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 2	200410	06				Repor Filed I	_	CAN	IDI	DATE		СОМ	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Car	ndidat	e or Lo	bbyist:		S	ONNE	Y, CU	RT CO	МΤ	O ELE	СТ							
Street Address:																			
City:	ERIE								State	•	PA			Zip Cod	le: 16	511-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1		2ND FRI PRIMAR		PRE-	2.	30 DA		Р	OST-	3. X		AMENDM REPORT?		Yes	ľ	lo	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4	١.	2ND FRI ELECTIO		PRE-	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	١	lo	\
report type)	ANNUAL REPO	ORT 7	' .	Year 20	018				NG MET					PAPER		√	DISK	ETTE	
Name of Office S	ought by Can	didate	:				-		DATE	0	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	e Coui	
REPRESENTATI	VE IN THE GE	ENERA	L ASSI	EMBLY					МО		DAY	Y	EAR	4	STH	REP	•	25	
										11		6	2018		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of Expenditures		d	МО	DAY		YEAR	10 7	о	МО		DAY		EAR	FO	R OFFIC	E USE	ONL	′	
A. Amount Bro	ught Forward	Erom	Last De	5	1	20:	10	_		6		4	2018						
B. Total Moneta				•	rom	Sched	ule I)	\$ \$				23,	428.38 0.00						
C. Total Funds	Available (Sur	m Of L	ines A	and B)				\$				23,	428.38						
D. Total Expend	ditures (From	Sched	lule III	[)				\$				1,	441.70						
E. Ending Cash	Balance (Sub	tract L	ine D l	From Li	ne C)		\$				21,9	986.68						
F. Value Of In-	Kind Contribut	tions F	Receive	ed (Fron	n Scl	hedule	e II)	\$					0.00						
G. Unpaid Debt	s And Obligati	ions (F	From S	chedule	e IV)			\$					0.00		,				
						AFFI	DAVI	T SE	CTIO	Ν									
PART I - If this is	a Committee	repor	t, treas	surer si	gn h	ere. If	this is	a Ca	ndidate	e re	port, c	candi	idate sig	ın here.					
I swear (or affirm) correct and comple		:, includ	ding the	attached	d sche	edules f	filed on	paper	or by el	ectr	onic m	ediun	ı, are to t	he best o	f my knov	/ledge	and be	lief , tr	ue
Sworn to and subs	cribed before me day of	e this		20						•		:	Signature	of Perso	n Submitt	ing Rep	ort		_
	Sig	ınature						<u>-</u>		•				Prin	ted Name				
My Commission Ex	rpires							_		-				Emai	il				
	МО		DA	Υ		YR					Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candic	date's a	authoriz	zed C	Commi	ttee, C	Candid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		t of my	knowle	dge and	belie	f this p	olitical	comm	ittee ha	s no	ot viola	ted a	ny provis	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before me day of	this		20									s	ignature o	f Candida	te			_
								_						Printe	d Name				- $ $
My Commission Exp	Signat	ture						_		-				Ema	il				-
			DA	NY		YR		_			Area	Code		Da	nytime Te	lephor	ie Nun	ıber	-
																,			- 1

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, ,				
Name of Filing Committee or Candidate	Reporting	Period		
SONNEY, CURT COM TO ELECT	From:	5/1/201	<u>8</u> To:	6/4/2018
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	Candidate	R	eporting	Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Con	nmittee		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.

0.00

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 Committe	e or Candidate		Reportin	g Period			
			From:		To) :	
		·		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)			I		
City		2.5 code (1.125 1)					

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		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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 of	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•					
Enter Grand Total of Part I	on Schodulo I. Dotailed	Summary Dage	Soction	4			PAGE TOTAL
cincer Granu Total Of Part I	on Schedule 1, 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 Period		
SONNEY, CURT COM TO ELECT	From:	<u>5/1/2018</u> To:	6/4/2018
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

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

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation	1		
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e Zi	Code(Plus 4)	Descri	ption o	f Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Ki	nd (Contributions D	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	iod		
SONNEY, CURT COM TO ELECT	From	5/1/2018	То:	6/4/2018

17.00					
17.00					
17.00					
17.00					
24.70					
1,400.00					
PAGE TOTAL					
1,441.70					