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	106				port ed B		CA	NDII	DATE		COMN	ITTEE	✓	LOB	BYIST		
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:		SON	INE	, CUI	RT CC	ТМ	O ELE	СТ							
Street Address:	7783	BEAST LA	KE RD																
City:	ERIE -								State	e:	PA			Zip Cod	ie: 16	511-0	0000		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRI PRIMARY	DAY PRE	-	2.	30 DA		Р	OST-	3.		AMENDMENT REPORT?		Yes	No)	\
(place X to the right of	6TH TUES		4.	2ND FRI ELECTIO	DAY PRI N	E-	5. X	30 DA		Р	OST-	6.		TERMINA REPORT		Yes	No)	\
report type)	ANNUAL	REPORT	7.	Year 20	16				NG ME					PAPER		\checkmark	DISKE	TTE	
Name of Office S	- Sought by	Candidat	e:						DAT	ΕO	F ELE	CTIC	ON	District Number	Office Code	Pai	rty Code	Coun Code	
REPRESENTATI	VF IN TH	IF GENER	AI ASS	FMRI Y					МО		DAY	YI	EAR	4	STH	REF	•	25	
TELL RESERVITOR	<u> </u>	- OLIVEIN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							11		8	2016		CODES)			
Summary of Expenditures		and	МО	DAY	YEAF		_	_	МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
				5	17 2	2016	Т	-		10	7	24	2016						
A. Amount Bro	ught Forv	ward From	ı Last R	eport				\$					532.41						
B. Total Moneta	ary Contr	ibutions A	And Rec	eipts (Fr	om Sche	dule	· I)	\$				1,	700.00						
C. Total Funds Available (Sum Of Lines A and B)							\$				39,	232.41							
D. Total Expenditures (From Schedule III)							\$				7,6	576.20							
E. Ending Cash Balance (Subtract Line D From Line C)							\$				31,5	556.21							
F. Value Of In-	Kind Con	tributions	Receive	ed (From	Schedu	ile II	i)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule	IV)			\$					0.00						
					AFF	FIDA	AVI.	ΓSE	CTIC	NC									
PART I - If this is		•	•	_							• '								
I swear (or affirm) correct and comple		report, incl	uding the	attached	schedule	s file	d on	paper	or by e	electr	onic m	edium	i, are to t	he best o	f my knov	vledge	and beli	ef , tr	ue
Sworn to and subs	cribed befo	ore me this		20						,		5	Signature	of Perso	n Submitt	ing Re	port		_
	<u>-</u>	Signatur	'e					- -						Prin	ted Name				-
My Commission Ex	pires	0.9	_							•				Ema	il				-
		мо	D/	AY	YR						Are	ea Cod	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	idate's	authoriz	ed Comr	nitte	e, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and b	elief this	s polit	tical	comm	ittee h	as no	ot viola	ted ar	ny provisi	ions of th	e act of Ju	ine 3,1	937 (P.L	1333	3,
Sworn to and subsc		re me this											Si	ignature o	of Candida	ite			-
	day of —			- <u>-</u> —				-						Printe	d Name				-
		Signature						-											_
My Commission Exp	ires													Ema	iI 				_
		МО	D	AY	YF	₹		•			Area	Code		D	aytime To	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:	<u>5/17/201</u>	<u>.6</u> To:	10/24/2016
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)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	100.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,600.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	1,600.00
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			\$	1,700.00

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 From: 5/17/2016 To: 10/24/2016				
SONNEY, CURT COM TO ELECT	From:	5/17/2016	То:	10/24/2016	
	•	DATE		AMOUNT	

Full Name of Contributing Committee TIMBERPAC	МО	DAY	YEAR			
Mailing Address 301 CHESTNUT ST STE 102						\$ 100.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-0000	10	10	2016	

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 Candi	date			Reporting Period					
			From: T			o:			
						DATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus 4)						
								$\overline{}$	

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	e of Filing Committee or Candidate Rep			Period				
SONNEY, CURT COM TO ELECT			From:	<u>5/1</u>	<u>7/2016</u>	То:	<u>10,</u>	<u>/24/2016</u>
				DA	TE		AI	MOUNT
Full Name of Contributing Committee Pennsylvania Amusement & Music Mac	hine PAC			МО	DAY	YEAR		
Mailing Address 200 N. 3rd St. Suite	1500						\$	500.00
City Harrisburg	State PA	Zip Code 17101	e (Plus 4)	7	6	2016	5	
Full Name of Contributing Committee Farmer PAC				МО	DAY	YEAR		
Mailing Address P.O. Box 8736				7	26	2016	\$	300.00
City Camp Hill	State PA	Zip Code 17001	e (Plus 4)	,	20	2010		
Full Name of Contributing Committee PA TRUCK PAC				МО	DAY	YEAR		
Mailing Address 910 LINDA LANE							\$	500.00
City CAMP HILL	State PA	Zip Code	e (Plus 4) 6409	6	16	2016	5	
Full Name of Contributing Committee HAPAC				МО	DAY	YEAR		
Mailing Address P.O. Box 8500							\$	300.00
City HARRISBURG	State PA	Zip Code 17105	e (Plus 4)	6	16	2016	5	
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			<u>.</u>	PAGE TOTAL

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 Candi	date			Rep	orting Pe	eriod			
				Fron	n:		To) :	
			_		D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•				Occupa	tion	•	•	
Employer Mailing Address/Principa Business	l Place of		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			F \$	PAGE TOTAL 0.00

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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	I						
SONNEY, CURT COM TO ELECT	From:	<u>5/17/2016</u> To:	<u>10/24/2016</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					
. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candid	ate		Reporting	g Period			
			From:			То:	
				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 Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidat	te		Reportii	ng Period				
SONNEY, CURT COM TO ELECT			From	<u>5/1</u>	7/2016	То:	10/24/2016	
				DATE			AMOUNT	
To Whom Paid Harold H. Hinkler			МО	DAY	YEAR			
Mailing Address 7 Grahamville St.			5	21	2016	\$	15.00	
City North East	State PA	Zip Code (Plus 4) 16428	Descrip Notary	otion of Exp	penditure			
To Whom Paid ECBU all star Committee			МО	DAY	YEAR			
Mailing Address 2813 S. Birch Run State Zip Code (Plus 4)				26	2016	\$	30.00	
City Erie	Descrip Prograi	ntion of Exp	penditure					
To Whom Paid HRCC			мо	DAY	YEAR			
Mailing Address P. O. Box 11787			6	6	2016	\$	150.00	
City Harrisburg	State PA	Zip Code (Plus 4) 17108		Description of Expenditure Donation				
To Whom Paid HRCC			мо	DAY	YEAR			
Mailing Address P. O. Box 11787			6	6	2016	\$	1,200.00	
City Harrisburg State PA Zip Code (Plus 4) 17108				otion of Exp	penditure			
To Whom Paid Friends of Greg Lucas			МО	DAY	YEAR			

Zip Code (Plus 4)

16412

Description of Expenditure

Donation

State

PΑ

City

Edinboro

							TAGE 12
To Whom Paid Elect Park Wentling Mailing Address P, O. Box 81			МО	DAY	YEAR		
			8	14	2016	\$	100.00
City Greenville	State PA	Zip Code (Plus 4) 16125	Description of Expenditure Donation				
To Whom Paid Safe Journey			МО	DAY	YEAR		
Mailing Address P.O. Box	208		9	19	2016	\$	100.00
City Union City	State PA	Zip Code (Plus 4) 16438	Description of Expenditure Advertisement				
To Whom Paid HRCC			МО	DAY	YEAR		
Mailing Address P.O. Box 11781			10	17	2016	\$	5,000.00
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Donation				
To Whom Paid The Journal			мо	DAY	YEAR		
Mailing Address 28 West 9	South St.		10	20	2016	\$	81.20
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Advertisement				
Enter Grand Total of Expe	nditures on Page 1. Re	port Cover Page, Item D	<u>.</u>				PAGE TOTAL
		F	-			\$	7,676.20