Campaign Finance Report

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

-	-			-		-	CANDI		COM	MITTEE		LOB	BYIST	
Filer Identificati Number :	on 2	004106			Repo Filed		CANDI	DATE	СОМ	MIIIEE	✓	LOBI	51151	
Name of Filing C	Committee, Car	ndidate or	Lobbyis	st:	SONNE	EY, CU	RT COM	TO ELEC	т					
Street Address:	7783 EAS	T LAKE R	D							_				
City:	ERIE						State:	PA		Zip Co	de: 16	511		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND F PRIM	FRIDAY PRE ARY	E- 2.	30 D. PRIM		POST-	3.		AMENDMENT REPORT?		No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND F	FRIDAY PR TION	E- 5. X	30 D. ELEC				TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPO	DRT 7.	Year	2010			NG METH			PAPER	PAPER		DISKE	TTE
Name of Office S	bought by Cano	lidate:	-			-	DATE C	F ELEC	TION	District Number		Par	ty Code	County Code
REPRESENTATI	VE IN THE GE	NFRAL A	SSEMBL	Y			мо	DAY	YEAR		STH	REP		25
							11		2 2010		(SEE INS	STRUCTI	ONS FOR (CODES)
Summary of		d MO	DA	Y YEAR			мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditures	s from:		1	1 2	2010	го	10	1	8 2010)				
A. Amount Bro	ught Forward	From Last	Report			\$			4,424.56					
B. Total Monet	ary Contributio	ons And R	eceipts	(From Sche	edule I)	\$	5		8,265.00					
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B) \$ 12,689.56													
D. Total Expen	ditures (From	Schedule	111)			\$	5		955.77					
E. Ending Cash	Balance (Sub	tract Line	D From	Line C)		\$	5		11,733.79	4				
F. Value Of In-	Kind Contribut	ions Rece	eived (Fr	om Schedu	ıle II)	\$;		0.00	4				
G. Unpaid Debt	ts And Obligati	ons (Fron	n Schedu	ule IV)		\$	5		0.00					
				AFF	FIDAV	IT SE	CTION							
PART I - If this is														
I swear (or affirm) correct and comple		, including	the attacl	ned schedule	s filed o	1 paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me day of	e this	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
		nature				_				Prir	nted Name	1		
My Commission Ex	cpires									Ema	ail			
	мо		DAY	YR	1			Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a	candidate	's autho	rized Com	nittee,	Candic	late shall	sign hei	r e.					
I swear (or affirm) No 320) as amende		of my kno	wledge ar	nd belief this	s politica	l comn	nittee has r	iot violate	ed any provis	sions of th	ne act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me day of	this	20						5	Signature	of Candida	ite		
						_				Print	ed Name			
My Commission Exp	Signat	ure				_				Ema	ail			
						_								
	мо		DAY	YF	ર			Area C	ode	D	Daytime Te	elephon	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>1/1/2010</u> **To:** 10/18/2010 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 15.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 3,350.00 **Contributions Received From Political Committees (Part A)** 100.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 3,450.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 3,800.00 1,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 4,800.00 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 \$ 8,265.00 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 Candidat	Name of Filing Committee or Candidate				Period			
SONNEY, CURT COM TO ELECT				om:	<u>1/1/20</u>) <u>10</u> To	:	<u>10/18/2010</u>
					DATE			AMOUNT
Full Name of Contributing Committee ACTION COMMITTEE FOR RURAL ELECT	RIFICATION			мо	DAY	YEAR		
Mailing Address 212 LOCUST ST.	P.O. BOX 1266						\$	100.00
City HARRISBURG	State PA	7 2		2010				
Full Name of Contributing Committee BIKE PAC		мо	DAY	YEAR				
Mailing Address P.O. BOX 564	StateZip Code (Plus 4)PA17055				10	2010	\$	250.00
Full Name of Contributing Committee PHYSICIAN ASSISTANTS PAC				МО	DAY	YEAR		
Mailing Address 200 N. THIRD ST.	SUITE 1500 State PA	Zip Code (Plus	4)	8	27	2010	\$	250.00
Full Name of Contributing Committee PAMIC PAC		-		мо	DAY	YEAR		
Mailing Address 1017 MUMMA ROAD SUITE 103 City WORMSLEYBURG State Zip Code (Plus 4) PA 17043					15	2010	\$	250.00
Full Name of Contributing Committee PREA ACRE					DAY	YEAR		
Mailing Address P.O. BOX 1266	State PA	Zip Code (Plus	4)	9	15	2010	\$	250.00

Full Name of Contributing Commit			мо	DAY	YEAR	
Mailing Address 416 FORSTE	R STREET					\$ 250.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	9	21	2010	
Full Name of Contributing Committee PA MEDICAL POLITICAL ACTION C			мо	DAY	YEAR	
Mailing Address P.O. BOX 88	320					\$ 250.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17105	9	16	2010	
Full Name of Contributing Commit FIRST ENERGY POLITICAL ACTION		мо	DAY	YEAR		
Mailing Address 76 S. MAIN	ST.					\$ 250.00
City AKRON	State OH	Zip Code (Plus 4) 44308	9	16	2010	
Full Name of Contributing Commit PPL PEOPLE FOR GOOD GOV'T	ee		мо	DAY	YEAR	
Mailing Address TWO NORTH	I NINTH ST.					\$ 250.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101	9	28	2010	
Full Name of Contributing Commits CHAMBER PAC	ee		мо	DAY	YEAR	
Mailing Address 417 WALNU	T ST.					\$ 250.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-190	9	29	2010	
Full Name of Contributing Committee RAPP FOR REP. COMMITTEE				DAY	YEAR	
Mailing Address						\$ 250.00
City	State	Zip Code (Plus 4)	9	9 28	2010	
			1	1	1	1

Full Name of Contributing Comm VERIZON - GOOD GOV'T CLUB						
Mailing Address 300 WAL	NUT ST. 12TH FLOOR					\$ 250.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	9	17	2010	
Full Name of Contributing Comm HIGHMARK HEALTH PAC	мо	DAY	YEAR			
Mailing Address 1800 CENTER ST.						\$ 250.00
City CAMP HILL	State PA	Zip Code (Plus 4) 17089-008	9	23	2010	
Full Name of Contributing Comm PA ORTHOPAEDICS SOCIETY P			мо	DAY	YEAR	
Mailing Address 500 N. 31	RD STREET 11TH FLOO	R				\$ 250.00
City HARRISBURG	HARRISBURGStateZip Code (Plus 4)PA17101-111		10	5	2010	
	·		•		•	PAGE TOTAL

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

3,350.00

\$

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									
SONNEY, CURT COM TO ELECT					<u>1/1/2</u>	: <u>10/18/2010</u>			
			I		DATE			AMOUNT	
Full Name of Contributor JODY M. SPERRY				МО	DAY	YEAR			
Mailing Address 11420 SPERRY ROA	٩D						\$	100.00	
City ATLANTIC	State	Zip Code (Plus 4)		9	9	2010			
-	PA	16111-233							
								PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I,	Detailed Summary Pag	ge, So	ection 2			\$	100.00	

100.00

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		R	eporting	Period			
SONNEY, CURT COM TO ELECT		F	rom:	<u>1/</u>	<u>1/2010</u>	То:	<u>10/18/2010</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee Z PAC PENNSYLVANIA ANESTHESIOLOC	GIST PAC			мо	DAY	YEAR	
Mailing Address P.O. BOX 823							\$ 500.00
City HARRISBURG	State PA	Zip Code (Pl 17108	lus 4)	9	9	2010	
Full Name of Contributing Committee UPS PAC					DAY	YEAR	
Mailing Address 55 GLEN LAKE PKWY	NE State GA	Zip Code (Pl 30328	lus 4)	8	17	2010	\$ 500.00
Full Name of Contributing Committee PA OPTHAMOLOGY PAC				МО	DAY	YEAR	
Mailing Address 200 N. THIRD ST. S	UITE 500 State PA	Zip Code (Pl 17101	lus 4)	9	14	2010	\$ 500.00
Full Name of Contributing Committee PA TRUCK PAC				мо	DAY	YEAR	
Mailing Address 910 LINDA LANE City CAMP HILL	State PA	Zip Code (Pl 17011-640		8	6	2010	\$ 500.00
Full Name of Contributing Committee PA BAR PAC				мо	DAY	YEAR	
Mailing Address 100 SOUTH STREET	P.O. BOX 186 State PA	Zip Code (Pl 17108	lus 4)	9	24	2010	\$ 500.00

Full Name of Contributing Comm PA CABLE PAC	ittee		мо	DAY	YEAR		
Mailing Address 127 STATE S	TREET					\$	500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	10	5	2010		
Full Name of Contributing Comm TROOPERS ASSOCIATION PAC	мо	DAY	YEAR				
Mailing Address 3625 VARTAN WAY						\$	500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	9	30	2010		
Full Name of Contributing Comm PA COMMITTEE FOR AFFORDAB			мо	DAY	YEAR		
Mailing Address 600 NORTH	12TH STREET					\$	300.00
City LEMOYNE State Zip Code (Plus 4) PA 17043				15	2010		
							PAGE TOTAL
nter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						\$	3,800.00

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			Repo	orting Pe	riod			
SONNEY, CURT COM TO ELECT			From	n:	<u>1/1/2</u>	<u>010</u> То	To: <u>10/18/2010</u>	
				D	ATE		AMOUNT	
Full Name of Contributor ERNEST L. & BETTY L. LAKE				мо	DAY	YEAR		
Mailing 9662 GINNY LANE Address							\$ 1,000.00	
City NORTH EAST	State PA	; 4)	8	20	2010			
Employer Name				Occupation				
Employer Mailing Address/Principal Place of City Business					State		Zip Code (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Sectio	on 3.		\$	PAGE TOTAL 5 1,000.00	

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			Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	Ī
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	Receipt Description								
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
	nter Grand Total of Part E on Schedule I, Detailed Summary Page, 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		
SONNEY, CURT COM TO ELECT	From:	<u>1/1/2010</u> То:	<u>10/18/2010</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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, 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	g Period			
			From:			То:	
				DATE		ΑΜΟ	JNT
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 Schedule II, In-Kind Contributions Detail Section 2.				mary Pag	je,	PAGE	TOTAL
					4	5	0.00

PAGE 13

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

Name of Filing Committee or Candidate					Re	porting F	Period				
					Fro	om:		To:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address								\$	0.00		
City	State	Zip Code(Plus 4)									
Employer of Contributor	1				Occupation						
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	otion	of Contribution		
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			Reporting Period					
SONNEY, CURT COM TO ELECT			From	<u>1/</u>	<u>1/2010</u>	То:	<u>10/18/2010</u>	
				DATE			AMOUNT	
To Whom Paid AMERICAN CANCER SOCIETY			мо	DAY	YEAR			
Mailing Address			6	11	2010	\$	25.00	
City CORRY	State PA	Zip Code (Plus 4) 16407		Description of Expenditure RELAY FOR LIFE DONATION				
To Whom Paid JAN GURDAK NOTARY SERVICE			мо	DAY	YEAR			
Mailing Address RAYMOND AVE			6	14	2010	\$	5.00	
City CORRY	State PA	Zip Code (Plus 4) 16407	-	Description of Expenditure NOTARY FEE				
To Whom Paid THE POSTMASTER			мо	DAY	YEAR			
Mailing Address			6	14	2010	\$	15.90	
City CORRY	State PA	Zip Code (Plus 4) 16407	Description of Expenditure POSTAGE					
To Whom Paid ERIE COUNTY REPUBLICAN PARTY			мо	DAY	YEAR			
Mailing Address 4014 MELROSE AVE.			8	12	2010	\$	50.00	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure PICNIC DONATION					
To Whom Paid THE GUIDE PUBLISHING			мо	DAY	YEAR			
Mailing Address 315 SECOND AVE.			9	17	2010	\$	60.00	
City WARREN	State PA	Zip Code (Plus 4) 16365		Description of Expenditure ADVERTISEMENT				

To Whom Paid THE JOURNAL MO DAY YEAR Mailing Address 28 WEST SOUTH ST 9 17 2010 \$ City CORRY State Zip Code (Plus 4) Description of Expenditure ADVERTISEMENT	64.00			
City CORRY State Zip Code (Plus 4) Description of Expenditure	64.00			
To Whom PaidMODAYYEARMEAD PARK ASSOC.MODAYYEAR				
Mailing Address C/O MEMORY LANE P.O. BOX 244 9 19 2010 \$	50.00			
City CORRY State Zip Code (Plus 4) Description of Expenditure				
PA 16407 DONATION				
To Whom PaidMODAYYEARHOUSE REPUBLICAN CAMPAIGN COMMITTEEMODAYYEAR				
Mailing Address500 NORTH THIRD ST. 4TH FLOOR9282010\$	190.80			
City HARRISBURG State Zip Code (Plus 4) Description of Expenditure				
PA 17101 MUGS				
To Whom Paid WAL-MARTMODAYYEAR				
Mailing Address10122010\$	25.91			
City CORRY State Zip Code (Plus 4) Description of Expenditure				
PA 16407 SUPPLIES-PAPER/PRINT CRTDG.				
To Whom Paid CURT SONNEY - REIMBURSMENTMODAYYEAR				
Mailing Address10122010\$	469.16			
City State Zip Code (Plus 4) Description of Expenditure				
	FUNDRAISER BRKFAST/PARADE CANDY			
	PAGE TOTAL			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. \$	955.77			