Campaign Finance Report

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

Filer Identificati		004106			-	Repo	r t	CANDI	DATE		COMM	1ITTEE		LOBI	BYIST		
Number :		004106				Filed	By :						•				
Name of Filing C	Committee, Ca	ndidate	or Lobl	byist:		SONNE	EY, CU	RT COM T	TO ELEC	СТ							
Street Address:	7783 EAS	T LAKE	RD									_					
City:	ERIE							State: PA Zip C					Code: 16511-0000				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		ND FRIDA RIMARY	Y PRE	- 2.	30 D. PRIM		POST- 3. X			AMENDN REPORT		Yes	No	· 🗸	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		ND FRIDA LECTION	FRIDAY PRE- CTION 5. 30 DAY ELECTION				POST-	6.		TERMIN REPORT		Yes	No	· 🗸	
report type)	ANNUAL REP	DRT 7.	Y	ear 2020				NG METHO CHECK O				PAPER		\checkmark	DISK	TTE	
Name of Office Sought by Candidate:							DATE O	OF ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code		
REPRESENTATIVE IN THE GENERAL ASSEMBLY								мо	DAY	YE/	AR	4	STH	REP	•	25	
REPRESENTATIVE IN THE GENERAL ASSEMBLY								11		3	2020		(SEE INS	STRUCTI	ONS FOR	CODES)	
Summary of		d M	0	DAY	YEAR	2		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		5	19	2	020	ТО	6	2	2	2020						
A. Amount Bro	ught Forward	From La	ast Rep	ort			\$			15,9	00.00						
B. Total Moneta	ary Contributio	ons And	Receip	ots (From	n Sche	dule I)	\$	5	0.00								
C. Total Funds	Available (Sur	n Of Lin	es A ar	nd B)			\$	5		15,9	00.00						
D. Total Expen	ditures (From	Schedul	le III)				\$	5			0.00						
E. Ending Cash	Balance (Sub	tract Lin	ne D Fro	om Line (C)		\$	5		15,90	00.00	-					
F. Value Of In-	Kind Contribut	ions Re	ceived	(From S	chedu	le II)	\$	5			0.00	-					
G. Unpaid Debt	s And Obligat	ions (Fre	om Sch	nedule IV	')		\$	\$ 0.00									
					AFF	IDAV	IT SE	CTION									
PART I - If this is	s a Committee	report,	treasu	rer sign	here. I	If this i	s a Ca	ndidate re	eport, ca	andid	ate sig	gn here.					
I swear (or affirm) correct and comple		, includin	ng the at	tached scl	hedules	s filed o	n paper	or by elect	ronic me	dium,	are to t	the best o	of my knov	vledge	and bel	ief , true	
Sworn to and subs	cribed before mo day of	e this	20	0						Si	gnature	e of Perso	n Submitt	ing Rep	oort		
							_					Prin	ited Name				
My Commission Ex	-	nature										Ema	il				
	мо		DAY		YR				Are	a Code	•	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a	candida	te's au	thorized	Comn	nittee,	Candid	late shall	sign he	re.							
I swear (or affirm) No 320) as amende		t of my kr	nowledg	je and beli	ef this	politica	l comn	nittee has n	ot violat	ed any	provis	ions of th	e act of Ju	ine 3,1	937 (P.I	L. 1333,	
Sworn to and subso	ribed before me day of	this	3	0							s	ignature	of Candida	ite			
			2									Printe	ed Name				
My Commission Exp	Signat	ure					_					Ema	il				
,							_										
	мо		DAY		YR	l			Area C	Code		D	aytime Te	elephon	e Numl	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pag	e			
Name of Filing Committee or Candidate	Reporting	g Period		
SONNEY, CURT COM TO ELECT	From:	<u>5/19/202</u>	2 <u>0</u> To:	<u>6/22/2020</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	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			1	
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)	I			
TOTAL for the Reporting	g 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
			1	

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						
						1				
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$	0.00			

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			\$	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	AMOUNT
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				Reporting Period					
		Fror	n:		Т):			
			D	ATE		AM	OUNT		
			мо	DAY	YEAR	\$	0.00		
State	Zip Code (Plu	s 4)							
•			Occupat	ion					
ce of Business	City			State		Zip Code	(Plus 4)		
dule I, Detailed Su	ummary Page	Sectio	on 3.				GE TOTAL 0.00		
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA State Zip Code (Plus 4) Occupat	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code		

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			Reporting Period						
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•							
		_	.	_				PAGE TO	ΓAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumr	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>5/19/2020</u> То:	<u>6/22/2020</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 Cano	Name of Filing Committee or Candidate			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 Section 2.	Schedule II, In-Kii	nd Contributions Detai	led Sum	mary Pag	je,	F	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				Reporting Period					
				From:						
					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	State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Sch 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	Name of Filing Committee or Candidate				Reporting Period				
				From			То:		
				DATE			AMOUNT		
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
Enter Grand Total of Exponditures	on Page 1. Penert (Cover Bage Item [`				PAGE TOTAL		
Enter Grand Total of Expenditures of	JII Page 1, Report C	lover Page, menn i				\$	0.00		