

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

received
1/17/2025

Committee or Candidate Name: JACK HEFESTAY
Office Sought: (if applicable) COMMISSIONER/JEFFERSON COUNTY District/Circuit: (if applicable) CHARLES TOWN
Committee's Treasurer: JACK HEFESTAY
Treasurer's Mailing Address: 212 BOWN ST, CHARLES TOWN, WV 25414
Treasurer's Daytime Phone: 304-870-4882

SELECT REPORTING PERIOD (Filing deadlines falling on Saturday, Sunday or a legal holiday will be extended 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 Due October 21-25, 2024
☒ Fourth Quarter Due January 1-7, 2025
☐ Amendment May be filed at any time
☐ Final Report Zero balance required

OFFICES CLOSED
1-6 & 1-7 DUE TO WEATHER

REPORT TOTALS

RECEIPTS OF FUNDS

Totals for this Period

Contributions (Page 3)		361.38
Monetary Contributions from all Fund-Raising Events (Page 4)	+	0.00
Receipt of a Transfer of Excess Funds (Page 8)	+	0.00
Total Monetary Contributions	=	361.38
In-Kind Contributions (Page 5)	+	0.00
Total Contributions	+	361.38

Other Income (Page 5)		0.00
Loans Received (Page 6)	+	0.00
Total Other Income:	=	0.00

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)		33,402.34
Total Monetary Contributions	+	0.00
Total Other Income	+	0.00
Subtotal a.	=	33,402.34

Total Expenditures (Page 7)		21,043.72
Total Disbursements of Excess Funds (Page 8)	+	0.00
Repayment of Loans (Page 6)	+	0.00
Subtotal b.	=	21,043.72

OUTSTANDING LOANS & DEBTS

Unpaid Bills (Page 9)		0.00
FROM FIRST REPORT PAID TO SELF Outstanding Loans (Page 6)	+	50,000.00
Total Debts:	=	50,000.00

Ending Balance (Subtotal a. - Subtotal b.)	=	12,358.62
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TOTAL EXPENDITURES ELECTION YEAR-TO-DATE
(Add total expenditures from all reports)

50,361.38

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE
(Add total contributions from all reports)

56,780.00

HOFESTAY

DATE	CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME	ELECTION Check One	AMOUNT
NONE	NONE	<input type="checkbox"/> Primary <input type="checkbox"/> General	NONE
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
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		<input type="checkbox"/> Primary <input type="checkbox"/> General	
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		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	

Subtotal of contributors of \$250 or less:

0.00

MAKE COPIES OF THIS
PAGE AS NEEDED

CONTRIBUTIONS OF MORE THAN \$250

☐ Check if additional pages
have been attached.

HEFESTAY

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S INFORMATION	ELECTION Check One	AMOUNT
05 NOV 2024	Full Name: F. J. HEFESTAY JR Address: residential and mailing (if different) 212 ANN ST, CHARLES TOWN Contributor's occupation :(individual contributor only) RETIRED Where contributor works: (individual contributor only) RETIRED Affiliation: (political committee only)	<input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	361.38 RECEIVED CASH
	Full Name: Address: residential and mailing (if different) Contributor's occupation :(individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	0.06
	Full Name: Address: residential and mailing (if different) Contributor's occupation :(individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	Full Name: Address: residential and mailing (if different) Contributor's occupation :(individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	Full Name: Address: residential and mailing (if different) Contributor's occupation :(individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	

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Subtotal of all contributions of more than \$250

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

TOTAL CONTRIBUTIONS:

	361.38
+	
=	361.38

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

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OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Date	Source of Income	Type of Receipt	Amount
N/A	NONE		

Total Other Income:

0.00

IN-KIND CONTRIBUTIONS

Date	Name and Contributor Information	Description of Contribution	Election Check One	Value
N/A	NONE		<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	

Total In-Kind Contributions:

0.00

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

LOANS						
Bank Loans: List name & address of financial institution Candidate Loans: List name, residence address and mailing address of person making or cosigning loan.	Column A	Column B		Column C		Column C
	Balance of previous loan at end of period	Amount of new loan received during period		Repayments during period		Outstanding balance at end of period
	Amount	Date	Amount	Date	Amount	Date Amount
ONLY LOAN WAS TO MYSELF	}	COMPLETELY REPAYED TO		SELF		
Totals:		Loans Received		Repayment of Loans		Outstanding Loans
		50,000.00		50,000.00		0.00

ITEMIZED EXPENDITURES

☐ Check if additional pages have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
10-23-2024	Name: THE YUMAY POTATO Address: 215 JEFFERSON WOODS DRIVE FORREST, VA 24551	TEXT MESSAGE	1004.20
10-30-2024	Name: THE YUMAY POTATO Address: 215 JEFFERSON WOODS DRIVE FORREST, VA 24551	TEXT MESSAGE	963.60
10-29-2024	Name: NEIGHBORHOOD SIGNS Address: 6655 AMBERTON DR STE 2 ELICRIIDGE MD	CAMPAIGN SIGNS	365.64
10-29-2024	Name: MR. PRINT Address: 501 E MAIN ST, PURCELLVILLE, VA 20134	CAMPAIGN MAILINGS	18,710.28
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		

Total Expenditures:

21043.72

RECEIPT OF A TRANSFER OF EXCESS FUNDS

Check if additional pages
have been attached.

Date	Candidate Committee Name and Year	Amount
	NO TRANSFER OF EXCESS FUNDS	
	THIS REPORT	
Total Receipts of Transfer of Excess Funds:		0.00

DISBURSEMENT OF EXCESS FUNDS

Date	Candidate Committee Name and Year Disbursing Excess Funds	Purpose of Disbursement	Amount
	NO EXCESS FUNDS DISBURSEMENT	THIS REPORT	
Total Disbursements of Excess Funds:			0.00

Date	Owed to Whom	Purpose	Amount
	Name: Address: <u>NONE</u>		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
Total Unpaid Bills:			0.00

OATH/AFFIRMATION

I, JACK HEFESTRY, 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 West Virginia Code §3-8-5a.

Jack Hefestry

Signature of Candidate, Financial Agent or Treasurer

Date 17 JAN, 20 25

Office Use Only

Received By: _____

UNPAID BILLS

☐ Check if additional pages
have been attached.

Date	Owed to Whom	Purpose	Amount
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
Total Unpaid Bills:			

OATH/AFFIRMATION

I, _____, 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 West Virginia Code §3-8-5a.

_____ Signature of Candidate, Financial Agent or Treasurer

Date _____, 20____

Office Use Only

Received By: _____