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

	/aong -			711/29				
	Committee or Candidate Name:	JACK HE	ESTAY (AKA HEFES	THYUNV)				
	Office Sought: (if applicable)	KS TO ( SEFFER &	District/Circuit: (if applicable	CHARLES TOWN				
Committee's Treasurer: Tex Herestry :-)								
	Treasurer's Mailing Address: 212 ANN ST., CHARLES TOWN, WV 25414							
	Treasurer's Daytime Phone:	304-870-48	82					
S	ELECT REPORTING PERIOD (Filing	deadlines falling on Saturd	lay, Sunday or a legal holiday will be ext	ended to the next business day.				
First Quarter Due April 1-8, 2024  Primary Report Due Apr 29-May 3,2024  Second Quarter Due July 1-7, 2024  Third Quarter Due October 1-8, 2024								
General Report Fourth Quarter Amendment Final Report  Due October 21-25, 2024 Due January 1-7, 2025 May be filed at any time Zero balance required								
		REPORT	TOTALS					
	RECEIPTS OF FUNDS	Totals for this Period	CASH BALANCE	SUMMARY				
	Contributions (Page 3)	500,00	Beginning Balance (ending balance from previous report)	38908.60				
	Monetary Contributions from all Fund-Raising Events (Page 4)	+ 0,00	Total Monetary Contributions	+ \$500.00				
4	Receipt of a Transfer of Excess Funds (Page 8)	+ 0.00	Total Other Income	+ 0.00				
	Total Monetary Contributions	= 500.00	Subtotal	\$39408.60				
	In-Kind Contributions (Page 5)	+ 0.00	Subtotal					
4	Total Contributions	+ 500.00		6898.47				
	Other Income (Page 5)	0.00	Total Expenditures (Page 7  Total Disbursements of  Excess Funds (Page 8	0.00				
	Loans Received (Page 6)	+ 0.00	Repayment of Loans (Page 6	0.08				
	Total Other Income:	= 0,00		= 6898.47				
	OUTSTANDING LOAF	NS & DEBTS						
	Unpaid Bills (Page 9)	0.00	Ending Balance					
ŀ		+ 50,000.00*		= 325/0.13				
ì	Total Debts:  TOTAL CONTRIBUTIONS ELEC  (Add total contributions fi	= 50,000,00°	TOTAL EXPENDITURES ELE (Add total expenditur					
		QA 00	7 220	698,87				

### **Contributions of** \$250 or Less

$\neg$	Check if additional pages have been attached.
ل	have been attached.

JACK HEF	ESTAY
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DATE	CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME	ELECTION Check One	AMOUNT
	Departure Dank	<b>⊠</b> Primary	-0-
	NOVE THIS REPORTATION PERSON 04 MM 2024-01 JUL 2024	☐ General	
		☐ Primary	
		☐ General	
		Primary	
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		General	
	Subtotal of contribu	itors of \$250 or less:	_

**MAKE COPIES OF THIS PAGE AS NEEDED** 

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## CONTRIBUTIONS OF MORE THAN \$250

Check if additional pages
 have been attached.

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S INFORMATION	ELECTION Check One	AMOUNT
PATET /	Full Name: MOUNTHINEER PAC		\$ 500.06
APRIL/		Primary	\$500.06 Helle
30 2024	Contributor's occupation: (individual contributor only)  POLITICAL CONMITTEE  Where contributor works: (individual contributor only)	☐ General	
29 Nr 2024	Affiliation: (political committee only)		
7	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	
1	Contributor's occupation :(individual contributor only)		
1	Where contributor works: (individual contributor only)	General	
1	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	
¥	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	
1	Affiliation: (political committee only)		Y
	Subtotal of all contributions of	f more than \$250	
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TOTAL CONTRIBTUIONS:

#### Page 4

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#### **FUNDRAISING EVENTS**

_	Check if additional pages
ل	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)

	Date of Event  Type of Event  Name of Place Held  Address of Place Held	NEN		Expo NET Total	netary Contributions enditures (from pg. 7)  RECEIPTS  In-Kind Contributions ed to Fundraiser	NIF	
7	Contributions of	of \$250 or Less	5		Contributions of \$250 or More		
DATE	FULL NAME	ELECTION Check One	AMOUNT	DATE	CONTRIBUTOR INFORMATION	ELECTION Check one	AMOUNT
		Primary General Primary General			Full Name: Address: Contributor's Job: (Individual only) Where contributor works: (Individual only)	☐ Primary ☐ General	
		Primary General Primary General Primary General			Affiliation (PAC only)  Full-Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	☐ Primary.	
		Primary General Primary General Primary General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	☐ Primary ☐ General	
		Primary General Primary General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only)  /Affiliation (PAC only)	☐ Primary	
	/	General Primary General		- (	Subtotal of contributions of more than Subtotal of contributions of \$250 c		0
	Subtotal of contributions \$250 or le	Primary General			Total Contrib	utions:	0

## OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Date	Source of Income	Type of Receipt	Amount
		: 1/	
		IN I	
		7 0	
		Total Other Income:	

## **IN-KIND CONTRIBUTIONS**

Date	Name and Contributor Information	Description of Contribution	Election Check One	Value
			☐ Primary ☐ General	
		. 8	☐ Primary ☐ General	
			☐ Primary ☐ General	
			☐ Primary ☐ General	
		V 4	Primary General	
-			☐ Primary ☐ General	
		Total In-Kind Contributions:		)

#### 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	
- NOME 7	HIS PER	(SD -			
* PREVIOUSLY	REPORTED 6	CORN TO S	ELF OF 50	K	
		AT % 7	RHEREST		
		Loans Received	Repayment of Loans	Outstanding Loans	
	Totals:			TO SELF	

## ITEMIZED EXPENDITURES

7	Check if additional pages
J	have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
	Name: Address:		
5-2-2024	Name: MR Address: 501 E. MAN STANDARD VA 20187	POSTCARD MAILER	2014.38
5-8-2024	Name: MR PAMATA ST. Address: 501 5 MAIN ST. PURRELLVILE VA 20132	POSTCARD MAILER	2014.38
5-3-2024	Name: NEIGHBOR STANS Address: 6655 AMSTERN DR STEZ ELKRIDES, D	YARD 51645 (50)	171.64
5-2-2024	Name: THE YUMMY POTATO Address: 215 JEFFERSON WOODS DRIVE Address: FORREST VA 24551	TEXT MESSAGE	689,60
4-30-2026	Name: THE YURMY POTATO  Address: 215 JEFFEREN WOODS DRIVE FORREST, VF 2 455	TEXT MESSAGE	689.60
6-6-2024	Name: (360 Address: Z340 CLARENDON BLVD SUITE GO ARUNGTON VA	BASE PLAN SUBSCRIPTION	1318,87
	Name: Address:	41	
	Name: Address:		
	Name: Address:		l l
	Name: Address:		
-	Name: Address:		
	'Name: Address:		
	Name: Address:		-
	Name: Address:		
		Total Expenditures:	1 09017

Total Expenditures: 6898.47

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## **RECEIPT OF A TRANSFER OF EXCESS FUNDS**

1	Check if additional pages
	have been attached.

Date	Candidate Committee Name and Year	Amount
	NONE	
	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
	NONE		
		Total Disbursements of	0 -
		Excess Funds:	

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r a	5-	~

HETESTAY UNPAID BILLS

Check if additional page	S
have been attached.	

Date	Owed to Whom	Purpose	Amount
	Name: Address:		0
	Name:		
	Address:		
	Name: Address:		
	Name:		
	Address:		
	Name:		
	Address:		
	Name: Address:		2
	Name:		
	Address:		
	Name:		
		Total Unpaid Bills:	-0-
		•	
OATH/AFFIRMATION			

JACK HOFESTAY	, swear or affirm that the attached statement is				
true and accurate, to the best of my knowledge, for all financial transactions occurring within the					
period covered by this statement, as required by V					

\_\_\_\_\_\_ Signature of Candidate, Financial Agent or Treasurer

Date 01 714 20 24

Office Use Only Received By: