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		CAND	IDATE		СОМІ	MITTEE	✓	LOB	BYIST	
Name of Filing	Committee, Candid	ate or Lo	obbyist:		SONNE	Y, Cl	JRT COM	TO ELE	СТ						
Street Address: 7783 EAST LAKE RD															
City:	ERIE						State:	PA			Zip Co	de: 16	511-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D PRIN	DAY MARY	POST-	3.			AMENDMENT REPORT?		No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D ELEC	DAY CTION	POST-	POST- 6. X			ATION ?	Yes	✓ No	
report type)	ANNUAL REPORT	7.	Year 2022				ING METH) CHECK C				PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	te:					DATE OF ELECTION				District Number		Par	ty Code	County Code
							мо	DAY	Y	EAR	Itumber	coue	REP	,	25
							11 8 2022					(SEE INS	STRUCTI	ONS FOR (CODES)
Summary of	Receipts and	мо	DAY	YEAR			мо	DAY	Y	EAR	FC	DR OFFIC	E USE	ONLY	
Expenditures	s from:	1	10 25	20	022 7	Ю	1	1	28	2022					_
A. Amount Bro	ought Forward From	m Last R	eport				\$		4,	259.57					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$			0.00					
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$		4,	259.57					
D. Total Expen	ditures (From Sch	edule II	I)				\$		4,2	259.57]				
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)			\$			0.00]				
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	le II)		\$			0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$			0.00					
				AFF	IDAV	IT S	ECTION								
PART I - If this i	s a Committee rep	ort, trea	surer sign	here. I	If this i	s a Ca	andidate r	eport, o	candi	date si	gn here.				
I swear (or affirm correct and compl) that this report, inc lete.	luding the	e attached sc	hedules	s filed on	pape	r or by elec	tronic m	edium	, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before me this day of	S	20						9	Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signatu	ire				_					Prin	ited Name			
My Commission E	-										Ema	nil			
	мо	D/	AY	YR				Ar	ea Co	de	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, (Candi	date shall	sign h	ere.						
I swear (or affirm) No 320) as amend) that to the best of r ed.	ny knowle	edge and beli	ief this	political	com	mittee has i	not viola	ted ar	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subse	cribed before me this day of		20							s	ignature	of Candida	ite		
						_					Printe	ed Name			
My Commission Exp	Signature					_					Ema	nil			
						_									
	мо	D	AY	YR				Area	Code		D	aytime Te	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** SONNEY, CURT COM TO ELECT From: <u>10/25/2022</u> **To:** 11/28/2022 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)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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							
				From:			То:				
		·			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 Candidate					Reporting Period					
			From: To) :				
			DATE AMOUNT				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	\$	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	MOUNT	
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 Schedule I, Detailed Summary Page, Section 3.							\$ 0.		

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:				om:			То:			
				D	ATE		АМ	IOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Place of Business City				•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							PAGE TOTAL \$ 0.00			

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	Name of Filing Committee or Candidate			Reporting Period							
				m: 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 Schedule I, Detailed 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>10/25/2022</u> то:	<u>11/28/2022</u>								
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR											
TOTAL for the Reporting Pe	\$	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 Candidate			Reporting Period						
				From:			То:		
	DATE			AMOUNT					
Full Name of Contributor				DAY	YEAR				
Mailing Address		_				7 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary P Section 2.					je,		PAGE TOTAL		
						\$		0.00	

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

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 Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period							
SONNEY, CURT COM TO ELECT			From	<u>10/2</u>	<u>5/2022</u>	То:	<u>11/28/2022</u>					
				DATE AMOUNT								
To Whom Paid Sheraton			мо	DAY	YEAR							
Mailing Address 55 W. Bay Rd.				19	2022	\$	1,164.73					
City Erie	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•						
	PA	16507	retirement celebration									
To Whom Paid HRCC			мо	DAY	YEAR							
Mailing Address 500 N. 3rd St. #4			11	25	2022	\$	3,094.84					
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•						
	PA	17101	Donatio	'n								
			_				PAGE TOTAL					
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I).			\$	4,259.57					