

# State of West Virginia Campaign Financial Statement (Long Form) in Relation to 2026 Election Year

Committee or Candidate Name: Ward For Jefferson Prosecutor  
 Office Sought: (if applicable) Prosecuting Attorney District/Circuit: (if applicable) Jefferson County  
 Committee's Treasurer: Whitney Ward  
 Treasurer's Mailing Address: 50 Tollhouse Way, Shepherdstown, WV 25443  
 Treasurer's Daytime Phone: (304) 620-1772

**SELECT REPORTING PERIOD** (Filing deadlines falling on Saturday, Sunday or a legal holiday will be extended to the next business day.)

- |  |  |   |   |
|--|--|---|---|
| <input checked="" type="checkbox"/> <b>First Quarter</b><br>Due April 1-7  | <input type="checkbox"/> <b>Second Quarter</b><br>Due July 1-7   | <input type="checkbox"/> <b>Third Quarter</b><br>Due October 1-7      | <input type="checkbox"/> <b>Fourth Quarter</b><br>Due January 1-7     |
| <input type="checkbox"/> <b>Primary Report</b><br>Due 15 days prior to Primary Election or within 4 business days thereafter | <input type="checkbox"/> <b>General Report</b><br>Due 15 days prior to General Election or within 4 business days thereafter | <input type="checkbox"/> <b>Amendment</b><br>May be filed at any time | <input type="checkbox"/> <b>Final Report</b><br>Zero balance required |

### REPORT TOTALS

**RECEIPTS OF FUNDS**

Totals for this Period

Contributions (Page 3)		\$ 1,250.00
Monetary Contributions from all Fund-Raising Events (Page 4)	+	0.00
Receipt of a Transfer of Excess Funds (Page 8)	+	0.00
<b>Total Monetary Contributions</b>	<b>=</b>	<b>\$ 1,250.00</b>
In-Kind Contributions (Page 5)	+	0.00
<b>Total Contributions</b>	<b>+</b>	<b>\$ 1,250.00</b>
Other Income (Page 5)		\$ 0.00
Loans Received (Page 6)	+	0.00
<b>Total Other Income:</b>	<b>=</b>	<b>\$ 0.00</b>

**CASH BALANCE SUMMARY**

Beginning Balance (ending balance from previous report)		\$ 2,194.97
Total Monetary Contributions	+	1,250.00
Total Other Income	+	0.00
<b>Subtotal a.</b>	<b>=</b>	<b>\$ 3,444.97</b>
Total Expenditures (Page 7)		\$ 1,558.99
Total Disbursements of Excess Funds (Page 8)	+	0.00
Repayment of Loans (Page 6)	+	0.00
<b>Subtotal b.</b>	<b>=</b>	<b>\$ 1,558.99</b>

**OUTSTANDING LOANS & DEBTS**

Unpaid Bills (Page 9)		\$ 0.00
Outstanding Loans (Page 6)	+	0.00
<b>Total Debts:</b>	<b>=</b>	<b>\$ 0.00</b>

Ending Balance (Subtotal a. - Subtotal b.)		= \$ 1,885.98
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**TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE**

(Add total contributions from all reports)

\$ 3,470.00

**TOTAL EXPENDITURES ELECTION YEAR-TO-DATE**

(Add total expenditures from all reports)

\$ 1,558.99





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.

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

**EVENT SUMMARY**

Date of Event <u>None</u> Type of Event <u>/</u> Name of Place Held <u>/</u> Address of Place Held <u>/</u>	Monetary Contributions <u>None</u> Expenditures (from pg. 7) <u>/</u> <b>NET RECEIPTS</b> Total In-Kind Contributions <u>/</u> Related to Fundraiser <u>/</u>
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**Contributions of \$250 or Less**

**Contributions of \$250 or More**

DATE	FULL NAME	ELECTION Check One	AMOUNT	DATE	CONTRIBUTOR INFORMATION	ELECTION Check one	AMOUNT
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<b>Subtotal of contributions of \$250 or less:</b>				
			<b>Subtotal of contributions of more than \$250:</b>				
			<b>Total Contributions:</b>				<u>\$ 0.00</u>
<b>Subtotal of contributions of \$250 or less:</b>			<u>\$ 0.00</u>				

**OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS**

Date	Source of Income	Type of Receipt	Amount
	None		

Total Other Income: \$0.00

**IN-KIND CONTRIBUTIONS**

Date	Name and Contributor Information	Description of Contribution	Election Check One	Value
	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



ITEMIZED EXPENDITURES

Check if additional pages have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
01/06/ 2026	Name: Wix.com Address: 100 Gansevoort St. New York, NY 10014	website services	\$368.88
01/14/ 2026	Name: Jefferson County Clerk Address: 393 N. Lawrence St. Charles Town, WV 25414	Filing Fee	\$1,190.11
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		

Total Expenditures:

\$1,558.99

RECEIPT OF A TRANSFER OF EXCESS FUNDS



Check if additional pages have been attached.

Date	Candidate Committee Name and Year	Amount
	None	
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
	None		
Total Disbursements of Excess Funds:			\$0.00

UNPAID BILLS

Check if additional pages have been attached.

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:		
<b>Total Unpaid Bills:</b>			<u>\$0.00</u>

OATH/AFFIRMATION

I, Adam J. Ward, 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 April 7, 2026

Office Use Only  
**RECEIVED**  
4/7/26  
Received By: S. Pace