.00 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 17136.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 17136.00 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 181.90 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 16954.10 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| | | | |
|--------------------------------------|-------------------------------------|--|------------------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE 5 OF 10 | |
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 | |

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)
EMANUEL JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ED HARBISON CAMPAIGN FUND

Mailing Address PO BOX 1292

| | | |
|------------------|-------------|-------------------|
| City COLUMBUS | State GA | Zip Code 31902 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 13 / 2025

Transaction ID : SA11C.4153

Amount of Each Receipt this Period
1500.00

Memo Item
CAMPAIGN CONTRIBUTION FROM NON-FEDERAL CAMPAIGN FUNDS RETURNED 4/10 AND WILL

B. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1500.00 |
| TOTAL This Period (last page this line number only).....▶ | 1500.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| | | | |
|--------------------------------------|-------------------------------------|-------------------------------------|---|
| FOR LINE NUMBER: (check only one) | | PAGE 6 OF 10 | |
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input checked="" type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
EMANUEL JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JONES, EMANUEL, , ,

Mailing Address 197 WARD RD

| | | |
|-------------------|-------------|-------------------|
| City ELLENWOOD | State GA | Zip Code 30294 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** H6GA13039

| | |
|---------------------------------|----------------------|
| Name of Employer LEGACY FORD | Occupation DEALER |
|---------------------------------|----------------------|

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
15505.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | / | 12 | / | 2025 |

Transaction ID : SA11D.4133

Amount of Each Receipt this Period
5.00

Memo Item
CANDIDATE CONTRIBUTION

B. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5.00 |
| TOTAL This Period (last page this line number only).....▶ | 5.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 10
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
EMANUEL JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JONES, EMANUEL, , ,

Mailing Address 197 WARD RD

City ELLENWOOD State GA Zip Code 30294

FEC ID number of contributing federal political committee. **C** H6GA13039

Name of Employer LEGACY FORD Occupation DEALER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2025

Transaction ID : SA13A.4124

Amount of Each Receipt this Period
500.00

Memo Item
CANDIDATE LOAN TO CAMPAIGN

B. Full Name (Last, First, Middle Initial)
JONES, EMANUEL, , ,

Mailing Address 197 WARD RD

City ELLENWOOD State GA Zip Code 30294

FEC ID number of contributing federal political committee. **C** H6GA13039

Name of Employer LEGACY FORD Occupation DEALER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
15500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 11 / 2025

Transaction ID : SA13A.4126

Amount of Each Receipt this Period
15000.00

Memo Item
CANDIDATE LOAN TO CAMPAIGN

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 15500.00 |
| TOTAL This Period (last page this line number only).....▶ | 15500.00 |

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **EMANUEL JONES FOR CONGRESS** Transaction ID : **SC/10.4124**

| | | |
|---|-------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item | | Election: 2026 |
| JONES, EMANUEL, , , | | <input checked="" type="checkbox"/> Primary |
| Mailing Address 197 WARD RD | | <input type="checkbox"/> General |
| City ELLENWOOD | | <input type="checkbox"/> Other (specify) ▼ |
| State GA | ZIP Code 30294 | <input checked="" type="checkbox"/> Personal Funds of the Candidate |

| | | |
|-----------------------------------|------------------------------------|---|
| Original Amount of Loan 500.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 500.00 |
|-----------------------------------|------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|-----------------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | M M / D D / Y Y Y Y 01 / 26 / 2025 | M M / D D / Y Y Y Y NONE | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
|--|--------------------------------|
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---|--------|
| SUBTOTALS This Period This Page (optional).....▶ | 500.00 |
| TOTALS This Period (last page in this line only).....▶ | |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **EMANUEL JONES FOR CONGRESS** Transaction ID : **SC/10.4126**

| | | | |
|--|--|---|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) | | <input type="checkbox"/> Memo Item | Election: 2026 |
| JONES, EMANUEL, , , | | | <input checked="" type="checkbox"/> Primary |
| Mailing Address 197 WARD RD | | | <input type="checkbox"/> General |
| City ELLENWOOD | | State GA | <input type="checkbox"/> Other (specify) ▼ |
| ZIP Code 30294 | | <input checked="" type="checkbox"/> Personal Funds of the Candidate | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 15000.00 | 0.00 | 15000.00 |

| | | | | |
|--------------|----------------|----------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | 03 / 11 / 2025 | NONE | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---|----------|
| SUBTOTALS This Period This Page (optional).....▶ | 15000.00 |
| TOTALS This Period (last page in this line only).....▶ | 15500.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

EMANUEL JONES FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES, EMANUEL, , ,

Nature of Debt (Purpose):

JAY DANIEL PHOTOGRAPHY & DESIGN
LLC INV#112: CAMPAIGN
PHOTOGRAPHER

Mailing Address 197 WARD RD

City

ELLENWOOD

State

GA

Zip Code

30294

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4146

Amount Incurred This Period

401.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

401.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES, EMANUEL, , ,

Nature of Debt (Purpose):

DII Solutions Inv#3088: Campaign Logos

Mailing Address 197 WARD RD

City

ELLENWOOD

State

GA

Zip Code

30294

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4150

Amount Incurred This Period

150.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

551.25

2) **TOTALS** This Period (last page this line number only)

551.25

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

15500.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

16051.25