

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL KIGGANS FOR CONGRESS					
ADDRESS (number and street) P.O. BOX 5042					
CITY VIRGINIA BEACH		STATE VA		ZIP CODE 23471	
2. NAME OF CANDIDATE KIGGANS, JENNIFER, , ,			3. OFFICE SOUGHT (State and District) House VA 02		4. FEC IDENTIFICATION NUMBER C00776120
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____					
A. FULL NAME CREEKSIDE MATERIALS LLC			Name of Employer		Date (month, day, year)
MAILING ADDRESS PO BOX 231			Transaction ID : TX353044		Amount 1500.00
CITY SMITHFIELD	STATE VA	ZIP CODE 23431-0231	Occupation		
B. FULL NAME HEARTDOCPAC			Name of Employer		Date (month, day, year)
MAILING ADDRESS 806 ELECTRA			Transaction ID : TX353091		Amount 1000.00
CITY LAKEWAY	STATE TX	ZIP CODE 78734-	Occupation		
C. FULL NAME BUKOWSKY, BROCK, , ,			Name of Employer VETERANS UNITED HOME LOANS		Date (month, day, year)
MAILING ADDRESS 550 VETERANS UNITED DRIVE			Transaction ID : TX353096		Amount 3500.00
CITY COLUMBIA	STATE MO	ZIP CODE 65201-	Occupation FINANCE		
D. FULL NAME ESSLINGER, DONALD, A., ,			Name of Employer RETIRED		Date (month, day, year)
MAILING ADDRESS 3000 CATERPILLAR CT			Transaction ID : TX353043		Amount 1000.00
CITY VIRGINIA BEACH	STATE VA	ZIP CODE 23456-8275	Occupation RETIRED		
E. FULL NAME FRANCO, ROBERT, , ,			Name of Employer RETIRED		Date (month, day, year)
MAILING ADDRESS PO BOX 441			Transaction ID : TX353063		Amount 1500.00
CITY PANACEA	STATE FL	ZIP CODE 32346-0441	Occupation RETIRED		
SIGNATURE (optional) MELTON, KAYLEN, , ,				DATE 07/24/2026	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

--	--	--

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6

(Revised 03/2016)

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL KIGGANS FOR CONGRESS			
ADDRESS (number and street) P.O. BOX 5042			
CITY, STATE, and ZIP CODE VIRGINIA BEACH VA 23471			
2. NAME OF CANDIDATE KIGGANS, JENNIFER, , ,		3. OFFICE SOUGHT (State and District) House VA 02	
		4. FEC IDENTIFICATION NUMBER C00776120	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE KALEEL, NASEEB, , , 4505 MAIN ST VIRGINIA BEACH VA 23462-3376		Name of Employer NMK CONSULTING, LLC Transaction ID : TX353097 Occupation CEO	
		Date (month, day, year) 07/23/2026	
		Amount 3500.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE LONG, SHEILA, F., , 1340 N. GREAT NECK ROAD STE 1272-401 VIRGINIA BEACH VA 23454-2268		Name of Employer CHESAPEAKE BAY RUBBER GASKET CO Transaction ID : TX353056 Occupation OWNER	
		Date (month, day, year) 07/22/2026	
		Amount 1500.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE ORLANDO, JOHN, T., , 410 WALBRIDGE BEND CAPE CHARLES VA 23310-4268		Name of Employer FINANCIAL SECURITY ADVISORY, INC Transaction ID : TX353041 Occupation FINANCE	
		Date (month, day, year) 07/22/2026	
		Amount 1500.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE RAYFIELD, THOMAS, EYRE, , 9502 HOSPITAL AVE NASSAWADOX VA 23413-1103		Name of Employer RAYFIELD'S PHARMACY Transaction ID : TX353042 Occupation PHARMACIST	
		Date (month, day, year) 07/22/2026	
		Amount 1000.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Occupation	
		Date (month, day, year)	
		Amount	