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	04106				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBE	SYIST		
Name of Filing C	Committee, Cand	idate or L	obbyist:		SON	NE	, CUF	RT COM T	O ELE	СТ							_
Street Address:	7783 EAST	LAKE RD															
City:	ERIE							State:	PA			Zip Cod	ie: 16	5511			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	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	ГТЕ	
Name of Office S	- Sought by Candid	late:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
DEDDE 051/T1T			EMBLY.					мо	DAY	YE	AR		STH	REP	'	25	_
REPRESENTATI	VE IN THE GEN	ERAL ASS	EMBLY					11		2	2010	(SEE IN	STRUCTIO	ONS FOR C	ODES)	_	
	Receipts and	МО	DAY Y	/EAR	1		'	МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	20	010	Т	0	12	,	31	2010						_
A. Amount Bro	ught Forward Fr	om Last R	eport				\$			4,3	393.81						
B. Total Moneta	ary Contribution	s And Rec	eipts (From S	Sche	dule	ı)	\$			0.00							
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			4,3	393.81						
D. Total Expend	ditures (From So	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 Sch	edul	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$				0.00						
			,	AFF	IDA	٩VI	T SE	CTION									ı
PART I - If this is	s a Committee re	port, trea	surer sign he	ere. 1	[f thi	is is	a Can	didate re	eport, c	andi	date sig	ın here.					ı
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sche	dules	filed	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	f , true	
Sworn to and subs	cribed before me t day of	nis	20							S	Signature	of Perso	n Submit	ting Rep	ort		
	Signa	ture					-					Prin	ted Name	e			
My Commission Ex	cpires						_					Ema	il				ı
	МО	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		J
Part II- If this is	a report of a ca	ndidate's	authorized C	omm	nitte	e, C	andida	ate shall	sign he	ere.]
I swear (or affirm) No 320) as amende		f my knowl	edge and belief	this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	l
Sworn to and subsc		is									s	ignature o	of Candid	ate			
	day of						-					Printe	d Name				
	Signatur	e					-						:1				
My Commission Exp	ires											Ema					
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	_			
Name of Filing Committee or Candidate	Reporting	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) Period	(4)	\$	0.00
			I	
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

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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.

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 or Candi	date		Rep Fro	oorting P m:	eriod	To	o:		
					DATE		ı	AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0	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 Can	didate			Rep	orting Pe	riod			
				Froi	m:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	,			Occupa	tion	•	•	
Employer Mailing Address/Princi Business	pal Place of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C o	n Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
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. Detailed	l Summary Page.	Section	4.			P	AGE TOTAL
	2, 2000		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	
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	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						\$	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	Period				
					Fro	om:		То	:		
					•		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•					Occupa	ation				
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Desc	cript	ion of	f Contribution
Enter Grand Total of Part G on Sci Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed					PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period			
SONNEY, CURT COM TO ELECT	Г		From	1/2	1/2010	То:	12/31/2010
		1		DATE			AMOUNT
To Whom Paid THE POSTMASTER			мо	DAY	YEAR		
Mailing Address			11	26	2010	\$	4.90
City HARBOR CREEK	State PA	Zip Code (Plus 4) 16407	1	L otion of Exp GE TO HAR			RT -
To Whom Paid JAN GURDAK - NOTARY			МО	DAY	YEAR		
Mailing Address			11	22	2010	\$	10.00
City CORRY	State PA	Zip Code (Plus 4) 16407	Descrip NOTAR	otion of Exp	penditure		
To Whom Paid CREATIVE SAFETY PRODUCTS			МО	DAY	YEAR		
Mailing Address 559 TRUMB	ULL DRIVE		12	9	2010	\$	299.00
City PITTSBURGH State Zip Code (Plus 4) PA 15205			1	otion of Exp			ROGRAM
	<u> </u>	<u> </u>					PAGE TOTAL

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

313.90