

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
MARINO FOR CONGRESS

ADDRESS (number and street) PO BOX 653
 Check if different than previously reported. (ACC) WILLIAMSPORT PA 17703

2. **FEC IDENTIFICATION NUMBER** C C00475145 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
PA 10

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 04 / 24 / 2012 in the State of PA
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 04 / 24 / 2012 in the State of PA

5. Covering Period 01 / 01 / 2012 through 04 / 04 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John D. Moran Jr.
Signature of Treasurer John D. Moran Jr. *[Electronically Filed]* Date 04 / 12 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
MARINO FOR CONGRESS

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	158670.00	536428.57
(b) Total Contribution Refunds (from Line 20(d))	2500.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	156170.00	533928.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	60040.61	268302.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2969.34
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	60040.61	265333.37
8. Cash on Hand at Close of Reporting Period (from Line 27).....	290741.13	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	32587.27	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

MARINO FOR CONGRESS

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	83235.00	224303.50
(ii) Unitemized.....	12935.00	31382.22
(iii) TOTAL of contributions from individuals ▶	96170.00	255685.72
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	62500.00	280742.85
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	158670.00	536428.57
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	5073.47
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	2969.34
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	158670.00	544471.38

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	60040.61	268302.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	614.50
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	614.50
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2500.00	2500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2500.00	2500.00
21. OTHER DISBURSEMENTS	170.00	1606.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	62710.61	273023.21

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	194781.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	158670.00
25. SUBTOTAL (add Line 23 and Line 24).....	353451.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	62710.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	290741.13

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Angela L Alexander

Mailing Address 125 Allendale Drive

City Montoursville State PA Zip Code 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.12031

Amount of Each Receipt this Period
 Contribution 2500.00

B. Full Name (Last, First, Middle Initial)
Blaise Alexander

Mailing Address 10 Alexander Drive

City Montoursville State PA Zip Code 17753

FEC ID number of contributing federal political committee. **C**

Name of Employer Alexander Dealerships Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2012

Transaction ID : SA11AI.11841

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
Blaise Alexander

Mailing Address 10 Alexander Drive

City Montoursville State PA Zip Code 17753

FEC ID number of contributing federal political committee. **C**

Name of Employer Alexander Dealerships Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2012

Transaction ID : SA11AI.11871

Amount of Each Receipt this Period
 Contribution 2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lawrence S. Allison

Mailing Address 30 Woodside Drive

City Montoursville State PA Zip Code 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer Allison Crane & Rigging Occupation Contractor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11AI.11929

Amount of Each Receipt this Period
 2500.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Donald W Arthur Jr.

Mailing Address 47Davinci Court

City Williamsville State NY Zip Code 14221

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11AI.11739

Amount of Each Receipt this Period
 250.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Ajay Barthwel

Mailing Address 175 Deerfield Road

City Morganville State NJ Zip Code 07751

FEC ID number of contributing federal political committee. **C**

Name of Employer Old Bridge Drugs & Surgicals Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2012

Transaction ID : SA11AI.11428

Amount of Each Receipt this Period
 250.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Belenko

Mailing Address 151 Gold View Drive

City Lewisburg State PA Zip Code 17837

FEC ID number of contributing federal political committee. **C**

Name of Employer Williamsport Pathology Associa Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11AI.11897

Amount of Each Receipt this Period
100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Matthew Berger Dr.

Mailing Address 44 Reynolds Street

City Kingston State PA Zip Code 18704

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Psychiatrist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2012

Transaction ID : SA11AI.11705

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Brian J Bolus

Mailing Address 330 Furnace Road

City Lewisburg State PA Zip Code 17837

FEC ID number of contributing federal political committee. **C**

Name of Employer Minuteman Enviromental Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.12036

Amount of Each Receipt this Period
2500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Karen T Bolus

Mailing Address 229 Furnace Road

City Lewisburg State PA Zip Code 17837

FEC ID number of contributing federal political committee. **C**

Name of Employer Lewisburg Plastic Surgery Occupation RN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.12034

Amount of Each Receipt this Period
 Contribution 1500.00

B. Full Name (Last, First, Middle Initial)
William G Bracey

Mailing Address RR 6, Box 6220

City Moscow State PA Zip Code 18444

FEC ID number of contributing federal political committee. **C**

Name of Employer Bracey's Supermarkets Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2012

Transaction ID : SA11AI.11361

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
William G Bracey

Mailing Address RR 6, Box 6220

City Moscow State PA Zip Code 18444

FEC ID number of contributing federal political committee. **C**

Name of Employer Bracey's Supermarkets Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2012

Transaction ID : SA11AI.11638

Amount of Each Receipt this Period
 Contribution 2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Thomas A Bradley		Date of Receipt M M / D D / Y Y Y Y 03 / 04 / 2012	
Mailing Address 156 Hemlock Lane		Transaction ID : SA11AI.11503	
City Elysburg	State PA	Zip Code 17824	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250.00	
Name of Employer The Medicene Shoppe	Occupation Pharmacist		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 350.00		

Full Name (Last, First, Middle Initial) B. David Brojack		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2012	
Mailing Address 350 Commerce Drive		Transaction ID : SA11AI.11830	
City Scott Township	State PA	Zip Code 18447	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 1000.00	
Name of Employer Brojack Lumber Co	Occupation President		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 1000.00		

Full Name (Last, First, Middle Initial) C. William W Brooks III		Date of Receipt M M / D D / Y Y Y Y 04 / 03 / 2012	
Mailing Address 2428 Kellyburg Road		Transaction ID : SA11AI.12041	
City Trout Run	State PA	Zip Code 17771	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250.00	
Name of Employer Logs and Lumber	Occupation Self-Employed		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 800.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	[]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Timothy R Burns		Date of Receipt M M / D D / Y Y Y Y 01 / 26 / 2012	
Mailing Address 575 Brownlee Road		Transaction ID : SA11A1.11373	
City Eighty Four	State PA	Zip Code 15330	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Consultant		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Edmund J. Carr		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2012	
Mailing Address 1949 Newton Ransom Blvd		Transaction ID : SA11A1.11852	
City Clarks Summit	State PA	Zip Code 18411	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Scranton Label Inc.	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) C. Michael J Casale Jr.		Date of Receipt M M / D D / Y Y Y Y 04 / 03 / 2012	
Mailing Address 1500 Sycamore Road		Transaction ID : SA11A1.12040	
City Montoursville	State PA	Zip Code 17754	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Law Office of Casale & Bonner	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 675.00		

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ronald Cimini

Mailing Address 1120 Avalon Parkway

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Tory Leather Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.12050

Amount of Each Receipt this Period
 100.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Albert A. Clapps

Mailing Address 880 Grammer Road

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Real Estate Developer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2012

Transaction ID : SA11AI.11844

Amount of Each Receipt this Period
 1250.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Jane E. Clapps

Mailing Address 880 Grammer Road

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2012

Transaction ID : SA11AI.11845

Amount of Each Receipt this Period
 1250.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Myron M. Cowher

Mailing Address RR 1, Box 1183

City State Zip Code
Dingsman Ferry PA 18328

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Truck Driver

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 07 / 2012

Transaction ID : SA11AI.11359

Amount of Each Receipt this Period
250.00
Contribution

B. Full Name (Last, First, Middle Initial)
Buddy Crockett

Mailing Address 918 Lockhart Street

City State Zip Code
Sayre PA 18840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 21 / 2012

Transaction ID : SA11AI.11507

Amount of Each Receipt this Period
1000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Carmen A DiCello

Mailing Address 1819 Mahantongo Street

City State Zip Code
Pottsville PA 17901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DiCello & Associates Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2012

Transaction ID : SA11AI.11754

Amount of Each Receipt this Period
500.00
Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kayastha B Dinesh

Mailing Address 97-47 83rd Street

City State Zip Code
Ozone Park NY 11416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
APKG Pharmacy Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 21 / 2012

Transaction ID : SA11AI.11516

Amount of Each Receipt this Period
250.00
Contribution

B. Full Name (Last, First, Middle Initial)
Kenneth M. DiRocco

Mailing Address 316 Jordan Avenue

City State Zip Code
Montoursville PA 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Impact Advertising Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11AI.11928

Amount of Each Receipt this Period
1000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Henry C Dunn

Mailing Address 317 Main Street

City State Zip Code
Towanda PA 18848

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Henry Dunn, Inc. President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11AI.11893

Amount of Each Receipt this Period
2500.00
Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Keith W Eckel

Mailing Address 1647 Falls Road

City Clarks Summit State PA Zip Code 18411

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2012

Transaction ID : SA11AI.11364

Amount of Each Receipt this Period
 2500.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Brent M Fish

Mailing Address 1800 Campbell Street

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Fish Real Estate, Inc. Occupation Realtor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.12046

Amount of Each Receipt this Period
 2500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Jean Payne Flack

Mailing Address RR 3, Box 261 A

City Dallas State PA Zip Code 18612

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11AI.11874

Amount of Each Receipt this Period
 2500.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jean Payne Flack		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2012
Mailing Address RR 3, Box 261 A		Transaction ID : SA11AI.11934
City Dallas	State PA	Zip Code 18612
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period Contribution 2500.00	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) B. Eileen M Frankil		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2012
Mailing Address 21 Miner Circle		Transaction ID : SA11AI.11784
City Collegeville	State PA	Zip Code 19426
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period Contribution 500.00	
Name of Employer Skippark & Sellersville Phar	Occupation Pharmacist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. James J. Gaudino		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 05 / 2012
Mailing Address 305 Sylbert Drive		Transaction ID : SA11AI.11641
City Kingston	State PA	Zip Code 18704
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period Contribution 1000.00	
Name of Employer Cooks Pharmacy	Occupation Pharmacist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephen L Giroux

Mailing Address 9034 Ridge Road

City Gasport State PA Zip Code 14067

FEC ID number of contributing federal political committee. **C**

Name of Employer Middleport Family Health Cente Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11AI.11743

Amount of Each Receipt this Period
 250.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Jagadeesh Gumella

Mailing Address 14 Sage Street

City Holmdel State NJ Zip Code 07733

FEC ID number of contributing federal political committee. **C**

Name of Employer Loisaída Drugs Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.11626

Amount of Each Receipt this Period
 250.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Beau L Haden

Mailing Address 28 Winding Brook Street

City Sumrall State MS Zip Code 30482

FEC ID number of contributing federal political committee. **C**

Name of Employer Sumrall Drug Store Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.11630

Amount of Each Receipt this Period
 250.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Davis C. Haire O.D.

Mailing Address RR 1 Box 2
Kenmar Drive

City Meshoppen State PA Zip Code 18630

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Optometrist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.12033

Amount of Each Receipt this Period
2250.00
Contribution

B. Full Name (Last, First, Middle Initial)
Davis C. Haire O.D.

Mailing Address RR 1 Box 2
Kenmar Drive

City Meshoppen State PA Zip Code 18630

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Optometrist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.12086

Amount of Each Receipt this Period
250.00
Contribution

C. Full Name (Last, First, Middle Initial)
Robert L. Hamaker

Mailing Address 612 W. Edwin Street

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Wire Rope Works Inc Occupation Scheduler

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11AI.11921

Amount of Each Receipt this Period
250.00
Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carol Iannielli

Mailing Address 307 Harper Street

City Dunmore State PA Zip Code 18512

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2012

Transaction ID : SA11AI.11799

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Marguerite E Jobst

Mailing Address 109 Beechwood Lane

City Greentown State PA Zip Code 18426

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.11684

Amount of Each Receipt this Period
 Contribution 200.00

C. Full Name (Last, First, Middle Initial)
Finny Joseph

Mailing Address 9000 Riverview Park Drive

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer Josefs Pharmacy Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.11564

Amount of Each Receipt this Period
 Contribution 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Karl A. Kail

Mailing Address RR 1, Box 135

City Montrose State PA Zip Code 18801

FEC ID number of contributing federal political committee. **C**

Name of Employer Royale Energy Occupation Director of Information Technology

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 28 / 2012

Transaction ID : SA11AI.12004

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
John Keegan

Mailing Address 475 S. Poplar Street

City Hazelton State PA Zip Code 18201

FEC ID number of contributing federal political committee. **C**

Name of Employer Heights Terrace Pharmacy Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11AI.12005

Amount of Each Receipt this Period
 Contribution 250.00

C. Full Name (Last, First, Middle Initial)
Frederick B. Keller

Mailing Address 37 Chrislynn Drive

City Middleburg State PA Zip Code 17842

FEC ID number of contributing federal political committee. **C**

Name of Employer Conestoga Wood Specialists Occupation Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 26 / 2012

Transaction ID : SA11AI.11372

Amount of Each Receipt this Period
 Contribution 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jerel Kerby

Mailing Address **PO Box 715**

City **Daingerfield** State **TX** Zip Code **75638**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Med-Care Pharmacy, Inc.** Occupation **Owner**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 21 / 2012

Transaction ID : SA11AI.11531

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Tracy Khalife

Mailing Address **77 Oakford Circle**

City **Clarks Summit** State **PA** Zip Code **18411**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Montrose Medical Arts Pharmacy** Occupation **Pharmacist**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2012

Transaction ID : SA11AI.11701

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Richard G King

Mailing Address **PO Box 134**

City **Bude** State **MS** Zip Code **39630**

FEC ID number of contributing federal political committee. **C**

Name of Employer **King's Discount Pharmacy** Occupation **Pharmacist**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 24 / 2012

Transaction ID : SA11AI.11560

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Bryan Kupchik

Mailing Address 280 Windsor Way

City Roaring Brook State PA Zip Code 18444

FEC ID number of contributing federal political committee. **C**

Name of Employer Capstone Wealth Management Occupation Self-Employed

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2012

Transaction ID : SA11AI.11938

Amount of Each Receipt this Period
250.00

In-kind - Catering and Venue Fee

B. Full Name (Last, First, Middle Initial)
Joseph P Lech

Mailing Address 13 Rockledge Lane

City Tunnhannock State PA Zip Code 18657

FEC ID number of contributing federal political committee. **C**

Name of Employer Lech's Pharmacy Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11AI.11745

Amount of Each Receipt this Period
1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Peter Levis

Mailing Address 40-18 209th Street

City Bayside State NY Zip Code 11361

FEC ID number of contributing federal political committee. **C**

Name of Employer Titan Pharmacy Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2012

Transaction ID : SA11AI.11604

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jerid Maddox

Mailing Address 1215 Mallard Cove

City Kennett State MO Zip Code 63857

FEC ID number of contributing federal political committee. **C**

Name of Employer Teko Pharmacy Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012

Transaction ID : SA11AI.11511

Amount of Each Receipt this Period
 Contribution 500.00

B. Full Name (Last, First, Middle Initial)
Robert F Malcolm

Mailing Address 15 Hemlock Road

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Auto Track Occupation General Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2012

Transaction ID : SA11AI.11356

Amount of Each Receipt this Period
 Contribution 200.00

C. Full Name (Last, First, Middle Initial)
Robert F Malcolm

Mailing Address 15 Hemlock Road

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Auto Track Occupation General Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2012

Transaction ID : SA11AI.11392

Amount of Each Receipt this Period
 Contribution 200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert F Malcolm

Mailing Address 15 Hemlock Road

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Auto Track Occupation General Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2012

Transaction ID : SA11AI.11710

Amount of Each Receipt this Period
200.00

Contribution

B. Full Name (Last, First, Middle Initial)
William P Manos

Mailing Address PO Box 308

City Montoursville State PA Zip Code 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer Fairfield Auto Group Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11AI.11887

Amount of Each Receipt this Period
1250.00

Contribution

C. Full Name (Last, First, Middle Initial)
William P Manos

Mailing Address PO Box 308

City Montoursville State PA Zip Code 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer Fairfield Auto Group Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **3750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11AI.11935

Amount of Each Receipt this Period
1250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Margaret McCoy

Mailing Address PO Box 594

City Lopez Island State WA Zip Code 98261

FEC ID number of contributing federal political committee. **C**

Name of Employer Lopez Island Pharmacy Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012

Transaction ID : SA11AI.11518

Amount of Each Receipt this Period
 _____ 250.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Jeffrey L McCracken

Mailing Address 175 Zimmer Lane

City Waynesburg State PA Zip Code 15370

FEC ID number of contributing federal political committee. **C**

Name of Employer McCracken Pharmacy Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2012

Transaction ID : SA11AI.12023

Amount of Each Receipt this Period
 _____ 500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Kenneth G. Miller

Mailing Address 207 Sugarbush Road

City Dalton State PA Zip Code 18414

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11AI.11877

Amount of Each Receipt this Period
 _____ 125.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 875.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. Scott Miskovsky

Mailing Address 8 Fourth Street

City State Zip Code
Forest City PA 18421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Red Cross Pharmacy Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 16 / 2012

Transaction ID : SA11AI.11747

Amount of Each Receipt this Period
Contribution 150.00

B. Full Name (Last, First, Middle Initial)
Lyle A Oakes

Mailing Address RR 5 Box 54A2

City State Zip Code
Montrose PA 18801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11AI.11911

Amount of Each Receipt this Period
Contribution 100.00

C. Full Name (Last, First, Middle Initial)
Mayur C Patel

Mailing Address 102 W. Main Street

City State Zip Code
Dalton PA 18414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dalton Pharmacy Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2012

Transaction ID : SA11AI.11422

Amount of Each Receipt this Period
Contribution 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mohammed Patel

Mailing Address 39 Victoria Road

City Staten Island State NY Zip Code 10312

FEC ID number of contributing federal political committee. **C**

Name of Employer Basasel Corporation Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2012

Transaction ID : SA11AI.11426

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Gary M Peck

Mailing Address 346 Dewald Lane

City Hughsville State PA Zip Code 17737

FEC ID number of contributing federal political committee. **C**

Name of Employer Ben Franklin Store Pharmacy Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.11632

Amount of Each Receipt this Period
 Contribution 250.00

C. Full Name (Last, First, Middle Initial)
Gary M Peck

Mailing Address 346 Dewald Lane

City Hughsville State PA Zip Code 17737

FEC ID number of contributing federal political committee. **C**

Name of Employer Ben Franklin Store Pharmacy Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.11672

Amount of Each Receipt this Period
 Contribution 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joseph Penzenstadler

Mailing Address 1819 Whippoorwill Lane

City State Zip Code
White Plains MD 20695

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Accokeek Drug and Health Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2012

Transaction ID : SA11AI.11424

Amount of Each Receipt this Period
 Contribution 500.00

B. Full Name (Last, First, Middle Initial)
Kenneth M Pollock

Mailing Address PO Box 810, 339 Highway 315

City State Zip Code
Pittston PA 18640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pollock Auto Group Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11AI.11898

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
Thomas J Popko

Mailing Address 5 Filbert Street

City State Zip Code
Berwick PA 18603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Medicene Shoppe Berwick Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11AI.11756

Amount of Each Receipt this Period
 Contribution 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Daria Prewett York

Mailing Address PO Box 55

City State Zip Code
Sturkie AR 72578

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Salem Drug Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 16 / 2012

Transaction ID : SA11AI.11774

Amount of Each Receipt this Period
500.00
Contribution

B. Full Name (Last, First, Middle Initial)
Eric M Pussy

Mailing Address 613 New Street

City State Zip Code
Olyphant PA 18447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Medicap Pharmacy Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2012

Transaction ID : SA11AI.11703

Amount of Each Receipt this Period
500.00
Contribution

C. Full Name (Last, First, Middle Initial)
Thomas M Quilan

Mailing Address PO Box 105

City State Zip Code
Lakeville PA 14480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Quinlan's Pharmacy Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 17 / 2012

Transaction ID : SA11AI.11782

Amount of Each Receipt this Period
250.00
Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rennel W Rodarmel

Mailing Address 1221 Windfield Drive

City State Zip Code
Williamsport PA 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Insurance Agent

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11AI.11890

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Diana L Rovenolt

Mailing Address PO Box 102

City State Zip Code
Trout Run PA 17771

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11AI.11908

Amount of Each Receipt this Period
110.00

Contribution

C. Full Name (Last, First, Middle Initial)
Giriaco Russo

Mailing Address 1 Rannaudo Street

City State Zip Code
Waterbury CT 06708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Nelson's Pharmacy Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2012

Transaction ID : SA11AI.11616

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

610.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carol A Savoy

Mailing Address PO Box 248

City Montoursville State PA Zip Code 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer John Savoy & Son Inc. Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11AI.11839

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
Carol A Savoy

Mailing Address PO Box 248

City Montoursville State PA Zip Code 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer John Savoy & Son Inc. Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11AI.11840

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
Robert Schultz

Mailing Address RR 2, Box 37

City Falls State PA Zip Code 18615

FEC ID number of contributing federal political committee. **C**

Name of Employer Capstone Wealth Management Occupation Self-Employed

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2012

Transaction ID : SA11AI.11936

Amount of Each Receipt this Period
 In-kind - Catering and Venue Fee 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 82
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Charles J. Scrobola

Mailing Address 638 Wyoming Avenue

City State Zip Code
Wyoming PA 18644

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.11673

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Lewis A Sebia

Mailing Address 410 North Main Street

City State Zip Code
Plains PA 18704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mericle Real Estate COO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 02 / 2012

Transaction ID : SA11AI.12015

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
William R Seitzinger

Mailing Address 299 Wyoming Avenue

City State Zip Code
Wyoming PA 18644

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Keystone Pharmacy Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2012

Transaction ID : SA11AI.11708

Amount of Each Receipt this Period
 Contribution 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rosemarie H. Sharp

Mailing Address 918 W. Lockhart Street

City Sayre State PA Zip Code 18840

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012

Transaction ID : SA11AI.11508

Amount of Each Receipt this Period
 Contribution **1000.00**

B. Full Name (Last, First, Middle Initial)
Donald L Sherwood

Mailing Address 41 Sherwood Lane

City Tunkhannock State PA Zip Code 18657

FEC ID number of contributing federal political committee. **C**

Name of Employer Sherwood Chevrolet Occupation Auto Dealer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2012

Transaction ID : SA11AI.11789

Amount of Each Receipt this Period
 Contribution **500.00**

C. Full Name (Last, First, Middle Initial)
Rodney D Smith

Mailing Address 343 N. Eaton Drive

City Lawrence State KS Zip Code 66949

FEC ID number of contributing federal political committee. **C**

Name of Employer Jim's Pharmacy Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2012

Transaction ID : SA11AI.11593

Amount of Each Receipt this Period
 Contribution **250.00**

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marvin Staiman		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2012	
Mailing Address 135 Grampain Blvd		Transaction ID : SA11AI.11856	
City Williamsport	State PA	Zip Code 17701	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period Contribution 100.00	
Name of Employer Staiman Brothers		Occupation Chairman	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 425.00	

Full Name (Last, First, Middle Initial) B. Richard Staiman		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2012	
Mailing Address 201 Hepburn Street		Transaction ID : SA11AI.11851	
City Williamsport	State PA	Zip Code 17754	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period Contribution 500.00	
Name of Employer Staiman Recycling Inc.		Occupation President	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) C. Shimon A Stein		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 21 / 2012	
Mailing Address 2500 Q Street NW		Transaction ID : SA11AI.11553	
City Washington	State DC	Zip Code 20007	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period Contribution 250.00	
Name of Employer Principal		Occupation Blank Rome Government Relations	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Todd J Stephens

Mailing Address 80 Kernwood Drive

City Honesdale State PA Zip Code 18431

FEC ID number of contributing federal political committee. **C**

Name of Employer Stephens Pharmacy Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11A1.11748

Amount of Each Receipt this Period
 Contribution 500.00

B. Full Name (Last, First, Middle Initial)
Wayne R Stephens

Mailing Address 183 Hickory Road

City Honesdale State PA Zip Code 18431

FEC ID number of contributing federal political committee. **C**

Name of Employer Stephen's Pharmacy Occupation Pharmacist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11A1.11749

Amount of Each Receipt this Period
 Contribution 500.00

C. Full Name (Last, First, Middle Initial)
Col Robert J. Suhosky

Mailing Address 120 Lakeview Heights

City Honesdale State PA Zip Code 18431

FEC ID number of contributing federal political committee. **C**

Name of Employer Route 6 Development Co Occupation Developer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2012

Transaction ID : SA11A1.11706

Amount of Each Receipt this Period
 Contribution 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mike D Tolley

Mailing Address 2294 US 70 Highway

City Swannonoa State NC Zip Code 28778

FEC ID number of contributing federal political committee. **C**

Name of Employer PSA Clinic Pharmacy Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.11573

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Henry A. Truslow

Mailing Address PO Box 768

City Sunbury State PA Zip Code 17801

FEC ID number of contributing federal political committee. **C**

Name of Employer Sunbury Textile Mills Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2012

Transaction ID : SA11AI.11833

Amount of Each Receipt this Period
 Contribution 2500.00

C. Full Name (Last, First, Middle Initial)
Leo P Vergnetti

Mailing Address 538 Spruce Street

City Scranton State PA Zip Code 18503

FEC ID number of contributing federal political committee. **C**

Name of Employer Clearbook Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2012

Transaction ID : SA11AI.11787

Amount of Each Receipt this Period
 Contribution 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Paul A. Wendolowski

Mailing Address 2116 Laurel Hill Road

City State Zip Code
Clarks Summit PA 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.11686

Amount of Each Receipt this Period
 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Thelma White

Mailing Address 154 Longreach Lane

City State Zip Code
Pennsdale PA 17756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2012

Transaction ID : SA11AI.12058

Amount of Each Receipt this Period
 200.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Edward R. Williams

Mailing Address 186 Golf Hill Road

City State Zip Code
Honesdale PA 18431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Metropolitan Aviation Group Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11AI.11834

Amount of Each Receipt this Period
 100.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. James T Wolyniec Jr		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 04 / 2012
Mailing Address 165 Caitlin Drive		Transaction ID : SA11AI.12061
City Cogan Station	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Wolyniec Construction	Occupation Owner	Contribution
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) B. James T Wolyniec Jr		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 04 / 2012
Mailing Address 165 Caitlin Drive		Transaction ID : SA11AI.12085
City Cogan Station	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Wolyniec Construction	Occupation Owner	Contribution
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) C. Arik Yershow		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 16 / 2012
Mailing Address 2070 Bath Avenue		Transaction ID : SA11AI.11770
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Paras Pharmacy	Occupation Pharmacist	Contribution
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	83235.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AKSM UROLOGY POLITICAL ACTION COMMITTEE 'AKSM UROLOGY PAC'

Mailing Address 100 WEST THIRD AVE SUITE 350

City State Zip Code
COLUMBUS OH 43201

FEC ID number of contributing federal political committee. **C** C00489419

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2012

Transaction ID : SA11C.11398

Amount of Each Receipt this Period
 Contribution 5000.00

B. Full Name (Last, First, Middle Initial)
ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 CONSTITUTION AVE NW
SUITE 400W

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2192.31

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11C.11490

Amount of Each Receipt this Period
 Contribution 2000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Avenue NW
Suite 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2012

Transaction ID : SA11C.11718

Amount of Each Receipt this Period
 Contribution 2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1884.61

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2012

Transaction ID : SA11C.11849

Amount of Each Receipt this Period
 Contribution 1500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 North Fairfax St.

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11C.11591

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

Mailing Address 11921 FREEDOM DRIVE SUITE 1100

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11C.11496

Amount of Each Receipt this Period
 Contribution 2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 208 S. Akard Street
Suite 3521

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11C.11906

Amount of Each Receipt this Period
 Contribution 3000.00

B. Full Name (Last, First, Middle Initial)
BINGHAM MCCUTCHEN LLP PAC

Mailing Address 2020 K STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00165621

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11C.11494

Amount of Each Receipt this Period
 Contribution 500.00

C. Full Name (Last, First, Middle Initial)
CHESAPEAKE ENERGY CORPORATION FED-PAC

Mailing Address PO BOX 18496

City OKLAHOMA CITY State OK Zip Code 73154

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2012

Transaction ID : SA11C.11611

Amount of Each Receipt this Period
 Contribution 2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHICKASAW NATION

Mailing Address 520 E. ARLINGTON

City ADA State OK Zip Code 74820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012

Transaction ID : SA11C.11504

Amount of Each Receipt this Period
 1250.00

Contribution- Indian Nation

B. Full Name (Last, First, Middle Initial)
Citizens for Rick Shoch

Mailing Address 102 Fairmount Avenue

City Sunbury State PA Zip Code 17801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2012

Transaction ID : SA11C.11376

Amount of Each Receipt this Period
 250.00

Non-Federal Contribution

C. Full Name (Last, First, Middle Initial)
DOMINION POLITICAL ACTION COMMITTEE

Mailing Address ONE JAMES RIVER PLAZA, 20TH FLOOR
 P.O. BOX 26666

City RICHMOND State VA Zip Code 23261

FEC ID number of contributing federal political committee. **C** C00108209

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11C.11492

Amount of Each Receipt this Period
 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : SA11C.11376

Permissable Funds under PA Campaign Finance Law

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EBAY INC-COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE

Mailing Address 228 S. Washington St.
Ste. 115

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012

Transaction ID : SA11C.11548

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 3699 WILSHIRE BLVD., #1290

City LOS ANGELES State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2012

Transaction ID : SA11C.11650

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL (ERICPAC)

Mailing Address 25 E MAIN STREET
SUITE 200

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2012

Transaction ID : SA11C.11613

Amount of Each Receipt this Period
 Contribution 5000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JIM SAXTON

Mailing Address **PO BOX 795**

City **MOUNT HOLLY** State **NJ** Zip Code **08060**

FEC ID number of contributing federal political committee. **C C00197699**

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2012

Transaction ID : SA11C.11727

Amount of Each Receipt this Period
 _____ 500.00

Contribution

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP)

Mailing Address **2941 Fairview Park Dr.
Suite 100**

City **Falls Church** State **VA** Zip Code **22042**

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 21 / 2012

Transaction ID : SA11C.11547

Amount of Each Receipt this Period
 _____ 1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
HUMANE SOCIETY LEGISLATIVE FUND

Mailing Address **519 C STREET NE**

City **WASHINGTON** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C90009358**

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 21 / 2012

Transaction ID : SA11C.11549

Amount of Each Receipt this Period
 _____ 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

A. Mailing Address 412 FIRST STREET, SE, SUITE 300

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11C.11498

Amount of Each Receipt this Period
 2000.00
 Contribution

Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

B. Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2012

Transaction ID : SA11C.11765

Amount of Each Receipt this Period
 5000.00
 Contribution

Full Name (Last, First, Middle Initial)
MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

C. Mailing Address 601 PENNSYLVANIA AVE., NW
NORTH BUILDING, SUITE 1200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2012

Transaction ID : SA11C.11721

Amount of Each Receipt this Period
 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36th Way
Box 97017

City Redmond State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2012

Transaction ID : SA11C.11651

Amount of Each Receipt this Period
 Contribution 1000.00

Amount of Each Receipt this Period
 Contribution 4000.00

B. Full Name (Last, First, Middle Initial)
MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE

Mailing Address 1600 EYE STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00139519

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11C.11900

Amount of Each Receipt this Period
 Contribution 2000.00

Amount of Each Receipt this Period
 Contribution 2000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2012

Transaction ID : SA11C.11696

Amount of Each Receipt this Period
 Contribution 1500.00

Amount of Each Receipt this Period
 Contribution 5000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2012

Transaction ID : SA11C.11697

Amount of Each Receipt this Period
 3500.00
 Contribution

B. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2012

Transaction ID : SA11C.11397

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
PPL PEOPLE FOR GOOD GOVERNMENT

Mailing Address Two North Ninth Street
GENTW2

City Allentown State PA Zip Code 18101

FEC ID number of contributing federal political committee. **C** C00228106

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 14000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11C.11842

Amount of Each Receipt this Period
 2000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 1301 K Street, NW
Suite 800W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11C.11491

Amount of Each Receipt this Period
2000.00
Contribution

B. Full Name (Last, First, Middle Initial)
SONY PICTURES ENTERTAINMENT, INC. PAC

Mailing Address 10202 W. WASHINGTON BLVD.

City CULVER CITY State CA Zip Code 90232

FEC ID number of contributing federal political committee. **C** C00282038

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11C.11904

Amount of Each Receipt this Period
2000.00
Contribution

C. Full Name (Last, First, Middle Initial)
TEXTRON INC. POLITICAL ACTION COMMITTEE

Mailing Address 40 WESTMINSTER STREET

City PROVIDENCE State RI Zip Code 02903

FEC ID number of contributing federal political committee. **C** C00123612

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11C.11902

Amount of Each Receipt this Period
1000.00
Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 12 / 2012

Transaction ID : SA11C.11725

Amount of Each Receipt this Period
Contribution 2000.00

B. Full Name (Last, First, Middle Initial)
TIME WARNER INC. PAC

Mailing Address 800 CONNECTICUT AVE., NW
SUITE 1200

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00339291**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11C.11903

Amount of Each Receipt this Period
Contribution 2000.00

C. Full Name (Last, First, Middle Initial)
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2012

Transaction ID : SA11C.11648

Amount of Each Receipt this Period
Contribution 2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2012

Transaction ID : SA11C.11731

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

62500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Astral Computing, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO Box 544		Amount of Each Disbursement this Period 8150.00 Transaction ID : SB17.11446
City Tarrytown	State NY	
Zip Code 10591	Purpose of Disbursement Web and Email Management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Astral Computing, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2012
Mailing Address PO Box 544		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.11822
City Tarrytown	State NY	
Zip Code 10591	Purpose of Disbursement Web and Email Management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Direct Mail System/Direct Response Marketing		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period 7950.00 Transaction ID : SB17.11455
City Clearwater	State FL	
Zip Code 33762	Purpose of Disbursement Direct Mail Fundaising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	8150.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Disalvo's		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 341 E 4th Street		Amount of Each Disbursement this Period 1468.11 Transaction ID : SB17.12065
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Fundraising Event - Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Fine Line Designs		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address 232 Poplar Avenue		Amount of Each Disbursement this Period 97.50 Transaction ID : SB17.11436
City New Cumberland	State PA	
Zip Code 17070	Purpose of Disbursement Administrative Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Fine Line Designs		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address 232 Poplar Avenue		Amount of Each Disbursement this Period 633.75 Transaction ID : SB17.11456
City New Cumberland	State PA	
Zip Code 17070	Purpose of Disbursement Administrative Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2199.36
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO Box 368		Amount of Each Disbursement this Period 4399.25
City Falls Church	State VA	
Zip Code 22040	Purpose of Disbursement See Memos	Transaction ID : SB17.11469
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO Box 368		Amount of Each Disbursement this Period 121.25
City Falls Church	State VA	
Zip Code 22040	Purpose of Disbursement Blast Faxes	Transaction ID : SB17.11469.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO Box 368		Amount of Each Disbursement this Period 3.00
City Falls Church	State VA	
Zip Code 22040	Purpose of Disbursement Parking Reimbursement	Transaction ID : SB17.11469.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4399.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO Box 368		Amount of Each Disbursement this Period 125.00
City Falls Church	State VA	
Zip Code 22040	Purpose of Disbursement Web Database Management	Transaction ID : SB17.11469.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO Box 368		Amount of Each Disbursement this Period 3150.00
City Falls Church	State VA	
Zip Code 22040	Purpose of Disbursement Fundraising Commissions	Transaction ID : SB17.11469.3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO Box 368		Amount of Each Disbursement this Period 1000.00
City Falls Church	State VA	
Zip Code 22040	Purpose of Disbursement Draw on Commissions Earned	Transaction ID : SB17.11469.4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hammond & Associates			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2012		
Mailing Address PO Box 368			Amount of Each Disbursement this Period 1378.75		
City Falls Church	State VA	Zip Code 22040	Transaction ID : SB17.12098		
Purpose of Disbursement See Memos		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Hammond & Associates			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2012		
Mailing Address PO Box 368			Amount of Each Disbursement this Period 251.25		
City Falls Church	State VA	Zip Code 22040	Transaction ID : SB17.12098.0		
Purpose of Disbursement Blast Faxes		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Hammond & Associates			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012		
Mailing Address PO Box 368			Amount of Each Disbursement this Period 2.50		
City Falls Church	State VA	Zip Code 22040	Transaction ID : SB17.12098.1		
Purpose of Disbursement Parking		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	1378.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012
Mailing Address PO Box 368		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.12098.2
City Falls Church	State VA	
Zip Code 22040	Purpose of Disbursement Web Based Database Management	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2012
Mailing Address PO Box 368		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.12098.3
City Falls Church	State VA	
Zip Code 22040	Purpose of Disbursement Draw on Commissions Earned	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hope Enterprises		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address 2401 Reach Road		Amount of Each Disbursement this Period 503.54 Transaction ID : SB17.11438
City Williamsport	State PA	
Zip Code 17703	Purpose of Disbursement Christmas Card Mailing	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	503.54
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JDM Consultants		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 601 Liberty Street		Amount of Each Disbursement this Period 14891.67 Transaction ID : SB17.11447
City Watson town	State PA	
Zip Code 17777	Purpose of Disbursement See Memos	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Direct Mail System/Direct Response Marketing		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period 1912.68 Transaction ID : SB17.11447.1 [MEMO ITEM]
City Clearwater	State FL	
Zip Code 33762	Purpose of Disbursement Direct Mail Fundraising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Data Papers		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 468 Industrial Park Road		Amount of Each Disbursement this Period 2012.45 Transaction ID : SB17.11447.2 [MEMO ITEM]
City Muncy	State PA	
Zip Code 17756	Purpose of Disbursement Fundraising Invitations	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	14891.67
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address Center City Finance Station		Amount of Each Disbursement this Period 326.30
City Williamsport	State PA	
Zip Code 17703	Purpose of Disbursement Postage	Transaction ID : SB17.11447.3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. JDM Consultants		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 601 Liberty Street		Amount of Each Disbursement this Period 10500.00
City Watson town	State PA	
Zip Code 17777	Purpose of Disbursement Qtrly Campaign Management Fee	Transaction ID : SB17.11447.4
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. JDM Consultants		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 601 Liberty Street		Amount of Each Disbursement this Period 40.24
City Watson town	State PA	
Zip Code 17777	Purpose of Disbursement Address Labels	Transaction ID : SB17.11447.5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JDM Consultants		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2012
Mailing Address 601 Liberty Street		Amount of Each Disbursement this Period 4052.07
City Watson town	State PA	
Zip Code 17777	Purpose of Disbursement See Memos	Transaction ID : SB17.11476
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2012
Mailing Address Center City Finance Station		Amount of Each Disbursement this Period 176.00
City Williamsport	State PA	
Zip Code 17703	Purpose of Disbursement Postage	Transaction ID : SB17.11476.0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2012
Mailing Address 1915 E. Third Street		Amount of Each Disbursement this Period 348.24
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Copies of Petitions	Transaction ID : SB17.11476.1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4052.07
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JDM Consultants		Date of Disbursement MM / DD / YYYY 02 / 19 / 2012
Mailing Address 601 Liberty Street		Amount of Each Disbursement this Period 3500.00
City Watsonstown	State PA	
Zip Code 17777	Purpose of Disbursement Campaign Management Fee	Transaction ID : SB17.11476.3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. JDM Consultants		Date of Disbursement MM / DD / YYYY 03 / 07 / 2012
Mailing Address 601 Liberty Street		Amount of Each Disbursement this Period 4246.48
City Watsonstown	State PA	
Zip Code 17777	Purpose of Disbursement See Memos	Transaction ID : SB17.11811
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. JDM Consultants		Date of Disbursement MM / DD / YYYY 03 / 07 / 2012
Mailing Address 601 Liberty Street		Amount of Each Disbursement this Period 3500.00
City Watsonstown	State PA	
Zip Code 17777	Purpose of Disbursement Campaign Management Fees	Transaction ID : SB17.11811.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4246.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Postmaster- Watsontown		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 316 Main Street		Amount of Each Disbursement this Period 0.00
City Watsontown	State PA	
Zip Code 17777	Purpose of Disbursement Postage	Transaction ID : SB17.11811.1 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. House of Representatives Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address B218 Longworth Bldg		Amount of Each Disbursement this Period 61.46
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement American Flags	Transaction ID : SB17.11811.2 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Holcomb Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address The Mattern Building 7406 Rt 487		Amount of Each Disbursement this Period 450.00
City Milford	State PA	
Zip Code 18632	Purpose of Disbursement Telephone Calls for Public to sign Petitions	Transaction ID : SB17.11811.4 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KBF Print Technology		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2012
Mailing Address PO Box 425		Amount of Each Disbursement this Period 1150.45
City Williamsport	State PA	
Zip Code 17703	Purpose of Disbursement Printing and Mailing of Petitions	Transaction ID : SB17.11459
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bryan Kupchik		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2012
Mailing Address 280 Windsor Way		Amount of Each Disbursement this Period 250.00
City Roaring Brook	State PA	
Zip Code 18444	Purpose of Disbursement In-kind - Catering and Venue Fee	Transaction ID : SB17.11940
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Long Nyquist Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 121 State Street		Amount of Each Disbursement this Period 5000.00
City Harrisburg	State PA	
Zip Code 17101	Purpose of Disbursement Campaign Management Fee	Transaction ID : SB17.11484
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6400.45
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Long Nyquist Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 121 State Street		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.11808
City Harrisburg	State PA Zip Code 17101	
Purpose of Disbursement Campaign Management Fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lycoming County Republican Committee - Non-Fed		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 166 Pine Crest Road		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.11482
City Jersey Shore	State PA Zip Code 17740	
Purpose of Disbursement Advertising in County Party Program	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THOMAS ANTHONY MARINO		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 358 KINLEY DRIVE		Amount of Each Disbursement this Period 31.15 Transaction ID : SB17.11942
City COGAN STATION	State PA Zip Code 17728	
Purpose of Disbursement Reimb for Lunch	Category/Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 10		

SUBTOTAL of Disbursements This Page (optional).....	5131.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. PayPal		M M / D D / Y Y Y Y 01 / 02 / 2012	
Mailing Address PO Box 45950		Amount of Each Disbursement this Period	
City Omaha	State NE	Zip Code 68145	30.00
Purpose of Disbursement Monthly Service Fee		Category/ Type	Transaction ID : SB17.11435
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. PayPal		M M / D D / Y Y Y Y 02 / 02 / 2012	
Mailing Address PO Box 45950		Amount of Each Disbursement this Period	
City Omaha	State NE	Zip Code 68145	30.00
Purpose of Disbursement Monthly Service Fee		Category/ Type	Transaction ID : SB17.11467
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. PayPal		M M / D D / Y Y Y Y 03 / 05 / 2012	
Mailing Address PO Box 45950		Amount of Each Disbursement this Period	
City Omaha	State NE	Zip Code 68145	30.00
Purpose of Disbursement Monthly Service Fee		Category/ Type	Transaction ID : SB17.11807
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. PayPal		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>16</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		16		2012
M M	/	D D	/	Y Y Y Y								
03		16		2012								
Mailing Address PO Box 45950		Amount of Each Disbursement this Period										
City Omaha	State NE Zip Code 68145											
Purpose of Disbursement Processing Fee	Category/Type	7.55										
Candidate Name		Transaction ID : SB17.12007										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. PayPal		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		28		2012
M M	/	D D	/	Y Y Y Y								
03		28		2012								
Mailing Address PO Box 45950		Amount of Each Disbursement this Period										
City Omaha	State NE Zip Code 68145											
Purpose of Disbursement Processing Fee	Category/Type	7.55										
Candidate Name		Transaction ID : SB17.12008										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. PayPal		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>01</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	04		01		2012
M M	/	D D	/	Y Y Y Y								
04		01		2012								
Mailing Address PO Box 45950		Amount of Each Disbursement this Period										
City Omaha	State NE Zip Code 68145											
Purpose of Disbursement Monthly Service Fee	Category/Type	30.00										
Candidate Name		Transaction ID : SB17.12010										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	45.10
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Schultz		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2012
Mailing Address RR 2, Box 37		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.11941
City Falls	State PA Zip Code 18615	
Purpose of Disbursement In-kind - Catering and Venue Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 116.76 Transaction ID : SB17.11437
City Columbus	State OH Zip Code 43218	
Purpose of Disbursement See Memos		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 726.00 Transaction ID : SB17.11437.0 [MEMO ITEM]
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising - Event Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	366.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Trattoria Alberto		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011
Mailing Address 506 Eighth Street, SE		Amount of Each Disbursement this Period 308.70
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraiser - Event Catering	Transaction ID : SB17.11437.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. COSI		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2011
Mailing Address 301 Pennsylvania Avenue, SE		Amount of Each Disbursement this Period 138.15
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Event Catering	Transaction ID : SB17.11437.3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2012
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 3260.00
City Columbus	State OH	
Zip Code 43218	Purpose of Disbursement See Memos	Transaction ID : SB17.11457
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3260.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 65.53
City Columbus	State OH Zip Code 43218	
Purpose of Disbursement Interest Charges	Candidate Name	Transaction ID : SB17.11457.1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 63.76
City Columbus	State OH Zip Code 43218	
Purpose of Disbursement Interest Charges	Candidate Name	Transaction ID : SB17.11457.4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. House of Representatives Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address B218 Longworth Bldg		Amount of Each Disbursement this Period 120.64
City Washington	State DC Zip Code 20515	
Purpose of Disbursement Appreciation Gifts	Candidate Name	Transaction ID : SB17.11457.6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2011
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 25.00
City Columbus	State OH Zip Code 43218	
Purpose of Disbursement Late Fees		Transaction ID : SB17.11457.7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address 50 Massachusetts Avenue NE		Amount of Each Disbursement this Period 266.00
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Travel - PA Society- Transportation		Transaction ID : SB17.11457.9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. W Hotel		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2011
Mailing Address 541 Lexington Avenue		Amount of Each Disbursement this Period 534.85
City New York	State NY Zip Code 10022	
Purpose of Disbursement Travel - Lodging		Transaction ID : SB17.11457.10
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. W Hotel		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2011
Mailing Address 541 Lexington Avenue		Amount of Each Disbursement this Period 267.43
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Travel - Lodging	Transaction ID : SB17.11457.11
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2012
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 95.59
City Columbus	State OH	
Zip Code 43218	Purpose of Disbursement Interest Charges	Transaction ID : SB17.11457.12
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 1915 E. Third Street		Amount of Each Disbursement this Period 48.82
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11457.13
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 180.11
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement State of the Union Guest Dinner	Transaction ID : SB17.11457.14
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address 1915 E. Third Street		Amount of Each Disbursement this Period 20.13
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Office Supplies	Transaction ID : SB17.11457.15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 137.59
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Meeting	Transaction ID : SB17.11457.17
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2012
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 595.11 Transaction ID : SB17.11466
City Columbus	State OH	
Purpose of Disbursement See Memos		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. The Liason Capitol Hill		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012
Mailing Address 415 New Jersey Ave, NW		Amount of Each Disbursement this Period 1221.22 Transaction ID : SB17.11466.0 [MEMO ITEM]
City Washington	State DC	
Purpose of Disbursement Fundraising Event - Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 1286.35 Transaction ID : SB17.12103
City Columbus	State OH	
Purpose of Disbursement Credit Card Payment - See Memos		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	1881.46
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Trattoria Alberto		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address 506 Eighth Street, SE		Amount of Each Disbursement this Period 495.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Event - Catering	Transaction ID : SB17.12103.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 45.83
City Columbus	State OH	
Zip Code 43218	Purpose of Disbursement Interest Charges	Transaction ID : SB17.12103.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Tortilla Coast		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address 400 First Street, SE		Amount of Each Disbursement this Period 331.43
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Event - Catering	Transaction ID : SB17.12103.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. House of Representatives Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address B218 Longworth Bldg		Amount of Each Disbursement this Period 113.03
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Door Prizes for Fundraising Event	Transaction ID : SB17.12103.3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2012
Mailing Address 1915 E. Third Street		Amount of Each Disbursement this Period 82.52
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Office Supplies	Transaction ID : SB17.12103.4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Sears Master Card		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 69.83
City Columbus	State OH	
Zip Code 43218	Purpose of Disbursement Credit Card Payment	Transaction ID : SB17.12064
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	69.83
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2012
Mailing Address 400 N. Capitol Street, NW		Amount of Each Disbursement this Period 194.40
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Fundraising Expense - Catering	Transaction ID : SB17.12064.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address Center City Finance Station		Amount of Each Disbursement this Period 70.00
City Williamsport	State PA	
Zip Code 17703	Purpose of Disbursement Annual PO Box Fee	Transaction ID : SB17.11439
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address Center City Finance Station		Amount of Each Disbursement this Period 18.95
City Williamsport	State PA	
Zip Code 17703	Purpose of Disbursement Postage	Transaction ID : SB17.11444
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	88.95
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 145.21 Transaction ID : SB17.11434
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cellular Telephone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2012
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 146.12 Transaction ID : SB17.11460
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cellular Telephone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2012
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 146.12 Transaction ID : SB17.11809
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cellular Telephone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	437.45
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Williamsport Crosscutters		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address PO Box 3173		Amount of Each Disbursement this Period 1760.00
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Deposit for Fundraising Events	Transaction ID : SB17.11483
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1760.00
TOTAL This Period (last page this line number only).....	59352.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 82			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Blaise Alexander		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 10 Alexander Drive		Amount of Each Disbursement this Period 2500.00
City Montoursville	State PA	
Zip Code 17753	Purpose of Disbursement Refund of Excess Funds	Transaction ID : SB20A.11872
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Astral Computing, Inc.		Nature of Debt (Purpose): Website Management
Mailing Address PO Box 544		
City	State	Zip Code
Tarrytown	NY	10591

Outstanding Balance Beginning This Period	Transaction ID : SD10.12078	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1215.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1215.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail System/Direct Response Marketing		Nature of Debt (Purpose): Direct Mail Fundraising
Mailing Address 12450 Automobile Blvd		
City	State	Zip Code
Clearwater	FL	33762

Outstanding Balance Beginning This Period	Transaction ID : SD10.12079	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="10308.17"/>	<input type="text" value="0.00"/>	<input type="text" value="10308.17"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press		Nature of Debt (Purpose): Fundraising Invitations and Postage
Mailing Address 10412 Main Street		
City	State	Zip Code
Fairfax	VA	22030

Outstanding Balance Beginning This Period	Transaction ID : SD10.12087	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2002.53"/>	<input type="text" value="0.00"/>	<input type="text" value="2002.53"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="13525.70"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 80 OF 82
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Executive Press	Nature of Debt (Purpose): Fundraising Mailing with Postage
Mailing Address 10412 Main Street	
City State Zip Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.12089	
Amount Incurred This Period 1429.45	Payment This Period 0.00	Outstanding Balance at Close of This Period 1429.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fine Line Designs	Nature of Debt (Purpose): Administrative Consulting
Mailing Address 232 Poplar Avenue	
City State Zip Code New Cumberland PA 17070	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.12084	
Amount Incurred This Period 650.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 650.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hammond & Associates	Nature of Debt (Purpose): Monthly Management Fees
Mailing Address PO Box 368	
City State Zip Code Falls Church VA 22040	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.12080	
Amount Incurred This Period 1207.65	Payment This Period 0.00	Outstanding Balance at Close of This Period 1207.65

1) SUBTOTALS This Period This Page (optional)	3287.10
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 81 OF 82
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor JDM Consultants	Nature of Debt (Purpose): Campaign Management Fees
Mailing Address 601 Liberty Street	
City State Zip Code Watsontown PA 17777	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.12081	
Amount Incurred This Period 3693.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 3693.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Long Nyquist Consulting	Nature of Debt (Purpose): Palm Card Handouts
Mailing Address 121 State Street	
City State Zip Code Harrisburg PA 17101	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.12077	
Amount Incurred This Period 2454.52	Payment This Period 0.00	Outstanding Balance at Close of This Period 2454.52

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Media Consultants, Inc.	Nature of Debt (Purpose): Media Consulting Fees
Mailing Address 81 Hawthorne Drive	
City State Zip Code Lewisburg PA 17837	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.12091	
Amount Incurred This Period 1360.44	Payment This Period 0.00	Outstanding Balance at Close of This Period 1360.44

1) SUBTOTALS This Period This Page (optional)	7508.71
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Robert H. Nelson		Nature of Debt (Purpose): Fundraising Consulting Fees and Expenses
Mailing Address 1829 Bay Street, SE		
City State	Zip Code	
Washington DC	20003	

Outstanding Balance Beginning This Period	Transaction ID : SD10.12082	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
8265.76	0.00	8265.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	8265.76
2) TOTALS This Period (last page this line number only)	32587.27
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	32587.27