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 200	4106			Repo			CANDI	DATE		СОМ	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		SON	NEY	, CUF	RT COM	O ELE	СТ							
Street Address:																	
City:	ERIE -							State:	PA			Zip Cod	ie: 16	5511			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY I PRIMARY	PRE-	2.		30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.		30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPOR	T 7. X	Year 2010					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candid	ate:			_			DATE 0	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YI	AR		STH	REP		25	
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY					11		2	2010		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY Y	EAR				МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	20	010	T	0	12	:	31	2010						
A. Amount Bro	ught Forward Fro	om Last R	eport				\$			4,3	393.81						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	ched	dule 1	[)	\$				0.00						
C. Total Funds	Available (Sum (Of Lines A	and B)				\$			4,3	393.81						
D. Total Expend	ditures (From Sc	hedule II	I)				\$			3	313.90						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$			4,0	79.91]					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Scho	edul	e II)		\$				0.00						
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$				0.00						
			A	\FF	IDA	VI٦	ΓSE	CTION									
PART I - If this is	s a Committee re	port, trea	surer sign he	re. I	f this	is	a Can	ididate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sched	lules	filed	on p	oaper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe.
Sworn to and subs	cribed before me the day of	iis	20							5	ignature	of Perso	n Submit	ting Rep	ort		
	Signa	ure					· -					Prin	ted Name	e			
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized Co	mm	ittee	, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and belief	this	politic	cal	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	. 1333	s,
Sworn to and subsc		s									s	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature	<u> </u>					•					Ema					_
My Commission Exp	oires											Ema					
	МО	D	AY	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		
SONNEY, CURT COM TO ELECT	From:	1/1/201	<u>0</u> To:	12/31/2010
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	J 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

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 Candid	ate	1	Reporting	Period			
		1	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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)

(Exclus	de contributions no	in pontical comm	itte	es rep	or teu	ili Pait	~)	
Name of Filing Committee	e or Candidate		Rep	orting P	eriod			
			Fro	m:		To) :	
		•			DATE			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 Schedule I, Detailed Summary Page, Section 2.

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		P	AMOUNT
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 Schee	dule 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			
			Fro	m:		To) :	
				D	ATE		AI	MOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Pl	ıs 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ice of Business	City		•	State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Pag	e, Secti	on 3.			P.	O.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	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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>1/1/2010</u> To:	12/31/2010
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	TF)		
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		Reportin	g Period				
			From:			To:	
		•		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address	_					7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•	-	•	•		•	
Enter Grand Total of Part F on S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

		I					
Name of Filing Committee or Candidate			Reportir	ng Period			
SONNEY, CURT COM TO ELECT			From	1/2	1/2010	То:	12/31/2010
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
THE POSTMASTER			М	DA.	ILAK		
Mailing Address			11	26	2010	\$	4.90
City HARBOR CREEK	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure		
	PA	16407	POSTAG	E TO HAR	RISBURG	- REPORT	ī -
To Whom Paid							
			MO	DAY	VEAR		
JAN GURDAK - NOTARY			МО	DAY	YEAR		
JAN GURDAK - NOTARY Mailing Address			MO 11	DAY 22	YEAR 2010	\$	10.00
	State	Zip Code (Plus 4)	11		2010	, \$	10.00
Mailing Address	State PA	Zip Code (Plus 4) 16407	11	22	2010	\$	10.00
Mailing Address		' ' '	11 Descript NOTARY	22 tion of Exp	2010 enditure	\$	10.00
Mailing Address City CORRY		' ' '	11 Descript	22	2010	\$	10.00
Mailing Address City CORRY To Whom Paid		' ' '	11 Descript NOTARY	22 tion of Exp	2010 enditure	\$	299.00
Mailing Address City CORRY To Whom Paid CREATIVE SAFETY PRODUCTS		' ' '	11 Descript NOTARY MO 12	22 cion of Exper	2010 enditure YEAR 2010		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

313.90