### **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	20052	294			Rep File			CA	NDII	DATE		COMN	1ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	ommittee	, Candida	ite or Lo	obbyist:		SINI	TOV	T, JO	SEPH	COI	м то в	ELEC	Ť						-
Street Address:	РОВ	OX 3805																	
City:	ERIE								State	e:	PA			Zip Cod	l <b>e:</b> 16	508			
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	AY PRE	- 5	5.	30 DA		Р	OST-	6. <b>X</b>		TERMINA REPORT?		Yes	N	)	<b>√</b>
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2010					NG ME CHEC					PAPER		<b>\</b>	DISK	TTE	
Name of Office S	ought by	Candidat	e:	_					DAT	E O	F ELE	CTIC	N	District Number	Office Code	Pa	rty Code	Cour	
									МО		DAY	YI	EAR					25	
										11		2	2010		(SEE INS	TRUCT	ONS FOR	CODES	)
Summary of		and	МО	DAY	YEAR	1			МО		DAY	Y	EAR	FO	R OFFIC	E USI	ONLY		
Expenditures	trom:			1 1	. 2	010	Т	0		11	7	22	2010						
A. Amount Bro	ught Forw	ard From	Last R	eport				\$				55,	318.11						
B. Total Moneta	ary Contri	butions A	and Rec	eipts (Fron	n Sche	dule	I)	\$					0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				55,	318.11						
D. Total Expend	ditures (F	rom Sche	dule II	I)				\$				1,6	546.92						
E. Ending Cash	Balance (	Subtract	Line D	From Line	C)			\$				53,6	571.19						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le II	)	\$					0.00						
G. Unpaid Debt	s And Obl	igations	(From S	Schedule I\	/)			\$					0.00						
					AFF	IDA	VI	ΓSE	CTIC	N									
PART I - If this is		-	•								•		_						
I swear (or affirm) correct and comple		eport, inclu	uding the	e attached sc	hedules	s filed	l on	paper	or by e	electr	onic m	edium	ı, are to t	he best of	my knov	vledge	and bel	ief , tr	ue.
Sworn to and subs	cribed befo day of	re me this		20								5	Signature	of Persor	Submitt	ing Re	port		_
		Signatur	e					<b>-</b>						Print	ed Name				-
My Commission Ex	pires	0.9	-							-				Emai	ı				-
	1	10	D/	AY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	ımber		
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	e, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge and bel	ief this	polit	ical	comm	ittee h	as no	ot viola	ted ar	ny provisi	ons of the	act of Ju	ine 3,1	.937 (P.	L. 133	3,
Sworn to and subsc		e me this											Si	gnature o	f Candida	ite			-
	day of ——							-						Printe	d Name				-
	S	ignature						-											_
My Commission Exp	ires													Emai	I				
	_	мо	D	AY	YR			•			Area	Code		Da	ytime Te	elepho	ne Numi	er	<sup>-</sup>

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
SINNOTT, JOSEPH COM TO ELECT	From:	1/1/201	<u>0</u> To:	11/22/2010
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	) 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

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
						То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	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 of	or Candidate		Rep Fro	oorting P	eriod	To	):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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			
			Fron	n:		To	<b>)</b> :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	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 Car	ıdidate		Report	ting Perio	od		
			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 I. Detailed	d Summary Page.	Section	4.			PAGE TOTAL
	20112111112 IJ Dotaine		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	I	
SINNOTT, JOSEPH COM TO ELECT	From:	<u>1/1/2010</u> <b>To:</b>	11/22/2010
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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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 Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Commi	ttee or Candidate			Reporti	ng Period				
SINNOTT, JOSEPH CO	M TO ELECT			From	<u>1/</u>	1/2010	То:	11/22/2010	
					DATE			AMOUNT	
To Whom Paid ROSEBUD FLOWER SH	IOP			МО	DAY	YEAR			
Mailing Address 66	0 E 10TH ST			10	20	2010	\$	114.43	
City ERIE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16503	<b>Descrip</b> ADVER	otion of Exp	penditure			
<b>To Whom Paid</b> GUISEPPE MEZZINI CI	VIC ASSOC.			МО	DAY	YEAR			
Mailing Address C/C	O ST PAULS CHUF	RCH 1617 WALNUT S	Т	10	20	2010	\$	95.00	
City ERIE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16502		Description of Expenditure ADVERTISING				
To Whom Paid ERIE COUNTY DEMOC	RATIC PARTY			МО	DAY	YEAR			
Mailing Address 900	O STATE ST STE 1	.01		10	21	2010	\$	60.00	
City ERIE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16501	<b>Descrip</b> ADVER	otion of Exp	penditure			
To Whom Paid FOSTERS ROSE OF SH	IARON			мо	DAY	YEAR			
Mailing Address 27	03 BUFFALO RD			10	22	2010	\$	355.10	
City ERIE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16510		otion of Exp	penditure			
<b>To Whom Paid</b> PARADE STREET COMI	MUNITY CTR			МО	DAY	YEAR			
Mailing Address 800	6 PARADE ST			10	26	2010	\$	500.00	
City ERIE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16503		otion of Exp TISING	penditure			

						PAGI	= 12
To Whom Paid DR GERTRUDE BARBER FOUNDATION			МО	DAY	YEAR		
Mailing Address 100 BARBER PLACE			10	26	2010	\$	50.00
City ERIE Sta	PA	<b>Zip Code (Plus 4)</b> 16507		tion of Exp S / DONAT			
To Whom Paid ERIE CLUB			МО	DAY	YEAR		
Mailing Address 524 PEACH ST			10	26	2010	\$	49.92
City ERIE Sta	PA	<b>Zip Code (Plus 4)</b> 16501		tion of Exp G EXPS	enditure		
To Whom Paid LECOM STUDENT SCHOLARSHIPS			МО	DAY	YEAR		
Mailing Address 1858 W GRANDVIEW BL	LVD		10	28	2010	\$	150.00
City ERIE Sta	PA	<b>Zip Code (Plus 4)</b> 16509	<b>Descrip</b> DONAT:	tion of Exp	enditure		
To Whom Paid EAST SIDE DEMOCRATIC WOMEN			МО	DAY	YEAR		
Mailing Address 900 STATE ST STE 101			11	3	2010	\$	25.00
City ERIE Sta	PA	<b>Zip Code (Plus 4)</b> 16501	<b>Descrip</b> TICKET	<b>tion of Exp</b>	enditure		
To Whom Paid EAST SIDE FEDERATION OF POLISH CLUBS	5		МО	DAY	YEAR		
					2010		
Mailing Address 331 EAST 12TH ST			11	8	2010	\$	75.00
City ERIE Sta	a <b>te</b> PA	<b>Zip Code (Plus 4)</b> 16503		tion of Exp		\$	75.00
City ERIE Sta			Descrip	tion of Exp		\$	75.00
City ERIE Sta			<b>Descrip</b> ADVER	tion of Exp FISING	enditure	\$	75.00 35.00

To Whom Paid ERIE CLUB			МО	DAY	YEAR		
Mailing Address 524 PEACH ST			11	19	2010	\$	28.32
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	16501	MEETING EXPS				
To Whom Paid SPECIALTY STEAK SERVICES			МО	DAY	YEAR		
Mailing Address 1717 EAST 12TH ST			11	22	2010	\$	60.48
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	16511	DONATION				
To Whom Paid C.A. CURTZE			МО	DAY	YEAR		
Mailing Address 1717 EAST 12TH ST			11	22	2010	\$	48.67
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure DONATION				
	PA	16511					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Enter Grand Total of Expen	iditures on Page 1, Re	eport Cover Page, Item D	•			\$	1,646.92