Campaign Finance Report

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

Filer Identificati	i on 2014	C0677			Repor		CANE	DIDATE	\checkmark	СО	OMMITTEE		LOB	BYIST	
Number :	Committee, Candida	ate or l	obbyist:				RTIS G								
Name of Filing C	committee, candida		.obbyist.			1, CO	(115 G								
Street Address:															
City:							State:				Zip Cod	e: 16	511		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.	30 DA PRIMA		POST-	3.		AMENDME REPORT?	INT	Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE-	• 5. X	30 DA ELECT		POST-	6.		TERMINA REPORT?	FION	Yes	No	\checkmark
report type)	ANNUAL REPORT	7.	Year 2014				IG METI CHECK				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candidat	ie:	-		-		DATE	OF ELE	CTION		District Number	Office Code	Par	ty Code	County Code
REPRESENTATI	VE IN THE GENER		SEMBLY				мо	DAY	YEAF	र	4	STH	REP		25
							1	1	4 2	014		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY Y	EAR			мо	DAY	YEAI	ર	FOF	OFFIC	e use	ONLY	
Expenditures	s from:		6 10	20	14	0	1	0	20 2	2014	\mathcal{D}				
A. Amount Bro	ught Forward Fron	n Last F	Report			\$				0.00	1				
B. Total Moneta	ary Contributions A	And Red	ceipts (From S	Sched	lule I)	\$				0.00					
C. Total Funds	Available (Sum Of	Lines A	A and B)			\$	7	$\mathbf{\Sigma}$		0.00					
D. Total Expen	ditures (From Sche	edule I	II)			\$		/	C	0.00					
E. Ending Cash	Balance (Subtract	Line D	From Line C)			\$	\checkmark		C	.00					
F. Value Of In-	Kind Contributions	Receiv	ved (From Sch	edule	e II)	\$	/		C	0.00					
G. Unpaid Debt	ts And Obligations	(From	Schedule IV)			\$			C	0.00					
			A	٩FFI	DAVI	T SE	CTION								
PART I - If this is	s a Committee repo	ort, trea	asurer sign he	ere. If	f this is	s a Car	didate	report,	candidat	te sig	gn here.				
I swear (or affirm) correct and comple) that this report, incl ete.	uding th	e attached sched	dules	filed on	paper	or by ele	ctronic m	edium, aı	e to t	the best of	my know	ledge	and beli	ef , true
Sworn to and subs	cribed before me this day of)	20						Sigr	ature	e of Person	Submitti	ing Rep	ort	
	Signatur	re				_					Printe	ed Name			
My Commission E	kpires					_					Email				
	мо	D	AY	YR				Ar	ea Code		Daytime	Telepho	one Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized Co	ommi	ittee, C	Candid	ate sha	ll sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of med.	ıy knowl	ledge and belief	this p	political	comm	ittee has	not viola	ited any p	rovis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20							S	ignature of	Candida	te		
						_					Printed	Name			
My Commission Exp	Signature bires					-					Email				
	мо	D	DAY	YR		_		Area	Code		Day	/time Te	lephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	
SONNEY, CURTIS G	From: <u>6/10/201</u>	4 To: <u>10/20/2014</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor		
TOTAL for the Reporting	Period (1)	\$ 0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)		
Contributions Received From Political Committees (Part A)		\$ 0.00
All Other Contributions (Part B)		\$ 0.00
TOTAL for the Reporting	Period (2)	\$ 0.00
		7
3. Contributions Received Over \$250.00 (From Part C and Part D)		1
Contributions Received From Political Committees (Part C)		\$ 0.00
All Other Contributions (Part D)	N>	\$ 0.00
TOTAL for the Reporting	Period (3)	\$ 0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa	d enter amount ge, Item B.)	\$ 0.00

5/2/2024 2:11:15 PM

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CONTRIBUTIONS		PART A D FROM 1 TO \$250.0		DLIT	ICAL	СОМ	мітт	EES
Use this Part to with an agg		tributions r	ece					
Name of Filing Committee or Candidat	te		Re	porting	Period			
			Fre	om:		То:		
					DATE		AM	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address	0							0.00
City	State	Zip Code (Plus	4)				\searrow	
Enter Grand Total of Part A on Sche	dule I, Detailed Sun	nmary Page, S	ectio	on 2.	$\langle \rangle$	> V	PAG \$	E TOTAL 0.00

Г

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											
			Fro	m:		Т	o:				
					DATE			AMOUNT			
Full Name of Contributor				мо	DAY	YEAR	X				
Mailing Address							\$	//	0.00		
City	State	Zip Code (Plus 4)	4								
		1			\searrow	>		PAGE TO	TAL		
Enter Grand Total of Part A on s	Schedule I, Detail		je, 3				\$		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			Reporting	g Period				
			From:			То:		
				DA	TE			
Full Name of Contributing Committee				мо	DAY	YEAR	X N	
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)			\searrow		
Enter Grand Total of Part C on Sched	ula I. Datailad Sum	mary Br	ngo Eastia				PAGE T	OTAL
Enter Grand Total of Part C on Sched	ule 1, Detailed Sum	mary Pa	ige, Sectio	n 3.	\searrow		\$	0.00

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			Repo	orting Pe	riod			
			Fron	n:		То):	
				D	ATE			
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	54)				1	
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus	4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Sectio	on 3.			PAGE TO	
							\$	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:			То:				
L				D	ATE		AMOUN	г		
Full Name				мо	DAY	YEAR				
Mailing Address								0.00		
City	State	Zip Code (I	Plus 4)							
Receipt Description			4			\searrow				
Enter Grand Total of Part E on Schedu	le I, Detailed Summ	nary Page,	Section	4.	\checkmark	Γ	PAGE TO	DTAL		
							\$	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	Reporting Pe	riod	
SONNEY, CURTIS G	From:	<u>6/10/2014</u> To:	<u>10/20/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ΓF)		
TOTAL for the Reporting Pe	riod (2)	5	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, I		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period	Period			
			From:			То:		
L				DATE		AMOUNT		
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						5	0.00	
City	State	Zip Code (Plus 4)		$\hat{}$			
Description of Contribution:						1		
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	ailed Sum	mary Pag	je,	PAGE TOT	AL	
				\sum	\$	\$	0.00	

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

Name of Filing Committee or Candid	ate			Reporting Period					
				Fr	om:		To:		
						DATE		ΑΜΟΙ	JNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								5	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion	\searrow		
Employer Mailing Address/Principal Business	Place of	City	State		Zip 4)	Code(Plus	Descri	ption of Contri	bution
Enter Grand Total of Part G on S Summary Page, Section 3.	Schedule II, 1	[n-Kind	Contributions D	etail	ed			PAGE	TOTAL 0.00
							- -		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
			From			То:	
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Mailing Address						<u></u>	0.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	\bigtriangledown	b.
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item D				РА \$	GE TOTAL 0.00