Campaign Finance Report

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

Filer Identification 2004106 Number :					Repor Filed		CANDI	DATE		соми	ITTEE	LOBBYIST LOBBYIST				
Name of Filing C	Committee, Car	ndidate or L	obbyist:	S	SONNE	Y, CU	RT COM	TO ELE	СТ							
Street Address:	7783 EAS	T LAKE RD														
City:	ERIE -						State:	PA			Zip Cod	de: 16	6511			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2. X	30 D/ PRIM		POST-	3.		AMENDM REPORT		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY F ELECTION			30 DA		POST-	6.		TERMINATION REPORT?		Yes	No	•	
report type)	ANNUAL REPO	DRT 7.	Year 2010				NG METHO				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Can	didate:	-				DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count	у
							МО	DAY	YE	AR		STH	REP		25	
REPRESENTATI	VE IN THE GE	NERAL ASS	SEMBLY				11		2	2010	-	(SEE IN	STRUCTIO	ONS FOR C	ODES)	
Summary of Receipts and MO DAY YEAR MO DAY YEAR							AR	FC	R OFFI	CE USE	ONLY					
Expenditures	from:		1 1	20	10	ГО	5		3	2010						
A. Amount Bro	ught Forward	From Last F	Report			\$			5,7	97.86						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 75.0								75.00								
C. Total Funds Available (Sum Of Lines A and B)									5,8	372.86						
D. Total Expenditures (From Schedule III)						\$			1,5	25.00						
E. Ending Cash Balance (Subtract Line D From Line C)						\$			4,3	47.86]					
F. Value Of In-	Kind Contribut	ions Receiv	ed (From Sche	dule	e II)	\$;			0.00						
G. Unpaid Debt	ts And Obligati	ons (From	Schedule IV)			\$				0.00						
			А	FFI	DAV	IT SE	CTION									
PART I - If this is	s a Committee	report, trea	surer sign her	e. If	f this i	s a Ca	ndidate re	eport, d	candio	date sig	jn here.					
I swear (or affirm) correct and comple		, including th	e attached schedi	ıles	filed or	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	e,
Sworn to and subs	cribed before me day of	e this	20						s	ignature	of Perso	n Submit	ting Rep	ort		_
	Sig	nature				<u>-</u>					Prin	ted Name	e			-
My Commission Ex	cpires					_					Ema	il				-
	МО	D	AY	YR				Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candidate's	authorized Cor	mmi	ittee, (Candid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		of my know	edge and belief t	his p	political	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	. 1333	,
Sworn to and subsc		this						-		s	ignature o	of Candid	ate			-
	day of —— ——					_					Printe	ed Name				-
	Signat	ure				_										╻┃
My Commission Exp	ires										Ema	il				
	мо	D	AY	YR		_		Area	Code		D	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -									
Name of Filing Committee or Candidate	Reporting	g Period							
SONNEY, CURT COM TO ELECT	From:	1/1/201	<u>0</u> To:	5/3/2010					
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor									
TOTAL for the Reporting	g Period	(1)	\$	75.00					
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	y Period	(3)	\$	0.00					
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)									
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			\$	75.00					

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re					
			From: To) :		
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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 Filling Committee of Camulate			Reporting Period From: To:					
					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	me of Filing Committee or Candidate Repo		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	ame of Filing Committee or Candidate		Reporting Period					
			Fron	n:		То	:	
				D/	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address State Zip Code (Plus 4)							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Place of City Business					State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Secti								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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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	I							
SONNEY, CURT COM TO ELECT	From:	<u>1/1/2010</u> To:	<u>5/3/2010</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 PART 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 F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	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 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 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			Reporti	ng Period			
SONNEY, CURT COM TO ELECT			From	1/	1/2010	То:	5/3/2010
				DATE			AMOUNT
To Whom Paid HRCC			МО	DAY	YEAR		
Mailing Address 500 NORTH THIRD S	ST. FOURTH FLOOR					\$	500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Descrip DONAT	otion of Exp	penditure		
To Whom Paid AMERICANS VETERAN'S TRAVELING WALL Mailing Address				DAY	YEAR		
Mailing Address			2	12	2010	\$	200.00
City ERIE	State PA	Zip Code (Plus 4)		otion of Exp	G WALL IN ERIE		
To Whom Paid LECRW (LAKE ERIE COMM REP WOMEN)			МО	DAY	YEAR		
Mailing Address			2	18	2010	\$	25.00
City ERIE	State PA	Zip Code (Plus 4)	Descrip DONAT	otion of Exp	penditure		
To Whom Paid CASH			МО	DAY	YEAR		
Mailing Address			2	18	2010	\$	200.00
City State Zip Code (Plus 4)			l l	otion of Exp URSEMENT			
To Whom Paid LISA FLAGELLA			МО	DAY	YEAR		
Mailing Address			3	8	2010	\$	400.00
City ERIE	State PA	Zip Code (Plus 4)					

To Whom Paid A-1 TAX AND NOTARY SERVICE			мо	DAY	YEAR		
Mailing Address 3210 BUFFALO ROA	D		3	4	2010	\$	50.00
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 16510			PETITION NOTARIZATION FEE				
To Whom Paid HRCC				DAY	YEAR		
Mailing Address 500 NORTH THIRD ST. FOURTH FLOOR			3	15	2010	\$	100.00
City HARRISBURG State Zip Code (Plus 4)			Descrip	tion of Exp	enditure		
	PA	17101	FILING	FEE			
To Whom Paid CORRY CONTRACT			мо	DAY	YEAR		
Mailing Address 21 MAPLE AVENUE			4	26	2010	\$	50.00
City CORRY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 16407 DONATION - HOLE SPON					E SPONS	OR	
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				\$	1,525.00		