Campaign Finance Report

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

Filer Identificat Number :	ion 2004	106			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing (Committee, Candid	ate or L	obbyist:			-	RT COM T	TO ELEC	T.					
Street Address:	7783 EAST L/	AKE RD												
City:	ERIE						State:	PA		Zip Co	de: 16	511-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	FRIDAY PRE- IARY 2. 30 DAY PRIMARY				POST-	3.	AMENDMENT REPORT?		Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE-	5.	30 DA ELEC		POST- 6	5.	TERMIN REPORT		Yes	No	\sim
report type)	ANNUAL REPORT	7. X	Year 2017				NG METHO CHECK OI			PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR	Humber	coue			coue
							11	-	7 2017	1	(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:	-	11 28	20	17 T	0	12	3	1 2017	·				
A. Amount Bro	ught Forward Fro	n Last R	eport			\$			29,146.61					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sched	ule I)	\$			0.00					
C. Total Funds	Available (Sum Of	f Lines A	and B)			\$			29,146.61					
D. Total Expen	ditures (From Sch	edule II	I)			\$			1,269.63					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$		2	27,876.98	-				
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedule	e II)	\$			0.00	-				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	()		\$			0.00					
				AFFI	DAVI	Γ SE	CTION							
	s a Committee rep		-					• •		-				
I swear (or affirm correct and compl) that this report, inc ete.	luding the	e attached sc	hedules	filed on j	paper	or by elect	ronic mee	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before me this day of	5	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signatu	re				-				Prir	ited Name			
My Commission E	2	-								Ema	il			
	МО	D	AY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Commi	ittee, Ca	andid	ate shall	sign hei	re.					
No 320) as amend		ny knowle	edge and beli	ef this p	olitical	comm	ittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	cribed before me this day of		20						5	Signature	of Candida	ite		
						-				Printe	ed Name			
My Commission Exp	Signature bires					-				Ema	nil			
	мо	D	AY	YR				Area C	ode	D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page	8			
Name of Filing Committee or Candidate	Reporting	g Period		
SONNEY, CURT COM TO ELECT	From:	<u>11/28/201</u>	<u>7</u> To:	<u>12/31/2017</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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 ar 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						
			Fro	om:		То	:				
					DATE			AMOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus	4)								
							Γ	PAGE TOTAL			

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

0.00

\$

PAGE 3

Use this Part to ite	mize all other 0.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng peri	aggreg iod.			ʻom
Name of Filing Committee or Candidat	e		-	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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 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 Candid	ate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	e			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detai	led Summary 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	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

I

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 Rep			Report	Reporting Period					
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	•						-		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
		iiai y i uge,	Section				\$		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	od	
SONNEY, CURT COM TO ELECT	From:	<u>11/28/2017</u> то:	<u>12/31/2017</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	TF)		
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 R				Reporting Period					
	From:			То:					
				DATE		АМС	DUNT		
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	je,	PAGE	TOTAL		
					4	5	0.00		

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

Name of Filing Committee or Candidate					Reporting Period					
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupation				
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
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	From <u>11/28/2017</u>			<u>12/31/2017</u>
				DATE				AMOUNT
To Whom Paid Best Buy				мо	DAY	YEAR		
Mailing Address 6650 Peach St.				12	9	2017	\$	1,165.98
City _{Erie}		State PA	Zip Code (Plus 4) 16509	Description of Expenditure computer				
To Whom Paid Sue's Notary				мо	DAY	YEAR		
Mailing Address 1353 W. 38th St.				12	12	2017	\$	17.00
City Erie		State PA	Zip Code (Plus 4) 16508	Description of Expenditure Notary				
To Whom Paid Post Master				мо	DAY	YEAR		
Mailing Address 7175 Buffalo Rd.				12	18	2017	\$	6.65
City _{Erie}		State PA	Zip Code (Plus 4) 16421	Description of Expenditure postage				
To Whom Paid The Journal				мо	DAY	YEAR		
Mailing Address 28 W. South St.				12	30	2017	\$	80.00
City Corry		State PA	Zip Code (Plus 4) 16407		sement			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								PAGE TOTAL
							\$	1,269.63