

Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number : 2004106		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: SONNEY, CURT COM TO ELECT										
Street Address: C/O CHRISTINE CRONE,20-R EAST SIMPSON ST.										
City: MECHANICSBURG			State: PA		Zip Code: 17055					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7. X	Year 2011	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO	DAY	YEAR	4	STH	REP	25
				11	8	2011	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		11	29	2011	TO	12	31	2011		
A. Amount Brought Forward From Last Report				\$		4,079.91				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		7,633.81				
C. Total Funds Available (Sum Of Lines A and B)				\$		11,713.72				
D. Total Expenditures (From Schedule III)				\$		2,411.32				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		9,302.40				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		0.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature

My Commission Expires _____

MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature

My Commission Expires _____

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
SONNEY, CURT COM TO ELECT	From: <u>11/29/2011</u> To: <u>12/31/2011</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 83.81

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 5,250.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 5,250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,300.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 2,300.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 7,633.81
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PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

**Use this Part to itemize only contributions received from political committees
with an aggregate value from \$50.01 to \$250.00 in the reporting period.**

Name of Filing Committee or Candidate				Reporting Period			
SONNEY, CURT COM TO ELECT				From:	<u>11/29/2011</u>	To:	<u>12/31/2011</u>
				DATE		AMOUNT	
Full Name of Contributing Committee PENN NATIONAL INSURANCE				MO	DAY	YEAR	\$ 250.00
Mailing Address 2 NORTH 2ND ST. 14TH FL.				4	16	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 171012361					
Full Name of Contributing Committee PA MEDICAL PAC				MO	DAY	YEAR	\$ 250.00
Mailing Address PO BOX 8820				4	21	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 171058820					
Full Name of Contributing Committee PA CHAMBER PAC				MO	DAY	YEAR	\$ 250.00
Mailing Address 417 WALNUT ST.				4	21	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011902					
Full Name of Contributing Committee PENNSYLVANIA BEER ALLIANCE				MO	DAY	YEAR	\$ 250.00
Mailing Address 411 WALNUT ST.				4	26	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PAA				MO	DAY	YEAR	\$ 250.00
Mailing Address 1925 N. FRONT ST.				4	8	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105					

Full Name of Contributing Committee PA OPTOMETRIC PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 218 NORTH ST.			4	19	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee CERTIFIED PUBLIC ACCOUNTANTS			MO	DAY	YEAR	\$ 250.00
Mailing Address 500 N 3RD STREET STE 600A			5	2	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee FIRST ENERGY PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 76 S. MAIN ST.			5	2	2011	
City AKRON	State OH	Zip Code (Plus 4) 443081890				
Full Name of Contributing Committee GENERAL ELECTRIC PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 1299 PENNSYLVANIA AVE NW			4	18	2011	
City WASHINGTON	State DC	Zip Code (Plus 4) 20004				
Full Name of Contributing Committee MALADY & WOOTEN, LLP			MO	DAY	YEAR	\$ 250.00
Mailing Address 604 NORTH THIRD ST.			4	29	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee G. G. R. INC			MO	DAY	YEAR	\$ 250.00
Mailing Address 212 LOCUST ST.			4	8	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011510				

Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVT			MO	DAY	YEAR	\$ 250.00
Mailing Address TWO N. NINTH ST.			4	1	2011	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101				
Full Name of Contributing Committee PENNSYLVANIA EMERGENCY PHYSICIANS			MO	DAY	YEAR	\$ 250.00
Mailing Address 200 N. THIRD ST. STE. 1500			4	15	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee PA BOWLING CENTERS PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 200 N. THIRD ST. STE. 1500			4	15	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee PENNSYLVANIA PSYCHOLOGICAL PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 416 FORSTER ST.			4	20	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 171021714				
Full Name of Contributing Committee PMA PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 225 STATE ST.			3	18	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee BIKE PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address PO BOX 564			3	21	2011	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055				

Full Name of Contributing Committee PHARMACY POLITICAL ACTION COMM.			MO	DAY	YEAR	\$ 250.00
Mailing Address 508 NORTH THIRD ST.			3	29	2011	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011199				
Full Name of Contributing Committee PAMIC PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 1017 MUMMA RD. STE. 103			3	28	2011	
City WORMLEYSBURG	State PA	Zip Code (Plus 4) 17043				
Full Name of Contributing Committee PENNSYLVANIA REALTORS PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 500 N. 12TH ST.			4	1	2011	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043				
Full Name of Contributing Committee HIGHMARK HEALTH PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 1800 CENTER ST.			3	24	2011	
City CAMP HILL	State PA	Zip Code (Plus 4) 170890089				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 5,250.00

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT	
Full Name of Contributor						
Mailing Address	MO	DAY	YEAR			\$ 0.00
City	State	Zip Code (Plus 4)				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 0.00

PART C
Contributions Received From Political Committees
OVER \$250.00

Use this Part to itemize only contributions received from Political committees
with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate SONNEY, CURT COM TO ELECT	Reporting Period From: <u>11/29/2011</u> To: <u>12/31/2011</u>
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			DATE	AMOUNT		
Full Name of Contributing Committee	Mailing Address	City	MO	DAY	YEAR	
PA OPHTHALMOLOGY PAC	200 N. THIRD ST. STE. 1500	HARRISBURG	4	15	2011	\$ 500.00
		State: PA Zip Code (Plus 4): 17101				
TROOPERS ASSOCIATION PAC	3625 VARTAN WAY	HARRISBURG	12	19	2011	\$ 500.00
		State: PA Zip Code (Plus 4): 17110				
Z PAC PENNSYLVANIA ANESTHESIOLOGISTS	PO BOX 823	HARRISBURG	4	14	2011	\$ 500.00
		State: PA Zip Code (Plus 4): 17108				
PHYSICIAN ASSISTANTS PAC	200 N. THIRD ST. STE. 1500	HARRISBURG	4	15	2011	\$ 500.00
		State: PA Zip Code (Plus 4): 17101				
IFA PAC - PA			8	30	2010	\$ 300.00

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL	
\$	2,300.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

**Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)**

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business	City		State	Zip Code (Plus 4)

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 0.00

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code (Plus 4)			
Receipt Description					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate SONNEY, CURT COM TO ELECT	Reporting Period From: <u>11/29/2011</u> To: <u>12/31/2011</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)	\$ 0.00

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Description of Contribution:				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL	
						0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
SONNEY, CURT COM TO ELECT	From <u>11/29/2011</u> To: <u>12/31/2011</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
JAN GURDAK	1	20	2011	\$ 10.00
Mailing Address 28 RAYMOND AVE.				
City CORY	State PA	Zip Code (Plus 4) 16407	Description of Expenditure NOTARY SERVICE	
To Whom Paid WAL-MART	2	6	2011	\$ 791.82
Mailing Address 5741 BUFFALO RD.				
City HARBORCREEK	State PA	Zip Code (Plus 4) 16421	Description of Expenditure COMPUTER & PRINTER	
To Whom Paid DANERI FOR DA.	1	27	2011	\$ 500.00
Mailing Address PO BOX 344				
City ERIE	State PA	Zip Code (Plus 4) 16512	Description of Expenditure CONTRIBUTION	
To Whom Paid CORY RELAY FOR LIFE	6	6	2011	\$ 100.00
Mailing Address PO BOX 103				
City CORY	State PA	Zip Code (Plus 4) 16407	Description of Expenditure CONTRIBUTION	
To Whom Paid STOCKS ON SECOND	4	26	2011	\$ 387.50
Mailing Address 211 NORTH 2ND ST.				
City HARRISBURG	State PA	Zip Code (Plus 4) 171011420	Description of Expenditure	

To Whom Paid HRCC			MO	DAY	YEAR	
Mailing Address 500 N 3RD ST 4TH FL.			6	6	2011	\$ 550.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION			
To Whom Paid CORY JOURNAL			MO	DAY	YEAR	
Mailing Address 28 W. SOUTH ST.			9	22	2011	\$ 60.00
City CORY	State PA	Zip Code (Plus 4) 16407	Description of Expenditure HOMEROOM CLASS			
To Whom Paid PNC BANK			MO	DAY	YEAR	
Mailing Address 901 STATE ST.			9	30	2011	\$ 12.00
City ERIE	State PA	Zip Code (Plus 4) 16501	Description of Expenditure SERVICE CHARGE			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 2,411.32

