### **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 2004	1106				port ed B		CAND	ANDIDATE COMMITTEE \( \square \) LOBBYIST							
Name of Filing C	ommittee, Candid	late or L	obbyist:		SON	NNE	, CUF	RT COM	TO ELE	СТ						
Street Address:	7783 EAST L	AKE RD														
City:	ERIE							State: PA				Zip Cod	le: 1	6511-00	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST- 6.			TERMINATION Yes REPORT?			No	<b>\</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2018					IG METH CHECK O				PAPER	PAPER DISKETTE			
Name of Office S	ought by Candida	rte:						DATE C	F ELE	CTIO	N	District Number	Office Code	Part	y Code	County Code
								МО	DAY	YE	AR		10000		I	
								11		6	2018		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	/EAR	l			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	from:		11 27	2	018	T	0	12	2	31	2018					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			15,2	261.54					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 750.00																
C. Total Funds Available (Sum Of Lines A and B)							\$			16,0	)11.54					
D. Total Expenditures (From Schedule III) \$ 566.34																
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)	)			\$			15,4	45.20					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	nedu	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•		
				AFF	ΊDΑ	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	[f th	nis is	a Can	didate r	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached sche	dules	file	d on	paper o	or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge a	ind belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	1 Submit	ting Rep	ort	
	Signati	ıre					- -					Prin	ted Nam	e		
My Commission Ex	_											Emai	il			
	мо	D	AY	YR					Are	ea Coc	le	Daytim	e Telep	hone Nur	nber	
Part II- If this is	a report of a can	didate's	authorized C	omn	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	polit	itical	commi	ittee has r	ot viola	ted an	y provisi	ions of the	e act of J	lune 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this										Si	ignature o	of Candid	late		
	day of ————————————————————————————————————						_					Drints	d Name			
	Signature						-					Frinte	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR	,		-		Area	Code		Da	ytime 1	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period					
SONNEY, CURT COM TO ELECT	From:	11/27/201	<u>8</u> To:	12/31/2018			
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 Period (2) \$ 0.00							
3. Contributions Received Over \$250.00 (From Part C and Part D)							
Contributions Received From Political Committees (Part C)			\$	750.00			
All Other Contributions (Part D)			\$	0.00			
TOTAL for the Reporting	y Period	(3)	\$	750.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting	g 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			\$	750.00			

#### **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 Rep				Reporting Period					
		F	From:		То	:			
				DATE			AMOUNT		
Full Name of Contributing Committee			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.

### **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.

Name of Filing Commit	tee or Candidate		Repo	orting P	eriod			
			Fron	n:		To	o:	
		I			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)			ĺ	Ī		

#### **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 P	eriod		
SONNEY, CURT COM TO ELECT	From:	11/27/2018	То:	12/31/2018

DATE AMOUNT

Full Name of Contributing Committee				DAY	YEAR	
PA MEDICAL PAC (PAM PAC)				DA!	IEAR	<b>\$</b> 750.00
Mailing Address P.O. BOX 8820		12	11	2018	,	
City HARRISBURG	State	Zip Code (Plus 4)			2010	
	PA	171050000				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

**PAGE TOTAL 5 750.00** 

## 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			Rep	orting Pe	riod			
			Fror	n:		To	):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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 Per	iod	
SONNEY, CURT COM TO ELECT	From:	<u>11/27/2018</u> <b>To:</b>	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Car	lame of Filing Committee or Candidate Re				Reporting Period					
			From:			То:				
				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 o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary 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

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting F	Period		
SONNEY, CURT COM TO ELECT	From	11/27/2018	То:	12/31/2018

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Post Master							
Mailing Address 7175 Buffalo Rd.			11	27	2018	\$	24.70
<b>City</b> Harborcreek	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16421	postage	!			
To Whom Paid			МО	DAY	YEAR		
Melissa Boozel							
Mailing Address 6484 Buffalo Rd.			11	27	2018	\$	30.00
<b>City</b> Harborcreek	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16421	Notary				
<b>To Whom Paid</b> The Corry Journal			мо	DAY	YEAR		
Mailing Address 28 West South St.			12	12	2018	\$	83.64
City Corry	State	Zip Code (Plus 4)	Descript	l tion of Exp	l enditure	<u> </u>	
,	PA	16407	advertisement				
To Whom Paid				DAY	VEAD		
WWCB Radio			МО	DAY	YEAR		
Mailing Address 122 North Center St.			12	19	2018	\$	100.00
City Corry	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16407	advertisement				
To Whom Paid				DAY	YEAR		
HRCC			МО		ILAK		
Mailing Address 500 North 3rd St.			11	30	2018	\$	318.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17101	Donation				
To Whom Paid				DAY	YEAR		
Harold H. Hinkler			МО				
Mailing Address 7 Grahamville St.			11	30	2018	\$	10.00
City North East	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16428	Notary				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Enter Grand Total of Expe	nuitures on Page 1, Re	port Cover Page, Item D	·•			\$	566.34