State of West Virginia Campaign Financial Statement (Long Form) in Relation to 2024 Election Year

	(401.81						5/3/2	124
Commi	ttee or Candidate Name:	JACK	HEFE:	5774	(AKA	HEFEST	my ywi)	· c
	Sought: (if applicable) Conni		2 SON COUN	ITY)	District/Circuit:	(if applicable)	THELES TOWN	5 3
	Committee's Treasurer:							
Treasu	rer's Mailing Address:	212 ANN	STREET					
Treasu	rer's Daytime Phone:	304-870-	4882					
SELECT REF	PORTING PERIOD (Filing	deadlines falling or	n Saturday, S	Sunday or	a legal holiday w	ill be exten	ded to the next busi	ness day.
	st Quarter e April 1-8, 2024	Primary Report Due Apr 29-May		Second Due July	Quarter 1-7, 2024	1 1	d Quarter October 1-8, 2024	
General Report Due October 21-25, 2024 Due January 1-7, 2025 May be filed at any time Zero balance required								
		RI Totals for this F	EPORT TO	TALS	CASH B	ALANCE S	UMMARY	
Contribution	ons (PASE 2) (Page 3)	295			ning Balance	us romarti	[‡] 46532	. 86
Monetary (Contributions from all ng Events (Page 4)	+ 0	,00		Monetary Contri		+ 295	00
	a Transfer of Excess (Page 8)	+ 0	.00		Other Income	Dations		00
	etary Contributions	= 295	.00				= 46,827.	91
in-Kind Co	ntributions (Page 5)	+ 0	.00	Subtot	cal	a.	= 70,421	06
Total Cont	ributions	+ 295	60.					
				Total E	xpenditures	(Page 7)	7919,	26
Other Incom	me (Page 5)	0.	00)isbursements o Funds		+ 0.0	00
Loans Rece	eived (Page 6)	+ 0	.00	Repay	ment of Loans	(Page 6)	+ 0.3	00
Total Other	Income:	. 0.	00	Subto	tal	b.	= 7919.1	6
	OUTSTANDING LOAM	IS & DEBTS						
Unpaid Bill			00	Cudina	Relense			
	O SELF	+ 50,000	00		Balance		= 38908.	60
Total Debt	:: 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	= 50,00.	00	TC			TION YEAR-TO-DA	TE
TOTA	AL CONTRIBUTIONS ELEC (Add total contributions fr		416	,	(Add total ex		from all reports)	1
→ [J 11 1 4	80.00	1			151	171,40	-

Contributions of \$250 or Less

7	Check if additional pages
	have been attached.

DATE	CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME	ELECTION Check One	AMOUNT
	2000	X Primary	
4-8-2024	PATRICIA ANNE CABASE	☐ General	25.00
	7858	Primary	
4-8-2024	CINDEE CRAIG	☐ General	25.00
	8088	Primary	10000
4-12-2024	SHARON NOVAK	☐ General	100.00
	CASH	Primary	
4-12-2024	L. AND S.C. ANDERS	☐ General	190.10
	(ASH)	Primary	11= 40
4-20-2024	TOM WILLES	☐ General	45.00
		☐ Primary	
		☐ General	
		☐ Primary	
		☐ General	
		☐ Primary	
		☐ General	
		☐ Primary	
		☐ General	
		Primary	
		General	
		Primary	
		□General	
		☐ Primary	
		☐General	
		Primary	
		General	
		Primary	
		☐ General	
	Subtotal of contribut	ors of \$250 or less:	

MAKE COPIES OF THIS PAGE AS NEEDED

295.00

Page 3

HEFESTAY

CONTRIBUTIONS OF MORE THAN \$250

Check if additional pages
have been attached.

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S INFORMATION	ELECTION Check One	AMOUNT
	Full Name:		
	Address: residential and mailing (if different)	Primary	MONE
	Contributor's occupation :(individual contributor only)		
	Where contributor works: (individual contributor only)	☐ General	
	Affiliation: (political committee only)		
/	Full Name:		1
	Address: residential and mailing (if different)	Primary	
	Contributor's occupation :(individual contributor only)		
	Where contributor works: (individual contributor only)	General	
	Affiliation: (political committee only)		
/	Full Name:		
	Address: residential and mailing (if different)	Primary	
	Contributor's occupation :(individual contributor only)		
	Where contributor works: (individual contributor only)	General	
	Affiliation: (political committee only)		
	Full Name:		
	Address: residential and mailing (if different)	Primary	
	Contributor's occupation :(individual contributor only)		
1	Where contributor works: (individual contributor only)	General General	1
	Affiliation: (political committee only)		
/	Full Name:		
	Address: residential and mailing (if different)	Primary	
	Contributor's occupation :(individual contributor only)		
/	Where contributor works: (individual contributor only)	General General	
/	Affiliation: (political committee only)		Y
	e tarted of all contributions of mor	than \$350	6,00

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Subtotal of all contributions of \$250 or less (from page 2)

TOTAL CONTRIBTUIONS:

295.00

295.00

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HEFESTAY

\$250 or less:

FUNDRAISING EVENTS

Check if additional pages have been attached.

All monetary contributions received at a fundraiser must be reported in the Event Summary below.

If contributor's name and amount are not listed, the contribution must be turned over to the West Virginia General Revenue Fund.

EVENT SUMMARY

The only exception to this rule may apply to political party executive committees. (WV Code §3-8-5a)

	Type of Event Name of Place Held Address of Place Held	10	15	NET Total	netary Contributions enditures (from pg. 7) RECEIPTS In-Kind Contributions ed to Fundraiser	NIE	
1.	Contributions of	of \$250 or Less			Contributions of \$250 or More		d
DATE	FULL NAME	ELECTION Check One	AMOUNT	DATE	CONTRIBUTOR INFORMATION	ELECTION Check one	AMOUNT
		☐ Primary ☐ General			Full Name: Address:	☐ Primary	
		Primary General			Contributor's Job: (Individual only) Where contributor works: (Individual only)	☐ General	
		Primary General		-	Affiliation (PAC only)	/	
		Primary General			Full Name: Address:	☐ Primary	
	/	☐ Primary ☐ General			Contributor's Job: (individual only) Where contributor works: (individual only)	General	
		Primary General	6		Affiliation (PAC only) Full Name:		
		Primary General			Address: Contributor's Job: (individual only)	☐ Primary ☐ General	
		☐ Primary ☐ General			Where contributor works: (individual only) Affiliation {PAC only}		
		Primary General			Full Name: Address:	☐ Primary	
		☐ Primary ☐ General			Contributor's Job: (individual only) Where contributor works: (individual only)	☐ General	
	1	Primary General		Ĺ.,	Affiliation (PAC only)	toro.	
-/		Primary General			Subtotal of contributions of more than Subtotal of contributions of \$250 c		
<		Primary General			Total Contribe	utions:	0
	Subtotal of contributions	of	203				

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Date	Source of Income	Type of Receipt	Amount
	1500		
	N		
- /			
		Total Other Income:	0

IN-KIND CONTRIBUTIONS

Date	Name and Contributor Information	Description of Contribution	Election Check One	Value
			☐ Primary ☐ General	
	(1) E		☐ Primary ☐ General	
	X) T		☐ Primary ☐ General	
			☐ Primary ☐ General	
			☐ Primary ☐ General	
		V - 10 III -	☐ Primary ☐ General	
4		Total In-Kind Contributions:	2)

Page 7 HEFFSTRY APR 01- MPR 28 ITEMIZED EXPENDITURES

Check if additional pages have been attached.

110	eres inty		
Date	Name of Person or Vendor and Address	Purpose	Amount*
4-10-24	Name: NEIGHERIC HOLD 31843 Address: 6655 AMBERTON DR. SKITTE 2 ELKRIBGE, MD	YARD SIGHS (50) AND STEP STAKES (50)	275.56
4-11-24	Name: TRA-1018 SUPPLY CO Address: 1040 Som BLVD CHALES TOLD WY 25414	DRILL BIT	68.34
4-23-24	Name: MR. PRINT Address: 501 & MAIN ST PARCELLE VA 2013	POSTCAPED MAILER	2015.36
4-20-24	Name: J360 Address: 2340 CCARPOJANN BLVP SULTE 80, ARUNGTHI W 21742	BASE PLAN SUBSCRIPTION	450.00
4-10.24	Name: NEIGHBOR HOD STONS Address: 1655 AMB CON DR. SUTE L	SIGNS AND STEP STAKES	275.56
4-3-24	Name: THE JOURNAL Address: 207 W. KING ST. MARTINSTURE WY 2540	NOUSPAPER AD	500,00
4-22-24	Name: Address: OMBOTH DR 2/075	SIENS	171.64
4-16-24	Name: SPIRIT OF SELFERSON Address: PO BOX 966 25414 114 N. CHALLES ST. CHARLES TOWN	NEWSPAPER ASS	4062.80
	Name: Address:		
	Name: Address:		
	Name: Address:	·	
	Name: Address:		
	'Name: Address:		
	Name: Address:		
- 100	Name: Address:		
		Total Expenditures:	- N H

Total Expenditures:

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RECEIPT OF A TRANSFER OF EXCESS FUNDS HEFESTAY

ĺ	Check if add	ditional page	\$
	have been o	attached.	

Date	Candidate Committee Name and Year	Amount
		0
	Total Receipts of Transfer of Excess Funds:	0

DISBURSEMENT OF EXCESS FUNDS

Date	Candidate Committee Name and Year Disbursing Excess Funds	Purpose of Disbursement	Amount
			Ò
		Total Disbursements of Excess Funds:	0

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LOANS

West Virginia Code §3-8-5f Loans to candidates, organizations or persons for election purposes.

"No candidate, financial agent, person or association of persons or organization advocating or opposing the nomination or election of any candidate or the passage or defeat of any issue or item to be voted upon may receive any money or any other thing of value as a loan toward election expenses except from the candidate, his or her spouse or a lending institution. All loans shall be evidenced by a written agreement executed by the lender, whether the candidate, his or her spouse, or the lending institution. Such agreement shall state the date and amount of the loan, the terms, including interest and repayment schedule, and a description of the collateral, if any, and the full names and addresses of all parties to the agreement. A copy of the agreement shall be filed with the financial statement next required after the loan is executed."

The loan agreement must include all Items asked for in the statute. The loan agreement does not have to follow a certain format; generally, if all required information is listed, any format is accepted.

Any money a candidates contributes to his or her campaign committee with the hope of repayment must be treated as a loan and reported in this section. When a candidate determines that no further repayments can be expected, the loan can be reported as repaid in the sections by entering the amount left to repay in the repayments column and reporting the came amount as a contribution from the candidate on Page 2.

How to Report Loans

1. Each loan for your campaign must be listed on a separate line. Each time you loan money to the campaign, it is considered a separate loan. Include the following information on the form below:

Loans from previous reporting periods, and the balance of each loan; Any payments made on loans; New loans.

2. Attach a copy of the loan agreement for every new loan received during this reporting period.

LOANS

Bank Loans: List name & address of financial institution Candidate Loans: List name, residence	Column A Balance of previous loan at end of period	Column B Amount of new loan received during period		Column C Repayments during period		Column C Outstanding balance at end of period	
address and mailing address of person making or cosigning loan.	Amount	Date	Amount	Date	Amount	Date	Amount
10	NEW	/	101	ral S			
		-			egaren ing		
		V					
		Lo	ans Received	Repayme	nt of Loans	Outsta	nding Loans
	Totals:						

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UNPAID BILLS

Check if additional pages have been attached.

Date	Owed to Whom	Purpose	Amount
	Name:	2	0
	Address:		
	Name:		
	Address:		
	Name:		
	Address:		
	Name:		
	Address:		
	Name:		
	Address:		
	Name:		
	Address:		
	Name:		
1	Address:		
/	Name:		
		m = 111	0
		Total Unpaid Bills:	~

OATH/AFFIR I, true and accurate, to the best of my knowledge, for all period covered by this statement, as required by West	wear or affirm that the attached statement is financial transactions occurring within the
Jack Hyteley	Signature of Candidate, Financial Agent or Treasurer

Office Use On	y
Received By:	