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. KIGGANS FOR CONGRESS P.O. BOX 5042 ADDRESS (number and street) (Check if address is changed) VIRGINIA BEACH 23471 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address KAYLEN@CROSBYOTT.COM is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00776120 FEC IDENTIFICATION NUMBER > 3. X 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 MELTON, KAYLEN, , MELTON, KAYLEN, , , Date 06 14 2024 Signature of Treasurer 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 information below.)	the candidate
Name of Candidate KIGGANS, JENNIFER, , ,	
Candidate Party Affiliation REP Office Sought: House Senate President	State VA District 02
(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 (Democra or subordinate) committee of the Republica	tic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Coope	rative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ted 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	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 committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committees Participating in Joint Fundraiser	
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14	FEC Form 1 (Revi			Page 3
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		OR CONGRESS		
6.		ted Organization, Affiliated Committee, Joint	t Fundraising Representative, or L	_eadership PAC Sponsor
	2A DEFENSE FU	JND 		
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA L	30605
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Conn	ected Organization Affiliated Organization	X Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: books and records.	Identify by name, address (phone number op	tional) and position of the person in p	possession of committee
	MEL	TON, KAYLEN, , ,		
	Full Name			
	Mailing Address	P.O. BOX 5042		
		VIRGINIA BEACH	VA VA	23471
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	TREASURER		Telephone number	
B.		ne and address (phone number optional) of e.g., assistant treasurer).	the treasurer of the committee; and	d the name and address of
	Full Name MEL of Treasurer	TON, KAYLEN, , ,	<u> </u>	

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

Mailing Address

P.O. BOX 5042

VIRGINIA BEACH

VIRGINIA BEACH

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼

TREASURER

Telephone number

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title or Desition	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position	Telephone number	
Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, ho kes or maintains funds.	lds accounts, rents
Name of Bank, D	epository, etc.	
	CHAIN BRIDGE BANK	
Mailing Address	1445-A LAUGHLIN AVE	
	MCLEAN VA 22101	
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	CLASSIC CITY BANK	
Mailing Address	2365 W BROAD ST	
	ATHENS GA 30606	
	CITY ▲ STATE ▲	ZIP CODE ▲

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

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fun	draising Panrasantativ	o or Leadarshin PAC Snons
AMERICAN BATTL			e, or Leadership FAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident		int Fundraising Represent	ative Leadership PAC Spo
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(h). Joint Fundrais i	ng Participant:		
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3.		FEC ID number	С
4		FEC ID number	C
Name of Any Connected	d 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 L	30605
Deletienskin	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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G WOMEN 202	24			
ess 228 S	WASHINGTON ST			
STE 1	115			
ALEX	ANDRIA	, , , , , I	VA	22314
	CITY ▲		STATE A	ZIP CODE ▲
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Mailing Address	228 S WASHINGTON ST		
-	STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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

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	Mailing Address	P.O. BOX 5042			
		VIRGINIA BEACH		_ VA _ ⊥	23471
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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PROTECT THE HO	JSE 2024		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee X J	oint Fundraising Represent	Leadership PAC Sp
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Mailing Addre	P.O. BOX 28	.11			
					<u> </u>
	LAKELAND		, , , , I	FL	33806
Relationship:		CITY A		STATE A	ZIP CODE ▲
	onnected Organization		Joint Fundraisin	g Represen	tative Leadership PAC Sp
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