Campaign Finance Report

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

Filer Identificat	ion 20	004106			Report		CANDI	DATE	СОМ	MITTEE		LOBI	BYIST	
Number :		004106			Filed B	y :					¥			
Name of Filing	Committee, Can	didate or	Lobbyist:		SONNEY	(, CU	RT COM 1	TO ELEC	T					
Street Address:														
City:	ERIE						State:	PA		Zip Co	de: 16	511-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	AY PRE	- 2.	30 D/ PRIM		POST- 3	3.	AMENDI REPORT		Yes	No	· /
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID ELECTION		Ξ- 5.	30 D/ ELEC		POST- 6	5. X	TERMIN REPORT		Yes	Nc	· 🗸
report type)	ANNUAL REPO	PRT 7.	Year 2010	6			NG METHO		PAPER		\checkmark	DISKE	TTE	
Name of Office	- Sought by Cand	lidate:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY							мо	DAY	YEAR	4	STH	REP)	25
REPRESENTAT	IVE IN THE GE	NERAL AS	SEMBLY				11	8	3 2016]	(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditure	s from:		10 2	5 2	016 T	0	11	28	3 2016	1				
A. Amount Bro	ought Forward F	From Last	Report			\$			31,556.41					
B. Total Monet	ary Contributio	ons And Re	ceipts (Fro	m Sche	dule I)	\$	5	0.00						
C. Total Funds	Available (Sun	n Of Lines	A and B)			\$;		31,556.41					
D. Total Exper	ditures (From S	Schedule I	II)			\$;		115.00					
E. Ending Cash	n Balance (Subt	ract Line I	O From Line	e C)		\$;	3	31,441.41	-				
	-Kind Contribut		-		le II)	\$;		0.00	-				
G. Unpaid Deb	ts And Obligation	ons (From	Schedule I	V)		\$	5		0.00					
				AFF	IDAVI	T SE	CTION							
PART I - If this i												ladaa	and half	of true
I swear (or affirm correct and comp			ne attached s	chequie	s filed on	paper	or by elect	ronic med	lium, are to	the best o	от ту кпоч	viedge	and bell	er, true
Sworn to and sub	scribed before me day of	this	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
		nature				-				Prir	nted Name			
My Commission E	-									Ema	ail			
	мо		DAY	YR				Area	Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a c	andidate'	s authorize	d Comn	nittee, Ca	andid	late shall	sign her	e.					
I swear (or affirm No 320) as amend		of my know	ledge and be	elief this	political	comm	ittee has n	ot violate	d any provis	ions of th	ie act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subs	cribed before me t day of	this	20						S	Gignature	of Candida	ite		
						-				Printe	ed Name			
My Commission Ex	Signatu pires	ure				-				Ema	ail			
						-								
	МО		DAY	YR	1			Area Co	ode	D	aytime Te	elephon	ne 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>10/25/20</u>	<u>16</u> To:	<u>11/28/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	J Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	J 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			\$	0.00

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: To:					
		·			DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00	

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 Candida	te		Rep	orting P	eriod				
			Fror	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address	_	_					\$	0.00	
City	State	Zip Code (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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	Period				
			From:			То:		
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	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				Reporting Period				
			Froi	n:		Т):	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE 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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	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 Perio	d	
SONNEY, CURT COM TO ELECT	From:	<u>10/25/2016</u> то:	<u>11/28/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	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, 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	-	_				\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:				•			
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,	F	PAGE TOTAL
						\$	0.00

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

Name of Filing Committee or Candidate			Rep	porting I	Period			
						То:		
					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 Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
SONNEY, CURT COM TO ELECT				<u>10/2</u>	<u>5/2016</u>	То:	<u>11/28/2016</u>		
				DATE AMO					
To Whom Paid			мо	DAY	YEAR				
ECRC Erie County Republican Committe	e								
Mailing Address			11	4	2016	\$	100.00		
City Erie	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	16512	Donatio	'n					
To Whom Paid			мо	DAY	YEAR				
Sue's Notory			MO						
Mailing Address			10	26	2016	\$	15.00		
City Erie	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
	PA	16508	Notary						
							PAGE TOTAL		
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I) .			\$	115.00		