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			Repor Filed I		CANDI	DATE		СОМИ	1ITTEE	✓	LOBI	BYIST	
Name of Filing	Committee, Candid	ate or Lo	obbyist:			-	RT COM 1		CT			L			
Street Address:	7783 EAST LA	KE RD													
City:	ERIE						State:	PA			Zip Co	de: 16	511-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					IY F ARY	POST- 3.		AMENDMENT REPORT?		Yes	No	, 🔨	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID ELECTION		- 5.	30 DA ELECT		POST-	6.		TERMIN REPORT		Yes	No) 🗸
report type)	ANNUAL REPORT	NNUAL REPORT 7. X Year 2019 FILING ME									PAPER		\checkmark	DISKE	TTE
Name of Office	Sought by Candida	te:					DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
	··· ··						мо	DAY	YE	AR	Number	coue	REP)	25
							11		5	2019		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		1	1 2	019 1	0	12	3	1	2019					
A. Amount Bro	ought Forward From	n Last R	eport		ľ	\$			15,44	45.20					
B. Total Monet	tary Contributions	And Rec	eipts (Fro	m Sche	dule I)	\$		1,000.00							
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			16,44	45.20					
D. Total Expen	ditures (From Sch	edule II	I)			\$			3,94	19.02					
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	e C)		\$			12,49	6.18					
F. Value Of In-	-Kind Contributions	Receiv	ed (From	Schedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule I	V)		\$	\$ 0.00								
				AFF	IDAVI	T SE	CTION								
PART I - If this i	is a Committee rep	ort, trea	surer sign	here.	If this is	s a Car	ndidate re	eport, ca	andid	ate sig	jn here.				
I swear (or affirm correct and compl) that this report, incl lete.	uding the	e attached s	chedule	s filed on	paper	or by elect	ronic me	dium,	are to t	he best o	of my knov	vledge	and beli	ief , true
Sworn to and sub	scribed before me this day of	5	20						Si	gnature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_					Prin	ited Name			
My Commission E	xpires					_					Ema	il			
	МО	D/	AY	YR				Area	a Code		Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cano	lidate's	authorize	d Comn	nittee, C	Candid	ate shall	sign he	re.						
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and be	lief this	political	comm	ittee has n	ot violate	ed any	provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subse	cribed before me this day of		20							S	ignature (of Candida	ite		
						-					Printe	ed Name			
Signature						_		Email							
My Commission Ex	pires										21110				

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** SONNEY, CURT COM TO ELECT From: <u>1/1/2019</u> **To:** 12/31/2019 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) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 1,000.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,000.00 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 \$ 1,000.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

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				From: To:					
					DATE			AMOUNT	
Full Name of Contributing Committee			1	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

\$

5/5/2024 6:57:25 AM

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 Candidat	e			orting P	eriod				
From: To:):		
					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	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						
SONNEY, CURT COM TO ELECT				<u>1/</u>	<u>'1/2019</u>	<u>12</u>	<u>12/31/2019</u>			
				DA	TE		Α	MOUNT		
Full Name of Contributing Commit ERIE INSURANCE PAC	tee			мо	DAY	YEAR				
Mailing Address 100 ERIE INSU	RANCE PLAZA						\$	1,000.00		
City _{ERIE}	State PA	Zip Cod 16530-	e (Plus 4) 0000	5	6	2019				
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	PAGE TOTAL 1,000.00		

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		АМ	OUNT
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 P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	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			Report	ing Perio	od			
			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 Period		
SONNEY, CURT COM TO ELECT	From:	<u>1/1/2019</u> To:	<u>12/31/2019</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	T F)		
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	g Period				
F						То:		
				DATE		АМО	UNT	
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	6	0.00	

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

Name of Filing Committee or Candidate				Reporting Period						
					Fro	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						Occupat	tion			
Employer Mailing Address/Principal Place of City Stat Business			State		Zip Code(Plus Descri 4)			ption o	f Contribution	

	1
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				ng Period						
SONNEY, CURT COM TO ELECT			From	<u>1/</u>	<u>1/2019</u>	То:	<u>12/31/2019</u>			
				DATE			AMOUNT			
To Whom Paid Walmart			мо	DAY	YEAR					
Mailing Address 5741 Buffalo Rd.			1	5	2019	\$	96.40			
City Erie	State PA	Zip Code (Plus 4) 16421		Description of Expenditure printer ink						
To Whom Paid Melissa Boozel			мо	DAY	YEAR					
Mailing Address 6484 Buffalo Rd.				10	2019	\$	20.00			
CityHarborcreekStateZip Code (Plus 4)PA16421				Description of Expenditure Notary						
To Whom Paid HRCC			мо	DAY	YEAR					
Mailing Address 500 North 3rd St.			1	30	2019	\$	1,000.00			
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Descrip Donatio	otion of Exp	benditure	2				
To Whom Paid HRCC			мо	DAY	YEAR					
Mailing Address 500 North 3rd St.			6	1	2019	\$	1,000.00			
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Descrip Donatio	otion of Exp	benditure	5				
To Whom Paid Best Buy			мо	DAY	YEAR					
Mailing Address 6650 Peach St.			8	28	2019	\$	1,175.52			
City _{Erie}	State PA	Zip Code (Plus 4) 16509	Descrip I Pad	tion of Exp	Denditure					

To Whom Paid RW-Associates LLC				DAY	YEAR		
Mailing Address 1107 Hess Av.			10	1	2019	\$	452.40
City Erie	State	Zip Code (Plus 4)	Descrip	escription of Expenditure			
	PA	16503	advertisement				
To Whom Paid Veterans Press			мо	DAY	YEAR		
Mailing Address 1008 West 8th St.			11	8	2019	\$	95.00
City Erie	State	Zip Code (Plus 4)	Descrip	Description of Expenditure			
	PA	16502	advertisement				
To Whom Paid WWCB Radio			мо	DAY	YEAR		
Mailing Address 122 North Center St.			12	19	2019	\$	100.00
City Corry State Zip Code (Plus 4) Description of Explanation PA 16407 advertisement					penditure		
To Whom Paid Post Master			мо	DAY	YEAR		
Mailing Address 7175 Buffalo Rd.			1	11	2019	\$	9.70
City Harborcreek	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	16421	postage				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	3,949.02