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	✓	LOBE	BYIST		
Name of Filing C	ommittee, Candid	late or L	obbyist:		SOI	NNEY	, CUF	RT COM T	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.		AMENDM REPORT		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	' PRE	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	`	
report type)	ANNUAL REPORT	7. X	Year 2015					IG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	ought by Candida	ite:	-					DATE O	F ELE	СТІС	N	District Number	Office Code	Par	ty Code	Count Code	y
								МО	DAY	YI	AR		10000	REP		25	
								11		3	2015		(SEE IN	STRUCTIO	ONS FOR C	ODES)	_
	Receipts and	МО	DAY	YEAR	ł		'	МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		6 9	2	015	T	0	12		31	2015						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			29,9	938.88						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			5,4	450.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			35,3	388.88						
D. Total Expenditures (From Schedule III)						\$			4	128.25							
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	:)			\$			34,9	60.63]					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le I	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV))			\$				0.00						
				AFF	ID	AVI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere.	If th	his is	a Can	ididate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached sch	edules	s file	ed on p	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	В,
Sworn to and subs	cribed before me thi day of	s	20							S	Signature	of Perso	n Submit	ting Rep	ort		•
	Signatu	ıre	_				-					Prin	ted Name	e			-
My Commission Ex	rpires						_					Ema	il				_
	МО	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized (Comn	nitte	ee, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	ny knowl	edge and belie	f this	poli	itical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	. 1333,	
Sworn to and subsc	ribed before me this		20								s	ignature o	of Candid	ate			-
	day of		_ 20				-					Printe	d Name				-
Mu Committee:	Signature						-					Ema	il				-
My Commission Exp													-				
	МО	D	AY	YR	1		-		Area	Code		D	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
SONNEY, CURT COM TO ELECT	From:	<u>6/9/201</u>	<u>5</u> To:	12/31/2015
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)			\$	250.00
All Other Contributions (Part B)			\$	0.00
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)			\$	4,900.00
All Other Contributions (Part D)			\$	300.00
TOTAL for the Reporting	Period	(3)	\$	5,200.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	5,450.00

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:	6/9/2015	То:	12/31/2015
		DATE		AMOUNT

	Full Name of Contributing Committee PA PT PAC			мо	DAY	YEAR			
Mailing Address 4028 WATTERS LN		7	9	2015	\$ 250	.00			
City	GIBSONIA		State	Zip Code (Plus 4)	1 ′		2013		
			PA	15044					

PAGE TOTAL 250.00

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

0.00

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)

(Include		m pondedi com			301 tCu		,		
Name of Filing Committee o	r Candidate		Reporting Period						
			Fro	m:		To) :		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	1)						
								PAGE TOTAL	

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

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	Period			
SONNEY, CURT COM TO ELECT			From:	<u>6</u> ,	<u>/9/2015</u>	То:	12/31/2015
				DA	\TE		AMOUNT
Full Name of Contributing Committee				МО	DAY	YEAR	
GENERAL ELECTRIC CO PAC							\$ 500.00
Mailing Address 1299 PENNA AVE NW	/ STE 900			7	9	2015	
City WASHINGTON	State	Zip Cod	e (Plus 4)]			
	DC	20004-	0000				
Full Name of Contributing Committee				мо	DAY	YEAR	
NFG PAPAC (NATIONAL FUEL GAS)							\$ 500.00
Mailing Address 1100 State St.				7	9	2015	
City ERIE	State	Zip Cod	e (Plus 4)] ′		2015	
	PA	16501					
Full Name of Contributing Committee	•			мо	DAY	YEAR	
HOSPITAL & HEALTHSYSTEM ASSOC OF	PA PAC(HAPAC)			MO	DAT	TEAR	\$ 300.00
Mailing Address P. O. BOX 8600				7	9	2015	
City HARRISBURG	State	Zip Cod	e (Plus 4)] ′		2015	
	PA	17105-	8600				
Full Name of Contributing Committee	-	-		мо	DAY	YEAR	
FIRSTENERGY PAC				1-10		IEAR	\$ 300.00
Mailing Address 76 S MAIN ST				7	9	2015	,
City AKRON	State	Zip Cod	e (Plus 4)] ′		2015	
	ОН	443080	000				
Full Name of Contributing Committee		-		мо	DAY	YEAR	
Pennsylvania Optometric PAC				MO	DAT	TEAR	\$ 300.00
Mailing Address 218 North St.				7	9	2015	300.00
City Harrisburg	State	Zip Cod	e (Plus 4)	1 ′		2015	
	PA	17101					
Full Name of Contributing Committee	•	=		мо	DAY	YEAR	
PREA ACRE PAC				MO	DAY	TEAR	\$ 300.00
Mailing Address P. O. BOX 1266				7	9	2015]
City Harrisburg	State	Zip Cod	e (Plus 4)] ´			
	PA	17108					

							PAGE 6	
Full Name of Cont	ributing Committee			МО	DAY	YEAR		
GGR INC PAC (GI	MEREK GOV RELATION	S)		110		ILAK	\$ 300	0.00
Mailing Address	212 LOCUST STREET	, SUITE 300		7	9	2015		,,,,,
City HARRISBU	IRG	State	Zip Code (Plus 4)	′		2013		
		PA	17101					
Full Name of Cont	ributing Committee			мо	DAY	YEAR		
INDEPENDENCE E	BLUE CROSS PAC (IBC	PAC)				12/11	\$ 300	0.00
Mailing Address	1901 MARKET ST			7	9	2015		
City PHILADELI	PHIA	State	Zip Code (Plus 4)]		2013		
		PA	191031480					
Full Name of Cont	ributing Committee			мо	DAY	YEAR		
CAPITAL BLUE PA	AC						\$ 300	0.00
Mailing Address	PO BOX 60710		•	7	9	2015		
City HARRISBU	IRG	State	Zip Code (Plus 4)					
		PA	17106-0710					
Full Name of Cont	ributing Committee			мо	DAY	YEAR		
HIGHMARK PAC (OF HIGHMARK INC						\$ 300	0.00
Mailing Address	1800 CENTER ST		•	7	9	2015		
City CAMP HILI	-	State	Zip Code (Plus 4)					
		PA	17089-0000					
Full Name of Cont	ributing Committee			мо	DAY	YEAR		
Pennsylvainia Ene	ergy Resources Group	PAC		МО	DAT	TEAR	\$ 300	0.00
Mailing Address	223 State St.			7	9	2015		
City Harrisburg		State	Zip Code (Plus 4)] ′		2013		
		PA	17101					
Full Name of Cont	ributing Committee			мо	DAY	YEAR		
PENNSYLVANIA B	EER ALLIANCE(PA BEE	R WHOLESALER-PBW	VA)	MO	DAI	ILAK	\$ 300	0.00
Mailing Address	411 WALNUT ST			7	9	2015		
City HARRISBU	IRG	State	Zip Code (Plus 4)	1		2013		
		PA	17101-1904					
Full Name of Cont	ributing Committee			мо	DAY	YEAR		
PA MEDICAL PAC	(PAM PAC)						\$ 300	0.00
Mailing Address	P.O. BOX 8820			7	9	2015		
City HARRISBU	IRG	State	Zip Code (Plus 4)					
		PA	171050000					
Full Name of Cont	ributing Committee			мо	DAY	YEAR		
Certified Public A	ccountants PAC						\$ 300	0.00
Mailing Address	500 North 3rd St. Se	uite 600A		7	9	2015		
City Harrisburg		State	Zip Code (Plus 4)					
		PA	17101					
			•					

Full N	Full Name of Contributing Committee				DAY	YEAR	
The P	The Pennsylvania Insurance PAC			МО			\$ 300.00
Mailin	Mailing Address 1600 Market St. STE 1720			7	9	2015	
City Philadelphia State Zip Code (Plus 4		Zip Code (Plus 4)	,	,	2013		
		PA	19103				

 $\label{lem:enter} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL \$ 4,900.00

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 or Candidate			Rep	orting Pe	riod			
SONNEY, CURT COM TO ELECT			From	n:	6/9/2	015 T	o:	12/31/2015
				D/	ATE		,	AMOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	300.00
Mark Gusek							1	300.00
Mailing Address 5717 Clinton St				7	9	2015	,	
City Erie	State	Zip Code (Pl	us 4)]				
	PA	16509						
Employer Name LIFE Northwestern Pa.				Occupat	ion	CEO		
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Co	de (Plus 4)
149 West 22nd St.		Erie			PA		16502	
Enter Grand Total of Part C on Scheo	dule I, Detailed Su	ımmary Page	e, Sectio	on 3.				PAGE TOTAL
	,	, 25	,	-			\$	300.00

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 Candidate		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1		<u> </u>			•	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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:	6/9/2015 To:	<u>12/31/2015</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, 1		\$	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:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
			Fro	From:		То:				
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor Occupation										
Employer Mailing Address/Principal Place of Business			V	State	te Zip Code(Plus 4)		Desci	Description of Contribution		
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	Contributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
SONNEY, CURT COM TO ELECT	From	6/9/2015	То:	<u>12/31/2015</u>			

					DATE			AMOUNT			
To Whom Paid				мо	DAY	YEAR					
PNC Bank											
Mailing Address	s 4488 Buffalo Rd.			12	3	2015	\$	46.30			
City Erie State Zip Code (Pi				Descrip	tion of Exp	enditure					
	PA 16510				checks						
To Whom Paid				мо	DAY	YEAR					
ECRC				МО	DAT	TEAR					
Mailing Address	PO Box 1144			10	26	2015	\$	50.00			
City Erie		State	Zip Code (Plus 4)	Description of Expenditure							
PA 16512				Donation							
To Whom Paid				МО	DAY	YEAR					
The Journal				МО	DAT	TEAK					
Mailing Address	28 South St.			9	16	2015	\$	80.00			
City Corry		State	Zip Code (Plus 4)	Descrip	escription of Expenditure						
PA 16407			Advertisement								
To Whom Paid		•	<u> </u>			\					
Sams Club				МО	DAY	YEAR					
Mailing Address	7200 Peach St.			9	25	2015	\$	142.20			
City Erie State Zip Coo			Zip Code (Plus 4)	Description of Expenditure							
	PA 16509			Parade Candy							
To Whom Paid		•	•		l						
Sue's Notary				МО	DAY	YEAR					
Mailing Address	1353 W. 38th St.			7	10	2015	\$	13.00			
City Erie		State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure					
	PA 16508 Notary										
To Whom Paid				МС	DAY	VEAD					
Post Master				МО	DAY	YEAR					
Mailing Address	7175 Buffalo Rd.			7	10	2015	\$	5.75			
City Harborcreek State Zip Code (Plus 4) PA 16421			Descrip	l tion of Exp	enditure						
			Postage								
117 110121				1. 230090							

To Whom Paid				DAY	YEAR			
PNC Bank								
Mailing Address 4488 Buffalo RIs			7	1	2015	\$	81.00	
City Erie State Zip Code (Plus 4)			Description of Expenditure					
	PA 16510 Service Charge							
To Whom Paid	МО	DAY	YEAR					
Harold H. Hinkler	140		ILAK					
Mailing Address 7 Grahamville St.			6	19	2015	\$	10.00	
City North East State Zip Code (Plus 4) Description of Expenditure								
PA 16428 Notary								
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	428.25	