

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		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: SONNEY, CURT COM TO ELECT													
Street Address: 7783 EAST LAKE RD													
City: ERIE						State: PA			Zip Code: 16511-0000				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	✓		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	✓		
	ANNUAL REPORT	7.	Year 2015	FILING METHOD () CHECK ONE			PAPER		✓	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR					
						11	3	2015	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		1	1	2015		5	4	2015					
A. Amount Brought Forward From Last Report						\$ 26,151.52							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 3,750.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 29,901.52							
D. Total Expenditures (From Schedule III)						\$ 1,738.00							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 28,163.52							
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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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>1/1/2015</u> To: <u>5/4/2015</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)	\$ 250.00
TOTAL for the Reporting Period (2)	\$ 250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 3,500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 3,500.00

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.)	\$ 3,750.00
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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
SONNEY, CURT COM TO ELECT	From: <u>1/1/2015</u> To: <u>5/4/2015</u>

				DATE			AMOUNT	
Full Name of Contributor John Michael Feretti II					MO	DAY	YEAR	\$ 250.00
Mailing Address 1237 St. Marys Dr.					5	1	2015	
City Erie		State PA	Zip Code (Plus 4) 16509					

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

PAGE TOTAL
\$ 250.00

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>1/1/2015</u> To: <u>5/4/2015</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee AUD PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 908 N 2ND ST.				4	30	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102-0000					
Full Name of Contributing Committee PAMIC PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 1017 MUMMA RD STE 103				4	28	2015	
City WORMLEYSBURG	State PA	Zip Code (Plus 4) 170430000					
Full Name of Contributing Committee OTO PAC (PA ACADEMY OF OTOLARYNGOLOGY)				MO	DAY	YEAR	\$ 300.00
Mailing Address 200 N THIRD ST STE 1500				5	4	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 171010000					
Full Name of Contributing Committee Chamber PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 417 Walnut St.				4	29	2015	
City Harrisburg	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PENN NAT INS/INSERVCO INS SERV PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address TWO NORTH SECOND ST				4	27	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 171010000					

Full Name of Contributing Committee BAYADA HOME HEALTH CARE PAC			MO	DAY	YEAR	\$ 300.00
Mailing Address 1315 WALNUT STREET, STE 600			4	27	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107-0000				
Full Name of Contributing Committee BIKERS PAC (BIKEPAC)			MO	DAY	YEAR	\$ 300.00
Mailing Address P O BOX 564			4	30	2015	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 170550000				
Full Name of Contributing Committee PAA-PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1925 N. Front St.			4	24	2015	
City Harrisburg	State PA	Zip Code (Plus 4) 17105				
Full Name of Contributing Committee Pennsylvania Emergency Physicians PAC			MO	DAY	YEAR	\$ 300.00
Mailing Address 200 N. 3rd St. Suite 1500			5	4	2015	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee PA SOCIETY OF PHYSICIAN ASSISTANTS			MO	DAY	YEAR	\$ 300.00
Mailing Address 200 N 3RD ST STE 1500			5	4	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011501				
Full Name of Contributing Committee PA OPHTHALMOLOGY PAC			MO	DAY	YEAR	\$ 300.00
Mailing Address 200 N THIRD ST STE 1500			5	4	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 171010000				

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

PAGE TOTAL
\$ 3,500.00

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	\$ 0.00
Mailing Address							
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:
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			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
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		Reporting Period	
SONNEY, CURT COM TO ELECT		From: <u>1/1/2015</u> To: <u>5/4/2015</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 RECIEVED - 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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
SONNEY, CURT COM TO ELECT	From <u>1/1/2015</u> To: <u>5/4/2015</u>

DATE				AMOUNT		
To Whom Paid Harold H. Hinkler Inc.			MO	DAY	YEAR	\$ 15.00
Mailing Address 7 Grhamvile St.			1	17	2015	
City North East	State PA	Zip Code (Plus 4) 16428	Description of Expenditure Notory			
To Whom Paid DANERI FOR DA			MO	DAY	YEAR	\$ 125.00
Mailing Address P O BOX 344			1	29	2015	
City Erie	State PA	Zip Code (Plus 4) 16512	Description of Expenditure Contribution			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 500.00
Mailing Address 500 N. 3rd St.fl 3A			2	2	2015	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Donation			
To Whom Paid ECRC			MO	DAY	YEAR	\$ 40.00
Mailing Address 2206 W. 15th St.			2	28	2015	
City Erie	State PA	Zip Code (Plus 4) 16505	Description of Expenditure Donation			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 250.00
Mailing Address 500 N. 3rd St.			3	3	2015	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Donation			

To Whom Paid WWCBS 1370 AM			MO	DAY	YEAR	\$ 55.00
Mailing Address 122 N. Center St.			3	21	2015	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Advertisement			

To Whom Paid Hopkins for Judge			MO	DAY	YEAR	\$ 500.00
Mailing Address 504 State St.			4	16	2015	
City Erie	State PA	Zip Code (Plus 4) 16501	Description of Expenditure Donation			

To Whom Paid HRCC			MO	DAY	YEAR	\$ 250.00
Mailing Address 500 N. 3rd St.			3	2	2015	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Donation			

To Whom Paid PNC Bank			MO	DAY	YEAR	\$ 3.00
Mailing Address 4488 Buffalo Rd.			1	30	2015	
City Eire	State PA	Zip Code (Plus 4) 16510	Description of Expenditure service charge			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 1,738.00

