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	20041	06			Rep File			CAN	NDIDATE			COM	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Ca	andida	te or Lo	obbyist:		SON	INE	r, cui	RT CON	4 T	O ELE	СТ							
Street Address:	7783 EA	ST LAK	(E RD																
City:	ERIE			_					State:		PA			Zip Cod	le: 16	511-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA PRIMARY	AY PRE-	- 2	2.	30 DA			OST-	3. X		AMENDMENT REPORT?		Yes	N	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDA				30 DA		P	OST-	OST- 6.		TERMINATION REPORT?		Yes	N	0	\
report type)	ANNUAL REF	PORT	7.	Year 2022					NG MET CHECK					PAPER		√	DISK	ETTE	
Name of Office S	ought by Car	ndidate	: :	-					DATE	01	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	YE	AR			REP	1	25	
										11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		nd	МО	DAY	YEAR	l			МО		DAY	ΥI	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	trom:	ļ		5 3	3 2	022	Т	0		6		6	2022						
A. Amount Bro	ught Forward	l From	Last R	eport				\$				6,2	244.63						
B. Total Moneta	ary Contribut	ions A	nd Rece	eipts (Fror	n Sche	dule	I)	\$	\$ 0.00										
C. Total Funds	Available (Su	ım Of L	ines A	and B)				\$				6,2	244.63						
D. Total Expend	ditures (From	1 Sched	dule III	[)				\$					99.06						
E. Ending Cash Balance (Subtract Line D From Line C)						\$				6,1	45.57								
F. Value Of In-	Kind Contribu	utions	Receive	ed (From S	Schedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obliga	tions (From S	chedule I	/)			\$					0.00						
					AFF	IDA	VI	T SE	CTIO	N									
PART I - If this is		=	-	_									_						
I swear (or affirm) correct and comple		rt, inclu	ding the	attached so	hedules	s filed	l on	paper	or by eld	ectr	onic me	edium	, are to t	he best o	f my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before n day of	ne this		20						-		S	ignature	of Perso	1 Submitt	ing Rep	ort		
		ignature		-				-		•				Prin	ted Name				_
My Commission Ex		•								-				Emai	il				-
	МО		DA	ΑY	YR						Are	a Coc	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's	authorized	l Comn	nitte	e, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	/ knowle	edge and bel	ief this	polit	ical	comm	ittee ha	s no	ot violat	ed an	y provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc		e this		20									Si	ignature o	of Candida	ite			_
-	day of —— ——							-						Printe	d Name				-
	Signa	ature						-		_									_
My Commission Exp	ires													Ema	il				
	M	10	DA	AY	YR			-			Area	Code		Da	ytime Te	elephor	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
SONNEY, CURT COM TO ELECT	From:	<u>5/3/202</u>	<u>2</u> To:	6/6/2022				
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	(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

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			From: To:				:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$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 Committee or Candidat	re		Reporting Period From: To:					
Fro					DATE		AMOUN	т
			_				71.10011	•
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$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 Candi	ame of Filing Committee or Candidate		Reporting Period						
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

ame of Filing Committee or Candidate		Reporting Period							
			Fror	n:		To	То:		
				D.	ATE		A	MOUNT	
				мо	DAY	YEAR			
Mailing Address City State Zip Code (Plus 4)							\$	0.00	
State	Zi	p Code (Plus	s 4)						
·	·			Occupation					
al Place of		City			State		Zip Cod	le (Plus 4)	
Schedule I, Detai	iled Sumr	mary Page,	Section	on 3.				PAGE TOTAL 0.00	
	al Place of	al Place of	al Place of City	State Zip Code (Plus 4) al Place of City	State Zip Code (Plus 4) Occupa	State Zip Code (Plus 4) Occupation Oliver State	State Zip Code (Plus 4) Occupation Olympia Place of City State Schedule I, Detailed Summary Page, Section 3.	State Zip Code (Plus 4) Occupation Olivy State Zip Code Occupation State Zip Code	

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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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	d							
SONNEY, CURT COM TO ELECT	From:	<u>5/3/2022</u> To:	<u>6/6/2022</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Candidat	:e		Reporting	g 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 E on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta Section 2.			iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candi	ame of Filing Committee or Candidate		Re	porting F	Period						
					Fro	om:		To:	o:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address							\$	0.00			
City	State		Zip Code(F	Plus 4)							
Employer of Contributor			1		Occupation						
Employer Mailing Address/Principa Business	l Place of	City		State		Zip 4)	Code(Plus	Descr	iption (of Contribution	
Enter Grand Total of Part G on	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			Reporti	ng Period			
SONNEY, CURT COM TO ELECT			From	<u>5/3</u>	3/2022	То:	6/6/2022
				AMOUNT			
To Whom Paid Post Master				DAY	YEAR		
Mailing Address 7175 Buffalo Rd.			5	3	2022	\$	8.95
City Harborcreek	State PA	Zip Code (Plus 4) 16421	Description of Expenditure Postage				
To Whom Paid The Corry Journal				DAY	YEAR		
Mailing Address 28 W. South St.			5	6	2022	\$	90.11
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Advertisement				

Enter Coand Total of Europeditures on Page 1. Page 4. Page 7. Tage P.	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$ 99.06