

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 INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGI		Name of Employer	Date (month, day, year)
MAILING ADDRESS 1750 NEW YORK AVE NW		Transaction ID : TX180703	10/24/2024
CITY WASHINGTON	STATE DC	ZIP CODE 20006-5301	Amount 5000.00
B. FULL NAME BINGHAM, ALBERT, Y., ,		Name of Employer RETIRED	Date (month, day, year)
MAILING ADDRESS 2308 TROON CT		Transaction ID : TX180693	10/24/2024
CITY SANIBEL	STATE FL	ZIP CODE 33957-2218	Amount 3125.00
C. FULL NAME CATSIMATIDIS, JOHN, , ,		Name of Employer UNITED REFINING CO	Date (month, day, year)
MAILING ADDRESS 817 FIFTH AVE		Transaction ID : TX180697	10/24/2024
CITY NEW YORK	STATE NY	ZIP CODE 10065-7254	Amount 3300.00
D. FULL NAME CURTIS, SALLIE, , ,		Name of Employer RETIRED	Date (month, day, year)
MAILING ADDRESS 11 LIBBY CT		Transaction ID : TX182376	10/23/2024
CITY BATH	STATE ME	ZIP CODE 04530-1837	Amount 1041.02
E. FULL NAME LAUDER, RONALD, S., ,		Name of Employer CLINIQUE LABORATORIES	Date (month, day, year)
MAILING ADDRESS 767 5TH AVENUE		Transaction ID : TX180698	10/24/2024
CITY NEW YORK	STATE NY	ZIP CODE 10153-0023	Amount 3300.00
SIGNATURE (optional) MELTON, KAYLEN, , ,		DATE 10/25/2024	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

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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.

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE MARCUS, JOEL, , , 26 NORTH EUCLID AVENUE PASADENA CA 91101-1961		Name of Employer ALEXANDRIA REAL ESTATE EQUITIES INC Transaction ID : TX180695 Occupation EXECUTIVE CHAIRMAN	
		Date (month, day, year) 10/24/2024	
		Amount 3300.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE MCLESKEY, CHERYL, , , 2859 VIRGINIA BEACH BLVD. SUITE 106 VIRGINIA BEACH VA 23452-7622		Name of Employer MCLESKEY Transaction ID : TX182375 Occupation REAL ESTATE	
		Date (month, day, year) 10/23/2024	
		Amount 3300.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE ROBERTS, RICHARD, H., , MD P.O. BOX 18 LAKEWOOD NJ 08701-0018		Name of Employer RETIRED Transaction ID : TX180696 Occupation RETIRED	
		Date (month, day, year) 10/24/2024	
		Amount 3300.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE SOMERINDYKE, WILLIAM, , , 2996 ISLAND LN VIRGINIA BEACH VA 23454-		Name of Employer REGULUS GLOBAL, LLC Transaction ID : TX182374 Occupation CEO	
		Date (month, day, year) 10/23/2024	
		Amount 3300.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE TEMPLETON, BILL, M., , 8401 N CENTRAL EXPRESSWAY STE 525 DALLAS TX 75225-4418		Name of Employer TEMPLETON CAPITAL LLC Transaction ID : TX180694 Occupation DIRECTOR	
		Date (month, day, year) 10/24/2024	
		Amount 3300.00	

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE ZOBYPAYNE, MICHELLE, , , 1816 EDEN WAY VIRGINIA BEACH VA 23454-		Name of Employer RON ZOBY TOURS Transaction ID : TX182377 Occupation MARKETING REP	
		Date (month, day, year) 10/23/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	