### **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	20041	106				Repo Filed	_		CAI	IIDN	DATE		СОМ	4ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	Committee,	Candida	te or Lo	bbyis	st:	5	SONN	EY, C	UR	т со	МТ	O ELE	СТ		<u>,</u>					
Street Address:																				
City:	ERIE								!	State	:	PA			Zip Cod	<b>le:</b> 16	511-0	000		
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND I PRIM	FRIDAY ARY	PRE-	2.	30 PRI	DA\ MA		Р	POST- 3.			AMENDM REPORT		Yes	١	lo	<b>√</b>
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND I	FRIDAY TION	PRE-	- 5.	30 ELE		Y ION	Р	OST-	6.		TERMINA REPORT		Yes	١	lo	<b>\</b>
report type)	ANNUAL R	EPORT	7. <b>X</b>	Year	2016				LING METHOD ) CHECK ONE						PAPER		<b>√</b>	DISK	ETTE	
Name of Office S	ought by C	andidat	e:				•	•		DAT	E O	F ELE	CTI	ON	District Number	Office Code	Par	ty Cod	e Cour	
REPRESENTATI	VE IN THE	GENER	AL ASS	EMBL	Y					МО		DAY	Y	EAR	4	STH	REF	•	25	
											11		8	2016		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of Expenditures		and	МО	DA		YEAR	V4.5	то	-	МО		DAY		EAR	FO	R OFFIC	E USE	ONLY	•	
-				1	29	20	)16	<del>10</del>	_		12		31	2016						
A. Amount Brou						School	lula T	+	\$				31,	0.00						
C. Total Funds	-				`	- Scircu		+	\$				21							
D. Total Expend					•,			+	\$					.441.41 138.15						
E. Ending Cash	•				Line C	'\		+	\$					303.26						
F. Value Of In-							e II)	+	<u>\$</u> \$				31,	0.00						
G. Unpaid Debt									<u> </u>					0.00						
						AFFI	[DAV	IT S		CTIC	N									
PART I - If this is	s a Commit	tee repo	rt, trea	surer								port, c	and	idate sig	ın here.					
I swear (or affirm) correct and comple		port, inclu	ıding the	attacl	hed sch	edules	filed o	n pap	er o	r by e	lectr	onic m	ediun	n, are to t	he best o	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before	e me this		20										Signature	of Perso	n Submitt	ing Re <sub>l</sub>	ort		_
		Signatur	e	-				_							Prin	ted Name				_
My Commission Ex	cpires										-				Ema	il				
	М	0	D#	λY		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report o	f a cand	idate's	autho	rized (	Comm	ittee,	Cand	ida	te sh	alls	sign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge ar	nd belie	f this p	politica	al com	nmit	tee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ıne 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before day of	me this		20										s	ignature o	of Candida	ite			_
				20 -				_							Printe	d Name				-
My Commission Exp	_	gnature						_			-				Ema	il				-
,								_												_
		МО	D/	ΑY		YR						Area	Code		D	aytime Te	elephor	e Num	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
SONNEY, CURT COM TO ELECT	From:	11/29/201	<u>6</u> To:	12/31/2016
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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	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	Period	(3)	\$	0.00
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			\$	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 Ca	andidate	R	eporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Commi	ittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

## 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					
			Fro	m:		To	):	
		Į.			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7 *		0.00
City	State	Zip Cod	e (Plus 4)						
1	I	ı			ı	<u> </u>			
		_		_				PAGE TOT	AL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$		0.00

### 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				Repo	orting Pe	riod			
				Fron	n:		Т	o:	
					D.	ATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zip C	Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal Plac	e of Business	C	City		•	State		Zip (	Code (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	umma	ry Page,	Section	on 3.				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	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary 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 Peri	od	
SONNEY, CURT COM TO ELECT	From:	<u>11/29/2016</u> <b>To:</b>	<u>12/31/2016</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
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 Can	didate		Reportin	g Period				
			From:			To	·	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	ge,		PAGE TOTAL	-
Section 2.						\$		0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
SONNEY, CURT COM TO ELECT	From	11/29/2016	То:	12/31/2016			

				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
harold H. Hinkler			1-10		1 = 1 \			
Mailing Address			11	29	2016	\$	15.00	
City North East	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	16428	Notary					
To Whom Paid			мо	DAY	YEAR			
Post Master								
Mailing Address			11	30	2016	<b>\$</b>	23.15	
City Harborcreek	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	16421	Postage	1				
To Whom Paid			мо	DAY	YEAR			
WWBC Radio			140		ILAK			
Mailing Address			12	5	2016	\$	100.00	
City Corry	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	16407	Advertis	sement				
							PAGE TOTAL	
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D	).			\$	138.15	