Campaign Finance Report

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

| Filer Identificati Number : | on 2004 | 1106 | | | | port ed B | | CANDI | DATE | | СОМ | 4ITTEE | ✓ | LOB | BYIST | | |
|--|---------------------------------|------------|------------------------|--------|----------|--------------|----------------|-------------|----------|-------------|------------|--------------------|----------------|----------------------|----------|----------|-----------------|
| Name of Filing C | Committee, Candid | late or L | obbyist: | • | SON | NNE | , CUF | RT COM 1 | O ELE | СТ | | | | | | | |
| Street Address: | 7783 EAST L | AKE RD | | | | | | | | | | | | | | | |
| City: | ERIE - | | | | | | | State: | PA | | | Zip Cod | ie: 16 | 5511-0 | 000 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | PRE- | - | 2. | 30 DA PRIMA | | POST- | 3. X | | AMENDM REPORT | | Yes | No | | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | PRE | <u>-</u> | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | • | \ |
| report type) | ANNUAL REPORT | 7. | Year 2015 | | | | | IG METHO | | | | | | $\overline{}$ | DISKE | TTE | |
| Name of Office S | Sought by Candida | ite: | - | | | | | DATE O | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | Coun | |
| | MO DAY YEAR | | | | | | | | | 1 | REF |) | 25 | | | | |
| 11 3 2015 | | | | | | | | | | (SEE IN | STRUCTI | ONS FOR (| CODES) |) | | | |
| Summary of Expenditures | Receipts and | МО | | /EAR | | | _ | МО | DAY | YE | AR | FO | R OFFI | CE USE | ONLY | | |
| | | | 5 5 | 2 | 015 | T | 0 | 6 | | 8 | 2015 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | | 63.52 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (From S | Sche | dule | e I) | \$ | | | 3,9 | 50.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 32,1 | 13.52 | | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | 2,1 | 74.64 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) |) | | | \$ | | | 29,9 | 38.88 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Sch | nedu | le II | I) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | ts And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | | | | |
| | | | , | AFF | IDA | AVI | T SE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign he | ere. 1 | If th | nis is | a Can | didate re | eport, o | andio | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | luding the | attached sche | dules | s file | ed on | paper o | or by elect | ronic m | edium | , are to t | he best o | f my kno | wledge | and beli | ef , tru | ue _. |
| Sworn to and subs | cribed before me thi day of | s | 20 | | | | | | | s | ignature | of Perso | n Submit | ting Re _l | oort | | |
| | Signatu | ıre | | | | | - | | | | | Prin | ted Name | • | | | _ |
| My Commission Ex | cpires | | | | | | _ | | | | | Ema | il | | | | |
| | мо | D | AY | YR | | | | | Are | ea Cod | e | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized C | omn | nitte | ee, C | andida | ate shall | sign h | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of led. | my knowle | edge and belief | this | poli | itical | commi | ittee has n | ot viola | ted an | y provis | ions of th | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Sworn to and subsc | ribed before me this day of | | 20 | | | | | | | | s | ignature o | of Candid | ate | | | - |
| | | | | | | | - | | | | | Printe | d Name | | | | - |
| My Commission Exp | Signature | | | | | | - | | | | | Ema | il | | | | - |
| , | | | | | | | | | | | | | | | | | _ |
| | МО | D | AY | YR | | | | | Area | Code | | Da | aytime T | elephor | ne Numb | er | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | Period | | |
|---|-----------|---------|----------------|----------|
| SONNEY, CURT COM TO ELECT | From: | 5/5/201 | . <u>5</u> To: | 6/8/2015 |
| 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) | | | \$ | 100.00 |
| All Other Contributions (Part B) | | | \$ | 850.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 950.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 2,500.00 |
| All Other Contributions (Part D) | | | \$ | 500.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 3,000.00 |
| 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 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page | | | \$ | 3,950.00 |

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: | 5/5/2015 | To: | 6/8/2015 |
| | | DATE | | AMOUNT |

| | Full Name of Contributing Committee HUMANE PA | | | | | | YEAR | |
|---------|---|--|--------------------|-------------------------------------|---|---|------|-----------|
| Mailing | Mailing Address PO BOX 0352 | | | | | | | \$ 100.00 |
| City | RED LION | | State PA | Zip Code (Plus 4) 17356-0352 | 6 | 1 | 2015 | |

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

PAGE TOTAL \$ 100.00

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 Candida | lame of Filing Committee or Candidate | | | Reporting Period | | | | | |
|---|---------------------------------------|-----------------------------------|------|------------------|-------------|------------------------|------------|------------|--|
| SONNEY, CURT COM TO ELECT | | | Fron | n: | <u>5/5/</u> | <u>2015</u> T o |) : | 6/8/2015 | |
| | | | | | DATE | | | AMOUNT | |
| Full Name of Contributor Richard E Ferretti | | | | мо | DAY | YEAR | | | |
| Mailing Address 4329 Harvard Rd. | | | | | | | \$ | 150.00 | |
| City Erie | State PA | Zip Code (Plus 4) 16509 | | 5 | 7 | 2015 | | | |
| Full Name of Contributor Paul Hakel | | | | мо | DAY | YEAR | | | |
| Mailing Address 225 Edgewater Ci | | | | 5 | 8 | 2015 | \$ | 200.00 | |
| City Erie | State PA | Zip Code (Plus 4) 16509 | | 3 | o | 2013 | | | |
| Full Name of Contributor Mary L. Eckert | | | | мо | DAY | YEAR | | | |
| Mailing Address 5403 Pepperwood | Cir. | | | F | 9 | 2015 | \$ | 250.00 | |
| City Eire | State PA | Zip Code (Plus 4) 16506 | | 5 | 9 | 2015 | | | |
| Full Name of Contributor Richard P. Olinger | | | | МО | DAY | YEAR | | | |
| Mailing Address 8215 Platz Rd. | | | | _ | | 25:- | \$ | 250.00 | |
| City Fairview | State PA | Zip Code (Plus 4) 16415 | | 5 | 9 | 2015 | | | |
| | | | | | | | | PAGE TOTAL | |

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

\$ 850.00

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 | ne of Filing Committee or Candidate Repo | | | Period | | | | |
|---|--|----------------------------------|------|-----------|---------------|------|----------------|-----|
| SONNEY, CURT COM TO ELECT | | From | m: | <u>5/</u> | <u>5/2015</u> | То: | 6/8/2015 | |
| | | • | | DA | TE | | AMOUNT | |
| Full Name of Contributing Committee PUGLIESE PAC | | | | мо | DAY | YEAR | | |
| Mailing Address 2205 STRAWBERRY | SQUARE | | | | | | \$ 500. | .00 |
| City HARRISBURG | State PA | Zip Code (Plus 17101-0000 | s 4) | 5 | 6 | 2015 | | |
| Full Name of Contributing Committee Z PAC (PA ANESTHESIOLOGISTS PAC) | | | | мо | DAY | YEAR | | |
| Mailing Address 50 S. Providence Rd City Media | State PA | Zip Code (Plus | s 4) | 5 | 5 | 2015 | \$ 300. | .00 |
| Full Name of Contributing Committee VERIZON GOOD GOVT CLUB OF PA | | | | МО | DAY | YEAR | | |
| Mailing Address 303 WALNUT ST 127 | TH FL | | | | | | \$ 300. | .00 |
| City HARRISBURG | State PA | Zip Code (Plus 171011824 | s 4) | 5 | 12 | 2015 | | |
| Full Name of Contributing Committee Insurance Agents and Brokers Of Pa. | | | | мо | DAY | YEAR | | |
| Mailing Address 5050 Ritter Road City Mechanicsburg | State PA | Zip Code (Plus | s 4) | 5 | 7 | 2015 | \$ 300 | .00 |
| Full Name of Contributing Committee ARENT FOX LLP | 1 | 1 | | МО | DAY | YEAR | | |
| Mailing Address 1717 K Street | | | | | | | \$ 500. | .00 |
| City Washington | State PA | Zip Code (Plus 20006-5344 | s 4) | 5 | 8 | 2015 | | |

| Full Name of Contributing Committee WINE & SPIRITS BROKERS ASSOC OF | PA | | МО | DAY | YEAR | |
|---|-------|----|-----------|--------------|------------------|-----------|
| Mailing Address 204 STATE ST | | | | \$ 300.00 | | |
| City HARRISBURG | 5 | 11 | 2015 | | | |
| Full Name of Contributing Committee PENNSLVANIA WINERY ASSOCIATIONS PAC | | | | | | |
| _ | ; PAC | | мо | DAY | YEAR | |
| _ | s PAC | | MO | DAY 7 | YEAR 2015 | \$ 300.00 |

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

PAGE TOTAL\$ 2,500.00

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 of Candidate | | | | Reporting Period | | | | | | |
|---|---------------------|-------------------|---------|----------------------|--------------|---------------|--------------------|----------|--|--|
| SONNEY, CURT COM TO ELECT | | | Fron | n: | <u>5/5/2</u> | <u>015</u> To | e: <u>6/8/2015</u> | | | |
| | | | | D/ | ATE | | АМС | DUNT | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | | | |
| Harry E Brown | | | | MO | DAI | ILAK | | | | |
| State Zip Code (Plus 4) | | | | _ | _ | | \$ | 500.00 | | |
| City Erie | State | Zip Code (Plus 4) | | 5 | 6 | 2015 | | | | |
| | PA 16509 | | | | | | | | | |
| Employer Name LECOM | | | | Occupation Associate | | | | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | | | State | | Zip Code | (Plus 4) | | |
| 1858 W. Grandview Blvd | | Erie | | | PA | | 16509 | | | |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | mmarv Page. | Section | on 3. | | | PAC | GE TOTAL | | |
| | , | | | | | | \$ | 500.00 | | |
| | | | | | | _ | | | | |

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 Car | ndidate | | Report | ing Perio | od | | | |
|---------------------------------|----------------------|----------------|---------|-----------|-----|------|----|-----------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | A | MOUNT |
| Full Name | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | · | · | | | | | | |
| Enter Grand Total of Part E on | Schedule T. Detailed | d Summary Page | Section | 4 | | | P | AGE TOTAL |
| | 2, 200 0000 | | 22300 | | | | \$ | 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>5/5/2015</u> To: | <u>6/8/2015</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTOR | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR | T F) | | |
| TOTAL for the Reporting Pe | eriod (2) | \$ | 0.00 |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G) | | | |
| TOTAL for the Reporting Pe | eriod (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, | | \$ | 0.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candid | ate | | Reporting | g Period | | | |
|------------------------------------|---------------------|-----------------------|-----------|---------------|--------|-----------|------------|
| | | | From: | | | To: | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |
| Description of Contribution: | | | | | | | |
| Enter Grand Total of Part F on S | chedule II In-Kir | nd Contributions Deta | iled Sum | mary Pag | ле Г | | PAGE TOTAL |
| Section 2. | incudic 11, 111 Kii | ia contributions beta | nea Sam | illial y I as | , , | | PAGE TOTAL |
| | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | 1 | | | | Re | porting | Period | | | |
|---|--------------|------------------|------------|--------|--------|---|--------|------|-----------------|------------|
| | | | | | Fro | om: | | To: | | |
| | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 | |
| City | State | Zip Code(Plus 4) | | | | | | | | |
| Employer of Contributor | • | | • | | | Occupa | ation | | | |
| Employer Mailing Address/Principal Place of Business City State | | | | | | Zip Code(Plus 4) Description of Contri | | | of Contribution | |
| Enter Grand Total of Part G on Sch | nedule II, I | n-Kind | Contributi | ons De | etaile | ed | | | | PAGE TOTAL |
| Summary Page, Section 3. | , | | | | | | | | | 0.00 |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate SONNEY, CURT COM TO ELECT | | | Reporting Period | | | | | |
|--|--------------------|-----------------------------------|---|--------------------------------------|---------------|-----|------------|--|
| | | | From | <u>5/:</u> | <u>5/2015</u> | То: | 6/8/2015 | |
| | | | | DATE | | | AMOUNT | |
| To Whom Paid Stock's on Second | | | МО | DAY | YEAR | | | |
| Mailing Address 211 N. 2nd St. | | | 5 | 12 | 2015 | \$ | 449.50 | |
| City Harrisburg | State PA | Zip Code (Plus 4) 17101 | Description of Expenditure Fundraiser Breakfest | | | | | |
| To Whom Paid DWK Consulting Inc | | | мо | DAY | YEAR | | | |
| Mailing Address 430 Franklin Church Rd. | | | 5 | 12 | 2015 | \$ | 1,175.14 | |
| City dillsburg | State PA | Zip Code (Plus 4) 17019 | Description of Expenditure Consultant | | | | | |
| To Whom Paid HRCC | | | МО | DAY | YEAR | | | |
| Mailing Address 500 N. 3rd St.Fl 3A | | | 6 | 1 | 2015 | \$ | 550.00 | |
| City Harrisburg | State PA | Zip Code (Plus 4) 17101 | 1 - | Description of Expenditure Donation | | | | |
| | L | | 1 | | | | PAGE TOTAL | |

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

2,174.64