Campaign Finance Report

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

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Filer Identificat Number :	ion	20041	106			Repor Filed E		CANDI	DATE	СОМ	MITTEE	\checkmark	LOBI	BYIST		
Name of Filing	Committee, C	Candida	ate or L	obbyist:		SONNE	Y, CU	IRT COM T		Т		-				
Street Address:																
City:	ERIE							State:	PA		Zip Code: 16511-0000					
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDA PRIMARY	AY PRE	- 2. X	30 D PRIM		POST- 3		AMENDI REPORT		Yes	No	, 🔨	
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND FRIDA	AY PRI	E- 5.	30 D ELEC	AY I CTION	POST- 6.			ATION ?	Yes	No	· 🗸	
report type)	ANNUAL RE	PORT	7.	Year 2018	}		FILING METHOD F () CHECK ONE						\checkmark	DISKE	TTE	
Name of Office	⊥ Sought by Ca	andidat	e:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code	
DEDDECENTAT		OFNER						мо	DAY	YEAR	4	STH	REP	•	25	
REPRESENTAT	IVE IN THE	GENER	AL ASS	EMBLY				11	e	2018		(SEE INS	TRUCTI	ONS FOR	CODES)	
Summary of		and	мо	DAY	YEAF	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY		
Expenditures	s from:			1 1	L 2	018 T	0	4	30	2018	;					
A. Amount Bro	ought Forwa	rd From	n Last R	eport			\$	5		27,876.98						
B. Total Monet	ary Contribu	itions A	And Rec	eipts (Fror	n Sche	edule I)	4	\$ 250.00								
C. Total Funds	Available (S	Sum Of	Lines A	and B)			4	5		28,126.98						
D. Total Expen	ditures (Fro	m Sche	dule II	I)			4	5		4,698.60						
E. Ending Cash	n Balance (Si	ubtract	Line D	From Line	C)			5	2	3,428.38	4					
F. Value Of In-	Kind Contrib	outions	Receiv	ed (From S	Schedu	le II)	4	5		0.00	4					
G. Unpaid Deb	ts And Oblig	ations	(From S	Schedule I	V)		4	5		0.00		·				
					AFF	IDAVI	T SE	ECTION								
PART I - If this i																
I swear (or affirm correct and compl		ort, inclu	uding the	e attached so	chedule	s filed on	paper	or by elect	ronic med	ium, are to	the best o	of my knov	vledge	and beli	ef , true	
Sworn to and sub	scribed before day of	me this		20						Signatur	e of Perso	on Submitt	ing Rep	oort		
		Signatur	'e				-				Prir	nted Name				
My Commission E		-ignatul	-								Ema	ail				
	мо)	D	AY	YR		_		Area	Code	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of	a cand	idate's	authorized	l Comr	nittee, C	andio	date shall	sign her	e.						
I swear (or affirm No 320) as amend		est of m	y knowle	edge and bel	lief this	s political	com	nittee has n	ot violate	d any provis	sions of th	ie act of Ju	ine 3,1	937 (P.I	1333,	
Sworn to and subs	cribed before r day of	ne this		20						S	Signature	of Candida	ite			
							-				Print	ed Name				
My Commission Ex	-	nature					_				Ema	ail				
	-						_									
	I	мо	D	AY	YF	Ł			Area Co	ode	D	aytime Te	elephor	e 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>1/1/2018</u> **To:** 4/30/2018 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 250.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 250.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Re				Reporting Period						
SONNEY, CURT COM TO ELECT Fr				om:	<u>1/1/20</u>		<u>4/30/2018</u>			
					DATE			AMOUNT		
Full Name of Contributing Commit ITC Holding company Corp. Inc	tee			мо	DAY	YEAR				
Mailing Address				1	4	2018	\$	250.00		
City Lansing	State MI	Zip Code (Plus 4 48933	•)	-		2010				
								PAGE TOTAL		
Enter Grand Total of Part A on	Schedule I, Detai	led Summary Page, Se	ectio	n 2.			\$	250.00		

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	MOUNT
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			Rep	orting Pe	riod				
Fro					From: To:				
				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	Name of Filing Committee or Candidate			ing Perio	d			
			From:			To:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR	\$ 0.0	00
Mailing Address								
City	State	Zip Code (Plus 4)					
Receipt Description	·							
		_	.				PAGE TOTAL	
Enter Grand Total of Part E on Schedu	lie 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 Period		
SONNEY, CURT COM TO ELECT	From:	<u>1/1/2018</u> To:	<u>4/30/2018</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			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 Scl Section 2.	nedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Period				
					From: To:				
					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	Stat	e Zip	Code(Plus 4)	Descri	ption of Contribution		
Enter Grand Total of Part G on Scho 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			From	<u>1/</u>	<u>1/2018</u>	То:	<u>4/30/2018</u>			
				DATE			AMOUNT			
To Whom Paid			мо	DAY	YEAR					
Corry Radio 98.9			MO							
Mailing Address			2	9	2018	\$	55.00			
City Corry	State	Zip Code (Plus 4)	Description of Expenditure							
	РА	16407	advertis	sement						
To Whom Paid			мо	DAY	YEAR					
Harold H. Hinkler							10.00			
Mailing Address			2	2	2018	\$	10.00			
City North East	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
PA 16428			Notary							
To Whom Paid HRCC			мо	DAY	YEAR					
Mailing Address			2	7	2018	\$	1,063.60			
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	РА	17108	Donatio	n						
To Whom Paid			мо	DAY	YEAR					
Lisa Flagella			no							
Mailing Address			2	9	2018	\$	1,000.00			
City North East	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	РА	16428	campaig	gn work						
To Whom Paid			мо	DAY	YEAR					
Citco					2010	\$	300.00			
Mailing Address	1	1	2	9	2018	, v	500.00			
City Erie	State	Zip Code (Plus 4)		tion of Exp	enditure					
	PA	16510	campaig	gn cards						
To Whom Paid			мо	DAY	YEAR					
Lisa Flagella							1 000 00			
Mailing Address	1		2	23	2018	\$	1,000.00			
City North East	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA	16428	campai	gn work						

To Whom Paid			мо	DAY	YEAR				
WWCB 1370 AM			no						
Mailing Address			2	25	2018	\$	100.00		
City Corry	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	16407	advertisement						
To Whom Paid			мо	DAY	YEAR				
Harold H. Hinkler			но						
Mailing Address			3	2	2018	\$	70.00		
City North East	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	16428	Notary						
To Whom Paid			мо	DAY	YEAR				
Lisa Flagella			no						
Mailing Address			3	2	2018	\$	1,000.00		
City North East	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	16428	campai	gn work					
To Whom Paid			мо	DAY	YEAR				
PNC Bank			no						
Mailing Address			3	2	2018	\$	100.00		
City Erie	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	16510	Certifie	d Check					
Enter Crond Total of Free	nditures on Docs 1	Depart Cover Dage Them D					PAGE TOTAL		
Enter Grand Total of Expe	nultures on Page 1,	Report Cover Page, Item D	·			\$	4,698.60		

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