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 20	05294				Rep File			CANDI	DATE		СОМ	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Can	didate o	r Lob	byist:		SINN	TOV	T, JO:	SEPH CO	м то і	ELEC	Γ						
Street Address:	P O BOX 3	305																
City:	ERIE								State:	PA			Zip Cod	le: 16	5508			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		ND FRIDAY	/ PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		ND FRIDAY	/ PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPO	RT 7. X	Υ	/ear 2009					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	ought by Cand	idate:							DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
									МО	DAY	YE	AR		10000	DEM	1	25	
									11		3	2009		(SEE IN	STRUCTIO	ONS FOR (CODES))
Summary of Expenditures		МО)	DAY	YEAR			_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		1	. 1	2	009	Т	<u> </u>	12	:	31	2009						
A. Amount Bro	ught Forward F	rom Las	st Rep	port				\$			65,3	328.80						
B. Total Monet	ary Contributio	ns And R	Recei	pts (From	Sche	dule	I)	\$				0.00						
C. Total Funds	Available (Sum	Of Line	s A a	nd B)				\$			65,3	328.80	0					
D. Total Expen	ditures (From S	chedule	e III)	ı				\$			9	94.00	0					
E. Ending Cash	Balance (Subt	act Line	e D Fr	rom Line C	c)			\$			64,3	34.80						
F. Value Of In-	Kind Contributi	ons Rec	eived	d (From Sc	hedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligation	ns (Fro	m Scl	hedule IV)			\$				0.00			1			
					AFF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee I	eport, t	reasu	urer sign h	nere. I	[f thi	is is	a Can	ndidate re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		including	the a	ittached sch	edules	filed	l on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , tru	ue.
Sworn to and subs	cribed before me day of	this	2	20							S	ignature	of Perso	n Submit	ting Rep	ort		_
		ature	_					- -					Prin	ted Name	e			-
My Commission Ex	-	ature											Email					
	мо		DAY	,	YR			-		Are	ea Cod	le	Daytime Telephone Number					_
Part II- If this is	a report of a c	andidate	e's aı	uthorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		of my kno	owledg	ge and belie	ef this	polit	ical	commi	ittee has n	ot viola	ted an	ny provisions of the act of June 3,1937 (P.L. 133					. 1333	3,
Sworn to and subsc	ribed before me t	his										Si	ignature o	of Candid	ate			-
	day of			20				_					Printa	d Name				-
	Signatu							-										_
My Commission Exp	_	-											Ema	il	_			_
	мо		DAY	7	YR			•		Area	Code		Da	aytime T	elephon	e Numb	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
SINNOTT, JOSEPH COM TO ELECT	From:	1/1/200	<u>9</u> То:	12/31/2009
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) 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
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	J Period	(4)	\$	0.00
			1	
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

Name of Filing Committee	or Candidate		Reporting	Period			
			From:		То	:	
		I		DATE			AMOUNT
Full Name of Contributing C	ommittee		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

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 Filling Committee of Candidate			Reporting Period From: To:					
			Fro	m:		10):	
					DATE		AMOUNT	
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	date		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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section .	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	ting Perio	bd			
			From:			To:		
				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 Schedule T. Detailer	d Summary Page	Section	4			PAGE TOTAL	
Enter Grand Total of Fait E	on senedare 1, Betanet	a Summary rage,	Section				\$ 0.0	0

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	İ	
SINNOTT, JOSEPH COM TO ELECT	From:	<u>1/1/2009</u> To:	12/31/2009
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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 Candid	ate		Reporting	g Period			
			From:			To:	
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee	or Candidate		Reporti	ng Period			
SINNOTT, JOSEPH COM TO	O ELECT		From	<u>1/</u>	1/2009	То:	12/31/2009
				DATE			AMOUNT
To Whom Paid DAHLKEMPER FOR CONGR	ESS		МО	DAY	YEAR		
Mailing Address PO BOX	(1045		12	7	2009	\$	250.00
City ERIE	State PA	Zip Code (Plus 4) 16512	Descrip FUNDR	otion of Exp	penditure		
To Whom Paid OFFICE OF CHILDREN & YO	DUTH		МО	DAY	YEAR		
Mailing Address 154 WE	ST 9TH ST		12	7	2009	\$	50.00
City ERIE	State PA	Zip Code (Plus 4) 16501	Descrip FUNDR	otion of Exp	penditure		
To Whom Paid FIFTH WARD DEMOCRATS		•	мо	DAY	YEAR		
Mailing Address @CYSC	LUB (PO BOX 1184 ERIE 16	5512	12	7	2009	\$	50.00
City ERIE	State PA	Zip Code (Plus 4) 16510		otion of Exp			ONTRIBUTION
To Whom Paid SIXTH WARD DEMOCRATS	PARTY		мо	DAY	YEAR		
Mailing Address @SACR	ED HEART USHERS CLUB		12	8	2009	\$	50.00
City ERIE	State PA	Zip Code (Plus 4) 16508	1	otion of Exp			ONTRIBUTION
To Whom Paid			мо	DAY	YEAR		
SONS OF LAKE ERIE						l	
Mailing Address PO BOX	3605		12	8	2009	\$ \$	25.00

16508

FUNDRAISER

PA

							PAGE 12
To Whom Paid BARBER CENTER FOUNDATION			мо	DAY	YEAR		
Mailing Address 100 BARBER PLACE			12	10	2009	\$	150.00
City ERIE	State PA	Zip Code (Plus 4) 16507	Description of Expenditure FUNDRAISER PARTY CONTRIBUTION				
To Whom Paid YOUTH DEVELOPMENT CENTER			МО	DAY	YEAR		
Mailing Address 2005 WEST 8TH ST STE 103			12	14	2009	\$	100.00
City ERIE	State PA	Zip Code (Plus 4) 16505	Description of Expenditure				
To Whom Paid US POSTAL SERVICE			МО	DAY	YEAR		
Mailing Address DOWNTOWN STATION			12	14	2009	\$	44.00
City ERIE	State PA	Zip Code (Plus 4) 16507	Description of Expenditure POSTAGE				
To Whom Paid MALENO FOUNDATION			мо	DAY	YEAR		
Mailing Address C/O ERIE BANK 2035 EDINBORO RD			12	15	2009	\$	250.00
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure FUNDRAISER				
To Whom Paid ARC OF ERIE COUNTY			мо	DAY	YEAR		
Mailing Address 254 EAST 10TH ST			12	23	2009	\$	25.00
City ERIE	State PA	Zip Code (Plus 4) 16503	Description of Expenditure DONATION - FUNDRAISING				
Enter Grand Total of Exp	enditures on Page 1, Rep	oort Cover Page. Item D	_				PAGE TOTAL
		and dotal . age, Item D	-			\$	994.00