

# 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 M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
01 / 01 / 2015 through 03 / 31 / 2015

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 Howard Rothenberg  
Signature of Treasurer Howard Rothenberg [Electronically Filed] Date M M / D D / Y Y Y Y  
04 / 15 / 2015

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))....	151462.54	160947.54
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	151462.54	160947.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	69307.34	153663.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	69307.34	153663.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	163664.69	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	1000.00	

**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:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	119400.00	121150.00
(ii) Unitemized.....	4052.54	6787.54
(iii) TOTAL of contributions from individuals ▶	123452.54	127937.54
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	28010.00	33010.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	151462.54	160947.54
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	151462.54	160947.54

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	69307.34	153663.49
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	2098.00	2288.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	71405.34	155951.49

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	83607.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	151462.54
25. SUBTOTAL (add Line 23 and Line 24).....	235070.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	71405.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	163664.69

**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 72
	<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)  
**Lawrence S. Allison**

Mailing Address 1706 Liberty Drive

City Williamsport State PA Zip Code 17701

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

Name of Employer Allison INC Occupation Contractor

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11AI.18666**

Amount of Each Receipt this Period  
 Contribution 1500.00

Election Cycle-to-Date  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Paul Archibald**

Mailing Address 397 Walker Road

City Wayne State PA Zip Code 19087

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

Name of Employer McCormick Taylor Occupation Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11AI.18354**

Amount of Each Receipt this Period  
 contribution 2000.00

Election Cycle-to-Date  
 2000.00

**C.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : SA11AI.18255**

Amount of Each Receipt this Period  
 contribution 2600.00

Election Cycle-to-Date  
 2600.00

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

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

6100.00

**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 72
	<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)  
**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : SA11AI.18648**

Amount of Each Receipt this Period  
 2600.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Susan C. Berger**

Mailing Address 44 Reynolds Street

City Kingston State PA Zip Code 18704

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

Name of Employer Offices of Matthew Berger Occupation Assistant Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : SA11AI.18256**

Amount of Each Receipt this Period  
 2600.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**Susan C. Berger**

Mailing Address 44 Reynolds Street

City Kingston State PA Zip Code 18704

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

Name of Employer Offices of Matthew Berger Occupation Assistant Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : SA11AI.18647**

Amount of Each Receipt this Period  
 2600.00  
 contribution

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

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

7800.00

**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 72
	<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)  
**Martha E. Bingaman**

Mailing Address PO Box 247

City State Zip Code  
Kreamer PA 17833

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 28 / 2015

**Transaction ID : SA11AI.18278**

Amount of Each Receipt this Period  
 2500.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Thomas R Blank**

Mailing Address 1600 North Oak Street

City State Zip Code  
Arlington VA 22209

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

Name of Employer Occupation  
Gephardt Govt Affairs Exe Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 21 / 2015

**Transaction ID : SA11AI.18218**

Amount of Each Receipt this Period  
 500.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**John A Blaschak**

Mailing Address 2816 Lincoln Drive

City State Zip Code  
Montoursville PA 17754

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

Name of Employer Occupation  
Fisher Mining Company Coal Operator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : SA11AI.18314**

Amount of Each Receipt this Period  
 2700.00  
 contribution

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

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

5700.00

**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 72
	<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**

Full Name (Last, First, Middle Initial) <b>A. David Brojack</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 09 / 2015	
Mailing Address 350 Commerce Drive		<b>Transaction ID : SA11AI.18283</b>	
City Scott Township	State PA	Zip Code 18447	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00 contribution	
Name of Employer Brojack Lumber Co	Occupation President		
Receipt For: 2016 <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) <b>B. William W Brooks III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2015	
Mailing Address 2428 Kellyburg Road		<b>Transaction ID : SA11AI.18315</b>	
City Trout Run	State PA	Zip Code 17771	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 contribution	
Name of Employer Logs and Lumber	Occupation Self-Employed		
Receipt For: 2016 <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>C. Gunther Carrle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015	
Mailing Address 101 East Park Road		<b>Transaction ID : SA11AI.18352</b>	
City Haverford	State PA	Zip Code 19083	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00 contribution	
Name of Employer Powell,Trachtman,Logan,Carrle	Occupation Partner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<b>TOTAL</b> 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 9 OF 72
	<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)  
**Michael Cavage**

Mailing Address 116 West 11th Street

City Honesdale State PA Zip Code 18431

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

Name of Employer Pioneer Construction Company Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11AI.18329**

Amount of Each Receipt this Period  
 1000.00  
 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015

**Transaction ID : SA11AI.18306**

Amount of Each Receipt this Period  
 2700.00  
 contribution

**C.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015

**Transaction ID : SA11AI.18653**

Amount of Each Receipt this Period  
 2700.00  
 contribution

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

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

6400.00

**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 10 OF 72
	<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**

Full Name (Last, First, Middle Initial) <b>A. Jane E. Clapps</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2015	
Mailing Address 880 Grammer Road		<b>Transaction ID : SA11AI.18307</b>	
City Williamsport	State PA	Zip Code 17701	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period contribution	
Name of Employer Homemaker		Occupation Homemaker	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date contribution	
		2700.00	

Full Name (Last, First, Middle Initial) <b>B. Jane E. Clapps</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2015	
Mailing Address 880 Grammer Road		<b>Transaction ID : SA11AI.18651</b>	
City Williamsport	State PA	Zip Code 17701	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period contribution	
Name of Employer Homemaker		Occupation Homemaker	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date contribution	
		2700.00	
		5400.00	

Full Name (Last, First, Middle Initial) <b>C. O. B. Crockett Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2015	
Mailing Address 918 West Lockhart Street		<b>Transaction ID : SA11AI.18342</b>	
City Sayre	State PA	Zip Code 18840	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period contribution	
Name of Employer Retired		Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date contribution	
		1000.00	
		1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6400.00
<b>TOTAL</b> This Period (last page this line number only).....	6400.00

**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 11 OF 72
	<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)  
**Christopher Cylke**

Mailing Address 3230 South 9th Street

City: Arlington State: VA Zip Code: 22204

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

Name of Employer: National Music Publishers Asso Occupation: Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 24 / 2015

**Transaction ID : SA11AI.18270**

Amount of Each Receipt this Period: 250.00 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Nicholas DeBenedictis**

Mailing Address 231 Golf View Road

City: Ardmore State: PA Zip Code: 19003

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

Name of Employer: Aqua America Occupation: President

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 09 / 2015

**Transaction ID : SA11AI.18235**

Amount of Each Receipt this Period: 1000.00 contribution

**C.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 20 / 2015

**Transaction ID : SA11AI.18313**

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 12 OF 72
	<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)  
**Elizabeth Frazee**

Mailing Address 6313 Evermay Drive

City State Zip Code  
McLean VA 22101

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

Name of Employer Occupation  
Twin Logic Strategies Government Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : SA11AI.18378**

Amount of Each Receipt this Period  
500.00  
contribution

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Robert Frederickson**

Mailing Address 266 Lincoln Avenue

City State Zip Code  
Williamsport PA 17701

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

Name of Employer Occupation  
Self Employed Dentist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

**Transaction ID : SA11AI.18308**

Amount of Each Receipt this Period  
250.00  
contribution

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Daniel Gandy**

Mailing Address 1660 Sycamore Road  
Suite C

City State Zip Code  
Montoursville PA 17754

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

Name of Employer Occupation  
West Branch Nephrology Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 20 / 2015

**Transaction ID : SA11AI.18253**

Amount of Each Receipt this Period  
2600.00  
contribution

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

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

3350.00

**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 72
	<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)  
**Dr. Daniel Gandy**

Mailing Address 1660 Sycamore Road  
Suite C

City Montoursville State PA Zip Code 17754

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

Name of Employer West Branch Nephrology Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2015

**Transaction ID : SA11AI.18646**

Amount of Each Receipt this Period  
 2600.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Martha Gandy**

Mailing Address 1155 Vallamont Drive NW

City Williamsport State PA Zip Code 17701

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2015

**Transaction ID : SA11AI.18254**

Amount of Each Receipt this Period  
 2600.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**Martha Gandy**

Mailing Address 1155 Vallamont Drive NW

City Williamsport State PA Zip Code 17701

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2015

**Transaction ID : SA11AI.18654**

Amount of Each Receipt this Period  
 2600.00  
 contribution

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

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

7800.00

**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 72
	<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)  
**William A. Graham IV**

Mailing Address 828 Conshohocken State Road

City State Zip Code  
Galdwyne PA 19035

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

Name of Employer Occupation  
The Graham Company Insurance Broker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11AI.18350**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Maria Paige Grossman**

Mailing Address 7546 Hampden Lane

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
American Contentental Group Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2015

**Transaction ID : SA11AI.18228**

Amount of Each Receipt this Period  
 500.00  
 contribution

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

Mailing Address 424 Kenmar Drive  
Kenmar Drive

City State Zip Code  
Meshoppen PA 18630

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

Name of Employer Occupation  
Self-Employed Optometrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : SA11AI.18292**

Amount of Each Receipt this Period  
 2700.00  
 contribution

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

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

4200.00

**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 72
	<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)  
**Frank M Henry**

Mailing Address 239 Old River Road

City: Wilkes Barre State: PW Zip Code: 18702

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

Name of Employer: Frank Martz Coach Company Occupation: Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 03 / 13 / 2015

**Transaction ID : SA11AI.18293**

Amount of Each Receipt this Period contribution: 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Frank M Henry**

Mailing Address 239 Old River Road

City: Wilkes Barre State: PW Zip Code: 18702

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

Name of Employer: Frank Martz Coach Company Occupation: Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 03 / 13 / 2015

**Transaction ID : SA11AI.18642**

Amount of Each Receipt this Period contribution: 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**George Hutchinson**

Mailing Address 1750 Hinaman Heights

City: Williamsport State: PA Zip Code: 17701

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

Name of Employer: Hutchinson Development Occupation: President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 30 / 2015

**Transaction ID : SA11AI.18665**

Amount of Each Receipt this Period Contribution: 500.00

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

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

5900.00

**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 16 OF 72
	<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)  
**Stephen Kaiser**

Mailing Address 1703 Pentridge Cove

City Williamsport State PA Zip Code 17701

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

Name of Employer Fairfield Chrysler Dodge Jeep Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : SA11AI.18338**

Amount of Each Receipt this Period  
 contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**John P Kameen**

Mailing Address 636 Main Street

City Forest City State PA Zip Code 18421

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

Name of Employer Forest City News, Inc. Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2015

**Transaction ID : SA11AI.18277**

Amount of Each Receipt this Period  
 contribution 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Brendan Kelsay**

Mailing Address 124 10th Street, NW

City Washington State DC Zip Code 20001

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

Name of Employer Clear Channel Occupation Government Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11AI.18374**

Amount of Each Receipt this Period  
 contribution 500.00

**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: (check only one)	PAGE 17 OF 72
	<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)  
**Frederick D. Kessler**

Mailing Address 43 Market Street

City Lewisburg State PA Zip Code 17837

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

Name of Employer Nottingham Village Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : SA11AI.18339**

Amount of Each Receipt this Period  
 contribution 500.00

**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2015

**Transaction ID : SA11AI.18282**

Amount of Each Receipt this Period  
 contribution 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Lorraine Manos**

Mailing Address 611 Carey Hill Road

City Montoursville State PA Zip Code 17754

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2015

**Transaction ID : SA11AI.18237**

Amount of Each Receipt this Period  
 contribution 2600.00

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

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

5700.00

**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 72
	<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)  
**Lorraine Manos**

Mailing Address 611 Carey Hill Road

City Montoursville State PA Zip Code 17754

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2015

**Transaction ID : SA11AI.18656**

Amount of Each Receipt this Period  
 2600.00  
 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2015

**Transaction ID : SA11AI.18236**

Amount of Each Receipt this Period  
 2600.00  
 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2015

**Transaction ID : SA11AI.18641**

Amount of Each Receipt this Period  
 2600.00  
 contribution

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

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

7800.00

**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 19 OF 72
	<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)  
**Danielle Maurer**

Mailing Address 5040 36th Street N

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Fierce Government Relations GOovernment Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11AI.18375**

Amount of Each Receipt this Period  
 500.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Dale L. Miller**

Mailing Address 225 Highfields Lane

City State Zip Code  
Lewisburg PA 17837

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

Name of Employer Occupation  
Playworld Systems CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : SA11AI.18318**

Amount of Each Receipt this Period  
 2600.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**Dale L. Miller**

Mailing Address 225 Highfields Lane

City State Zip Code  
Lewisburg PA 17837

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

Name of Employer Occupation  
Playworld Systems CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : SA11AI.18650**

Amount of Each Receipt this Period  
 2600.00  
 contribution

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

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

5700.00

**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 72
	<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)  
**Joan E. Miller**

Mailing Address 255 Highfields Lane

City Lewisburg State PA Zip Code 17837

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

Name of Employer Playworld Systems Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : SA11AI.18319**

Amount of Each Receipt this Period  
 2600.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Joan E. Miller**

Mailing Address 255 Highfields Lane

City Lewisburg State PA Zip Code 17837

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

Name of Employer Playworld Systems Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

**Transaction ID : SA11AI.18649**

Amount of Each Receipt this Period  
 5200.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**Neil Model**

Mailing Address 6 Dunham Lane

City Newtown State PA Zip Code 18940

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

Name of Employer CBIZ Model Consulting Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11AI.18346**

Amount of Each Receipt this Period  
 2700.00  
 contribution

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

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

7900.00

**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 72
	<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)  
**Neil Model**

Mailing Address 6 Dunham Lane

City State Zip Code  
Newtown PA 18940

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

Name of Employer Occupation  
CBIZ Model Consulting President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11AI.18663**

Amount of Each Receipt this Period  
 300.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Mary Mussare**

Mailing Address 493 Winthrop Street

City State Zip Code  
S. Williamsport PA 17702

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

Name of Employer Occupation  
Rainbow Carpet Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2015

**Transaction ID : SA11AI.18324**

Amount of Each Receipt this Period  
 250.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**Barry D Rhodes**

Mailing Address 6793 Father John Court

City State Zip Code  
McLean VA 22101

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

Name of Employer Occupation  
Cassidy & Associates Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2015

**Transaction ID : SA11AI.18225**

Amount of Each Receipt this Period  
 500.00  
 contribution

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

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

1050.00

**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 72
	<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**

Full Name (Last, First, Middle Initial) <b>A. Romano Romani</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 21 / 2015	
Mailing Address 11124 Arroyo Drive		<b>Transaction ID : SA11AI.18217</b>	
City Rockville	State MD	Zip Code 20852	Amount of Each Receipt this Period contribution 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Parry Romani Deconcini & Symms	Occupation President		
Receipt For: 2016 <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) <b>B. Carol A Savoy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 28 / 2015	
Mailing Address PO Box 248		<b>Transaction ID : SA11AI.18276</b>	
City Montoursville	State PA	Zip Code 17754	Amount of Each Receipt this Period contribution 2700.00
FEC ID number of contributing federal political committee. C			
Name of Employer John Savoy & Son Inc.	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>C. Carol A Savoy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 28 / 2015	
Mailing Address PO Box 248		<b>Transaction ID : SA11AI.18643</b>	
City Montoursville	State PA	Zip Code 17754	Amount of Each Receipt this Period contribution 2700.00
FEC ID number of contributing federal political committee. C			
Name of Employer John Savoy & Son Inc.	Occupation Owner		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5900.00
<b>TOTAL</b> This Period (last page this line number only).....	(Empty field)

**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 72
	<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)  
**Nelson Shaffer**

Mailing Address 1715 Hillcrest Lane

City: Aston State: PA Zip Code: 19014

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

Name of Employer: Pennoi Associates Occupation: Executive Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 27 / 2015

**Transaction ID : SA11AI.18348**

Amount of Each Receipt this Period: 1000.00  
contribution

**B.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 28 / 2015

**Transaction ID : SA11AI.18343**

Amount of Each Receipt this Period: 500.00  
contribution

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Shore**

Mailing Address 5904 North 22nd Street

City: Arlington State: VA Zip Code: 22205

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

Name of Employer: Jochum Shore & Trossevin PC Occupation: Law, Advocacy, Policy

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 24 / 2015

**Transaction ID : SA11AI.18263**

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: (check only one)	PAGE 24 OF 72
	<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)  
**Carol Sides**

Mailing Address 400 Upland Road

City Williamsport State PA Zip Code 17701

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

Name of Employer RM Sides Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : SA11AI.18377**

Amount of Each Receipt this Period  
 250.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
**Andrew J Sordoni III**

Mailing Address 45 Owen Street

City Forty Fort State PA Zip Code 18704

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

Name of Employer Sordoni Construction Services Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2015

**Transaction ID : SA11AI.18252**

Amount of Each Receipt this Period  
 1000.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
**Vicki S. Stea**

Mailing Address 192 Lamont Drive

City Cogan Station State PA Zip Code 17728

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

Name of Employer Susquehanna Health System Occupation Dietitian

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2015

**Transaction ID : SA11AI.18321**

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 25 OF 72
	<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)  
**Col Robert J. Suhosky**

Mailing Address 630 Park Street

City Honesdale State PA Zip Code 18431

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

Name of Employer Northeast Infrastructure LLC Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11AI.18251**

Amount of Each Receipt this Period  
 contribution **2600.00**

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

Mailing Address 630 Park Street

City Honesdale State PA Zip Code 18431

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

Name of Employer Northeast Infrastructure LLC Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11AI.18652**

Amount of Each Receipt this Period  
 contribution **2600.00**

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

Mailing Address 3 Bala Plaza

City Bala Cynwood State PA Zip Code 19004

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

Name of Employer Arbor Group Occupation Insurance Broker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : SA11AI.18379**

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

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

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

**6200.00**

**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 26 OF 72
	<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)  
**Warren Tryon**

Mailing Address 216 9th Street SE

City Washington State DC Zip Code 20003

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

Name of Employer RR & G Public Advocates Occupation Senior Policy Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 24 / 2015

**Transaction ID : SA11AI.18266**

Amount of Each Receipt this Period  
 contribution 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Catherine Wendolowski**

Mailing Address 2116 Laurel Hill Road

City Clarks Summit State PA Zip Code 18411

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2015

**Transaction ID : SA11AI.18296**

Amount of Each Receipt this Period  
 contribution 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Catherine Wendolowski**

Mailing Address 2116 Laurel Hill Road

City Clarks Summit State PA Zip Code 18411

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2015

**Transaction ID : SA11AI.18655**

Amount of Each Receipt this Period  
 contribution 2700.00

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

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

5650.00

**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 72
	<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)  
**Paul A. Wendolowski**

Mailing Address 2116 Laurel Hill Road

City Clarks Summit State PA Zip Code 17754

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015

**Transaction ID : SA11AI.18295**

Amount of Each Receipt this Period  
 2700.00  
 contribution

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

Mailing Address 2116 Laurel Hill Road

City Clarks Summit State PA Zip Code 17754

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015

**Transaction ID : SA11AI.18644**

Amount of Each Receipt this Period  
 2700.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**James T Wolyniec Jr**

Mailing Address 165 Caitlin Drive

City Cogan Station State PA Zip Code 17728

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

Name of Employer Wolyniec Construction Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : SA11AI.18331**

Amount of Each Receipt this Period  
 2700.00  
 contribution

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

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

8100.00

119400.00

**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 72
	<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	

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**

Full Name (Last, First, Middle Initial)  
ACTION COMMITTEE. FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

**A.** Mailing Address 4301 Wilson Boulevard

City State Zip Code  
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2015

**Transaction ID : SA11C.18289**

Amount of Each Receipt this Period  
 1000.00  
 contribuion

Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF GOVT. EMPL. POLITICAL ACTION COMMITTEE

**B.** Mailing Address 80 F STREET, NW

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00009936

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2015

**Transaction ID : SA11C.18242**

Amount of Each Receipt this Period  
 1000.00  
 contribution

Full Name (Last, First, Middle Initial)  
AMERICAN SCIENCE AND ENGINEERING INC PAC

**C.** Mailing Address 829 MIDDLESEX TURNPIKE

City State Zip Code  
BILLERICA MA 01821

FEC ID number of contributing federal political committee. **C** C00343020

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2015

**Transaction ID : SA11C.18221**

Amount of Each Receipt this Period  
 1000.00  
 contribution

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

3000.00

**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 29 OF 72
	<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	

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)  
AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 1300 MORRIS DRIVE  
SUITE 100

City CHESTERBROOK State PA Zip Code 19355

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2015

**Transaction ID : SA11C.18240**

Amount of Each Receipt this Period  
 2500.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
AQUA AMERICA, INC. H2O POLITICAL ACTION COMMITTEE

Mailing Address 762 West Lancaster Avenue

City Bryn Mawr State PA Zip Code 19010

FEC ID number of contributing federal political committee. **C** C00340455

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11C.18249**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
AQUA AMERICA, INC. H2O POLITICAL ACTION COMMITTEE

Mailing Address 762 West Lancaster Avenue

City Bryn Mawr State PA Zip Code 19010

FEC ID number of contributing federal political committee. **C** C00340455

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.18362**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**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 30 OF 72
	<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	

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)  
**CISCO SYSTEMS, INC. FEDERAL PAC, AKA CISCO SYSTEMS EPAC**

Mailing Address **400 CAPITOL MALL, STE 1545**  
 City **SACRAMENTO** State **CA** Zip Code **95814**

FEC ID number of contributing federal political committee. **C C00362707**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**  
**Transaction ID : SA11C.18364**

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

B. Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address **1701 JFK BLVD, 49TH FLOOR**  
 City **PHILADELPHIA** State **PA** Zip Code **19103**

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2015**  
**Transaction ID : SA11C.18361**

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

C. Full Name (Last, First, Middle Initial)  
**DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')**

Mailing Address **601 HAWAII STREET**  
 City **EL SEGUNDO** State **CA** Zip Code **90245**

FEC ID number of contributing federal political committee. **C C00340943**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**  
**Transaction ID : SA11C.18365**

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> 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 31 OF 72
	<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	

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)  
**DEMOCRACY RULES INC PAC**

Mailing Address 3014 EIGHTEENTH STREET

City SAN FRANCISCO State CA Zip Code 94110

FEC ID number of contributing federal political committee. **C C00395053**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2015

**Transaction ID : SA11C.18280**

Amount of Each Receipt this Period  
 10.00  
 contribution

**B.** 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: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2015

**Transaction ID : SA11C.18239**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**DRINKER BIDDLE POLITICAL ACTION COMMITTEE**

Mailing Address 1500 K STREET NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00370759**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

**Transaction ID : SA11C.18224**

Amount of Each Receipt this Period  
 1000.00  
 contribution

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

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

2010.00

**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 72
	<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	

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)  
**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: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2015

**Transaction ID : SA11C.18246**

Amount of Each Receipt this Period  
 1500.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105

FEC ID number of contributing federal political committee. **C** C00219642

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

**Transaction ID : SA11C.18222**

Amount of Each Receipt this Period  
 2000.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2015

**Transaction ID : SA11C.18238**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**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 33 OF 72
	<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	

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)  
**GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2015

**Transaction ID : SA11C.18247**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900W

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : SA11C.18664**

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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2015

**Transaction ID : SA11C.18223**

Amount of Each Receipt this Period  
 1000.00  
 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 34 OF 72
<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

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)  
**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.18366**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**INTEL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F STREET N.W. #1025

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2015

**Transaction ID : SA11C.18241**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 1550 Crystal Drive Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : SA11C.18248**

Amount of Each Receipt this Period  
 1000.00  
 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 35 OF 72
	<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	

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)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : SA11C.18668**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**NELSON MULLINS RILEY & SCARBOROUGH, LLP FEDERAL POLITICAL COMMITTEE**

Mailing Address 1320 MAIN STREET, 17TH FLOOR

City COLUMBIA	State SC	Zip Code 29201
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00278895

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2015

**Transaction ID : SA11C.18279**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 contribution

**C.** 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: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : SA11C.18363**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 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 36 OF 72
<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

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)  
**WEXLER & WALKER PAC (A UNIT OF HILL & KNOWLTON STRATEGIES LLC)**

Mailing Address 1317 F STREET NW  
SUITE 800

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00248195

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2015

**Transaction ID : SA11C.18287**

Amount of Each Receipt this Period  
contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**YAHOO! INC. POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE., NW  
SUITE 800 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00380535

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : SA11C.18326**

Amount of Each Receipt this Period  
contribution 1000.00

**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).....

2000.00

28010.00

**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 37 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Ryan Barton</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 4706.88 <b>Transaction ID : SB17.18420</b>
City Pittsburgh	State PA Zip Code 15236	
Purpose of Disbursement Campaign Management fee and expenses-see memos		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ryan Barton</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.18420.0</b> <b>[MEMO ITEM]</b>
City Pittsburgh	State PA Zip Code 15236	
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ryan Barton</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 2047.88 <b>Transaction ID : SB17.18420.1</b> <b>[MEMO ITEM]</b>
City Pittsburgh	State PA Zip Code 15236	
Purpose of Disbursement reimbursed mileage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4706.88
<b>TOTAL</b> 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 38 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Ryan Barton</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 8755.21
City Pittsburgh	State PA	
Zip Code 15236	Purpose of Disbursement cellular phone expenses	Transaction ID : SB17.18420.2 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ryan Barton</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 9.00
City Pittsburgh	State PA	
Zip Code 15236	Purpose of Disbursement parking reimbursement	Transaction ID : SB17.18420.3 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ryan Barton</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 8755.21
City Pittsburgh	State PA	
Zip Code 15236	Purpose of Disbursement Campaign management expenses-see memos	Transaction ID : SB17.18520
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8755.21
<b>TOTAL</b> 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 39 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Ryan Barton</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 2500.00
City Pittsburgh	State PA	
Zip Code 15236	Purpose of Disbursement Campaign management consulting	Transaction ID : SB17.18520.0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>B. Ryan Barton</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 2500.00
City Pittsburgh	State PA	
Zip Code 15236	Purpose of Disbursement Campaign management consulting	Transaction ID : SB17.18520.1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>c. Ryan Barton</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 3184.16
City Pittsburgh	State PA	
Zip Code 15236	Purpose of Disbursement mileage reimbursement	Transaction ID : SB17.18520.2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 40 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Ryan Barton</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.18520.3</b>
City Pittsburgh	State PA Zip Code 15236	
Purpose of Disbursement Cellular phone reimbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. Ryan Barton</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 4934 Parkvue Drive		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : SB17.18520.4</b>
City Pittsburgh	State PA Zip Code 15236	
Purpose of Disbursement Cellular phone reimbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2015
Mailing Address 1593 Spring Hill Road		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.18387</b>
City Tysons Corner	State VA Zip Code 22182	
Purpose of Disbursement Database management fee	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	800.00
<b>TOTAL</b> 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 41 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. <b>CMDI</b>		<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>02</td> <td></td> <td>12</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		12		2015
M M	/	D D	/	Y Y Y Y									
02		12		2015									
Mailing Address 1593 Spring Hill Road		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Tysons Corner</td> <td>VA</td> <td>22182</td> </tr> </table>		City	State	Zip Code	Tysons Corner	VA	22182	<table border="1"> <tr> <td>570.45</td> </tr> </table>		570.45			
City	State	Zip Code											
Tysons Corner	VA	22182											
570.45													
Purpose of Disbursement Database service fee		Transaction ID : SB17.18430											
Candidate Name		Category/Type											
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>		<input type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President	Disbursement For: 2016								
<input type="checkbox"/> House													
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. <b>CMDI</b>		<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>02</td> <td></td> <td>24</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		24		2015
M M	/	D D	/	Y Y Y Y									
02		24		2015									
Mailing Address 1593 Spring Hill Road		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Tysons Corner</td> <td>VA</td> <td>22182</td> </tr> </table>		City	State	Zip Code	Tysons Corner	VA	22182	<table border="1"> <tr> <td>800.00</td> </tr> </table>		800.00			
City	State	Zip Code											
Tysons Corner	VA	22182											
800.00													
Purpose of Disbursement Database management fee		Transaction ID : SB17.18432											
Candidate Name		Category/Type											
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>		<input type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President	Disbursement For: 2016								
<input type="checkbox"/> House													
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. <b>CMDI</b>		<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>02</td> <td></td> <td>26</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		26		2015
M M	/	D D	/	Y Y Y Y									
02		26		2015									
Mailing Address 1593 Spring Hill Road		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Tysons Corner</td> <td>VA</td> <td>22182</td> </tr> </table>		City	State	Zip Code	Tysons Corner	VA	22182	<table border="1"> <tr> <td>545.55</td> </tr> </table>		545.55			
City	State	Zip Code											
Tysons Corner	VA	22182											
545.55													
Purpose of Disbursement Database management fee		Transaction ID : SB17.18438											
Candidate Name		Category/Type											
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>		<input type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President	Disbursement For: 2016								
<input type="checkbox"/> House													
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1916.00
<b>TOTAL</b> 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 42 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 1593 Spring Hill Road		Amount of Each Disbursement this Period 52.25 <b>Transaction ID : SB17.18519</b>
City Tysons Corner	State VA Zip Code 22182	
Purpose of Disbursement Database service fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2015
Mailing Address 1593 Spring Hill Road		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.18545</b>
City Tysons Corner	State VA Zip Code 22182	
Purpose of Disbursement Database management fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. District City Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 1217 Delafield Place NW		Amount of Each Disbursement this Period 2579.43 <b>Transaction ID : SB17.18566</b>
City Washington	State DE Zip Code 20011	
Purpose of Disbursement Fundraising expenses-see memos	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3431.63
<b>TOTAL</b> 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 43 OF 72			
	<input checked="" type="checkbox"/> 17 <input 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	

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**

Full Name (Last, First, Middle Initial) <b>A. District City Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 1217 Delafield Place NW		Amount of Each Disbursement this Period 2500.00
City Washington State DE Zip Code 20011	Purpose of Disbursement fundraising consultin	
Candidate Name	Category/Type	Transaction ID : SB17.18566.0 <b>[MEMO ITEM]</b>
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. District City Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 1217 Delafield Place NW		Amount of Each Disbursement this Period 79.43
City Washington State DE Zip Code 20011	Purpose of Disbursement fundraising expense-food and beverage	
Candidate Name	Category/Type	Transaction ID : SB17.18566.1 <b>[MEMO ITEM]</b>
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. District City Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 1217 Delafield Place NW		Amount of Each Disbursement this Period 5763.84
City Washington State DE Zip Code 20011	Purpose of Disbursement Fundraising expenses-see memos	
Candidate Name	Category/Type	Transaction ID : SB17.18533
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5763.84
<b>TOTAL</b> 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 44 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. District City Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 1217 Delafield Place NW		Amount of Each Disbursement this Period 1500.01
City Washington	State DE Zip Code 20011	
Purpose of Disbursement Fundraising consulting	Category/Type	<b>Transaction ID : SB17.18533.0</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 65.87
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising expenses-food and beverage	Category/Type	<b>Transaction ID : SB17.18533.1</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 8.06
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising expenses-food and beverage	Category/Type	<b>Transaction ID : SB17.18533.2</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 45 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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. Acqua AI 2**

Full Name (Last, First, Middle Initial)  
Mailing Address 212 7th Street Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising expenses-food and beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 21 / 2015

Amount of Each Disbursement this Period: 1006.85

Transaction ID : SB17.18533.3

[MEMO ITEM]

**B. District City Consulting**

Full Name (Last, First, Middle Initial)  
Mailing Address 1217 Delafield Place NW

City Washington State DE Zip Code 20011

Purpose of Disbursement Fundraising consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 21 / 2015

Amount of Each Disbursement this Period: 1500.00

Transaction ID : SB17.18533.4

[MEMO ITEM]

**c. Trattoria Alberto**

Full Name (Last, First, Middle Initial)  
Mailing Address 506 Eighth Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising expenses-food and beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 21 / 2015

Amount of Each Disbursement this Period: 347.36

Transaction ID : SB17.18533.5

[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 46 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Bull Feathers</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 410 1st Street, SE		Amount of Each Disbursement this Period 1168.70
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising expense-catering	
Candidate Name	Category/Type	Transaction ID : SB17.18533.6 <b>[MEMO ITEM]</b>
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 72.48
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising expense-food and beverage	
Candidate Name	Category/Type	Transaction ID : SB17.18533.7 <b>[MEMO ITEM]</b>
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 94.52
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising expense-food and beverage	
Candidate Name	Category/Type	Transaction ID : SB17.18533.8 <b>[MEMO ITEM]</b>
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 47 OF 72			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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**

Full Name (Last, First, Middle Initial) <b>A. Executive Press</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 10412 Main Street		Amount of Each Disbursement this Period 2097.74
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Letterhead and envelopes	Transaction ID : SB17.18512
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Executive Press</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 10412 Main Street		Amount of Each Disbursement this Period 2020.99
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising expense-printing and mailing	Transaction ID : SB17.18548
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fine Line Designs</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2015
Mailing Address 232 Poplar Avenue		Amount of Each Disbursement this Period 1137.50
City New Cumberland	State PA	
Zip Code 17070	Purpose of Disbursement Administrative consulting	Transaction ID : SB17.18425
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5256.23
<b>TOTAL</b> 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 48 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Long Nyquist Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 121 State Street		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.18382</b>
City Harrisburg State PA Zip Code 17101	Purpose of Disbursement Campaign Management fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Long Nyquist Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2015
Mailing Address 121 State Street		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.18426</b>
City Harrisburg State PA Zip Code 17101	Purpose of Disbursement Campaign management consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Long Nyquist Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2015
Mailing Address 121 State Street		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.18511</b>
City Harrisburg State PA Zip Code 17101	Purpose of Disbursement Campaign management consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4500.00
<b>TOTAL</b> 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 49 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Robert H. Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 1829 Bay Street, SE		Amount of Each Disbursement this Period 3954.46 <b>Transaction ID : SB17.18571</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement reimbursed expenses-see memos	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Robert H. Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 1829 Bay Street, SE		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.18571.0</b> <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Robert H. Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 1829 Bay Street, SE		Amount of Each Disbursement this Period 224.40 <b>Transaction ID : SB17.18571.1</b> <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement reimbursed mileage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3954.46
<b>TOTAL</b> 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 50 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Robert H. Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 1829 Bay Street, SE		Amount of Each Disbursement this Period 35.75
City Washington State DC Zip Code 20003	Purpose of Disbursement fundraising expense-printing	
Candidate Name		Transaction ID : SB17.18571.3 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Robert H. Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 1829 Bay Street, SE		Amount of Each Disbursement this Period 64.00
City Washington State DC Zip Code 20003	Purpose of Disbursement fundraising expense-shipping	
Candidate Name		Transaction ID : SB17.18571.5 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Tortilla Coast</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 400 First Street, SE		Amount of Each Disbursement this Period 58.07
City Washington State DC Zip Code 20003	Purpose of Disbursement Meeting - Food and Beverage	
Candidate Name		Transaction ID : SB17.18571.6 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 51 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Robert H. Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address 1829 Bay Street, SE		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.18429</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Robert H. Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2015
Mailing Address 1829 Bay Street, SE		Amount of Each Disbursement this Period 3640.48 <b>Transaction ID : SB17.18507</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising expenses-see memos	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Robert H. Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2015
Mailing Address 1829 Bay Street, SE		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.18507.0</b> <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7140.48
<b>TOTAL</b> 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 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. PC Handyman</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 2620 East Hills Drive		Amount of Each Disbursement this Period 254.28
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Computer repair expense	<b>Transaction ID : SB17.18431</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sears Master Card</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2015
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 7671.59
City Columbus	State OH	
Zip Code 43218	Purpose of Disbursement see memos	<b>Transaction ID : SB17.18579</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. House of Representatives Gift Shop</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2015
Mailing Address B218 Longworth Bldg		Amount of Each Disbursement this Period 448.60
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement items for gift baskets	<b>Transaction ID : SB17.18579.2</b> <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7925.87
<b>TOTAL</b> 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 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Hilton Hotels-New York</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 1335 Ave of the Americas		Amount of Each Disbursement this Period 2423.87
City New York	State NY	Zip Code 10019
Purpose of Disbursement travel-lodging	Category/Type	
Candidate Name	Transaction ID : SB17.18579.3	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address PO Box 10005		Amount of Each Disbursement this Period 299.99
City Palo Alto	State CA	Zip Code 94303
Purpose of Disbursement advertising	Category/Type	
Candidate Name	Transaction ID : SB17.18579.4	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>c. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 50 Massachusetts Avenue NE		Amount of Each Disbursement this Period 327.00
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Travel - Transportation	Category/Type	
Candidate Name	Transaction ID : SB17.18579.7	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 75 Ninth Avenue 2 & 4 FL		Amount of Each Disbursement this Period 71.37
City New York City	State NY	
Zip Code 10011	Purpose of Disbursement advertising	Transaction ID : <b>SB17.18579.10</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>B. Microsoft Store</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 1000 Ross Park Mall Drive		Amount of Each Disbursement this Period 233.19
City Pittsburgh	State PA	
Zip Code 15237	Purpose of Disbursement computer software	Transaction ID : <b>SB17.18579.12</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>c. Twitter Advertising</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 795 Folsom St		Amount of Each Disbursement this Period 135.09
City San Francisco	State CA	
Zip Code 94103	Purpose of Disbursement advertising	Transaction ID : <b>SB17.18579.17</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 50 Massachusetts Avenue NE		Amount of Each Disbursement this Period 760.00
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Travel - Transportation	Transaction ID : SB17.18579.19 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Twitter Advertising</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 795 Folsom St		Amount of Each Disbursement this Period 152.97
City San Francisco	State CA	
Zip Code 94103	Purpose of Disbursement advertising	Transaction ID : SB17.18579.20 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bierhaus</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 712 Third Avenue		Amount of Each Disbursement this Period 34.40
City New York	State NY	
Zip Code 10017	Purpose of Disbursement meeting expense-food and beverage	Transaction ID : SB17.18579.25 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Twitter Advertising</b>		<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>01</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		01		2015
M M	/	D D	/	Y Y Y Y									
01		01		2015									
Mailing Address 795 Folsom St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94103</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94103	<table border="1"> <tr> <td>252.82</td> </tr> </table>		252.82			
City	State	Zip Code											
San Francisco	CA	94103											
252.82													
Purpose of Disbursement advertising		Transaction ID : SB17.18579.32											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Twitter Advertising</b>		<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>01</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		01		2015
M M	/	D D	/	Y Y Y Y									
01		01		2015									
Mailing Address 795 Folsom St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94103</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94103	<table border="1"> <tr> <td>264.14</td> </tr> </table>		264.14			
City	State	Zip Code											
San Francisco	CA	94103											
264.14													
Purpose of Disbursement advertising		Transaction ID : SB17.18579.37											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. Facebook</b>		<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>01</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		01		2015
M M	/	D D	/	Y Y Y Y									
01		01		2015									
Mailing Address PO Box 10005		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Palo Alto</td> <td>CA</td> <td>94303</td> </tr> </table>		City	State	Zip Code	Palo Alto	CA	94303	<table border="1"> <tr> <td>666.01</td> </tr> </table>		666.01			
City	State	Zip Code											
Palo Alto	CA	94303											
666.01													
Purpose of Disbursement advertising		Transaction ID : SB17.18579.39											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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**

Full Name (Last, First, Middle Initial)  
**A. Sears Master Card**

Mailing Address PO Box 183082

City Columbus State OH Zip Code 43218

Purpose of Disbursement see memos

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 02 / 2015

Amount of Each Disbursement this Period: 3545.72

Transaction ID : SB17.18388

Full Name (Last, First, Middle Initial)  
**B. Twitter Advertising**

Mailing Address 795 Folsom St

City San Francisco State CA Zip Code 94103

Purpose of Disbursement advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 02 / 2015

Amount of Each Disbursement this Period: 8.35

Transaction ID : SB17.18388.1

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. Twitter Advertising**

Mailing Address 795 Folsom St

City San Francisco State CA Zip Code 94103

Purpose of Disbursement advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 09 / 2015

Amount of Each Disbursement this Period: 100.00

Transaction ID : SB17.18388.4

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 3545.72

**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 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial)		Date of Disbursement														
<b>A. Twitter Advertising</b>		<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>01</td> <td></td> <td>15</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		15		2015			
M M	/	D D	/	Y Y Y Y												
01		15		2015												
Mailing Address 795 Folsom St		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94103</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94103	<table border="1"> <tr> <td>75.00</td> </tr> </table>		75.00						
City	State	Zip Code														
San Francisco	CA	94103														
75.00																
Purpose of Disbursement advertising		Transaction ID : SB17.18388.6														
Candidate Name		[MEMO ITEM]														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2016</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (specify)</td> </tr> </table>		Office Sought:	House	Disbursement For: 2016		Senate		President			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)	Category/Type	
Office Sought:	House	Disbursement For: 2016														
	Senate															
	President															
		<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>B. US Airways</b>		<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>01</td> <td></td> <td>17</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		17		2015			
M M	/	D D	/	Y Y Y Y												
01		17		2015												
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85034</td> </tr> </table>		City	State	Zip Code	Phoenix	AZ	85034	<table border="1"> <tr> <td>757.20</td> </tr> </table>		757.20						
City	State	Zip Code														
Phoenix	AZ	85034														
757.20																
Purpose of Disbursement travel-airfare		Transaction ID : SB17.18388.8														
Candidate Name		[MEMO ITEM]														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2016</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (specify)</td> </tr> </table>		Office Sought:	House	Disbursement For: 2016		Senate		President			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)	Category/Type	
Office Sought:	House	Disbursement For: 2016														
	Senate															
	President															
		<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>c. US Airways</b>		<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>01</td> <td></td> <td>17</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		17		2015			
M M	/	D D	/	Y Y Y Y												
01		17		2015												
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85034</td> </tr> </table>		City	State	Zip Code	Phoenix	AZ	85034	<table border="1"> <tr> <td>757.20</td> </tr> </table>		757.20						
City	State	Zip Code														
Phoenix	AZ	85034														
757.20																
Purpose of Disbursement travel-airfare		Transaction ID : SB17.18388.9														
Candidate Name		[MEMO ITEM]														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2016</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other (specify)</td> </tr> </table>		Office Sought:	House	Disbursement For: 2016		Senate		President			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Other (specify)	Category/Type	
Office Sought:	House	Disbursement For: 2016														
	Senate															
	President															
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General														
		<input type="checkbox"/> Other (specify)														
State: District:																

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. House of Representatives Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address B218 Longworth Bldg		Amount of Each Disbursement this Period 104.40
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Appreciation Gift	Transaction ID : SB17.18388.10 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. House of Representatives Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address B218 Longworth Bldg		Amount of Each Disbursement this Period 42.52
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Appreciation Gift	Transaction ID : SB17.18388.11 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bearnaise</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address 315 Pennsylvania Avenue		Amount of Each Disbursement this Period 211.98
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement meeting expense-food and beverage	Transaction ID : SB17.18388.12 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Twitter Advertising</b>		M M / D D / Y Y Y Y 01 / 22 / 2015	
Mailing Address 795 Folsom St		Amount of Each Disbursement this Period	
City San Francisco State CA Zip Code 94103		4175.38	
Purpose of Disbursement advertising		Transaction ID : SB17.18388.14	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>B. Facebook</b>		M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address PO Box 10005		Amount of Each Disbursement this Period	
City Palo Alto State CA Zip Code 94303		752.69	
Purpose of Disbursement advertising		Transaction ID : SB17.18388.18	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>C. Sears Master Card</b>		M M / D D / Y Y Y Y 03 / 03 / 2015	
Mailing Address PO Box 183082		Amount of Each Disbursement this Period	
City Columbus State OH Zip Code 43218		4175.38	
Purpose of Disbursement see memos		Transaction ID : SB17.18441	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4175.38
<b>TOTAL</b> 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 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Sunoco-Williamsport</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2015
Mailing Address 3725 Lycoming Creek Rd		Amount of Each Disbursement this Period 31.00
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement travel-fuel	Transaction ID : SB17.18441.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>B. Hilton Hotels-Harrisburg</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2015
Mailing Address 1 North Second St		Amount of Each Disbursement this Period 253.09
City Harrisburg	State PA	
Zip Code 17101	Purpose of Disbursement travel-lodging	Transaction ID : SB17.18441.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2015
Mailing Address PO Box 10005		Amount of Each Disbursement this Period 78.28
City Palo Alto	State CA	
Zip Code 94303	Purpose of Disbursement advertising	Transaction ID : SB17.18441.4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Sunoco-Williamsport</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2015
Mailing Address 3725 Lycoming Creek Rd		Amount of Each Disbursement this Period 22.00
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement travel-fuel	Transaction ID : SB17.18441.9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>B. Tortilla Coast</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address 400 First Street, SE		Amount of Each Disbursement this Period 73.16
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement meeting expense-food and beverage	Transaction ID : SB17.18441.12
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>c. Noella</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address 1319 F Street NW		Amount of Each Disbursement this Period 419.76
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Campaign meeting food and beverage	Transaction ID : SB17.18441.13
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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. Tortilla Coast**

Full Name (Last, First, Middle Initial)  
Mailing Address 400 First Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement meeting expense-food and beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 13 / 2015

Amount of Each Disbursement this Period: 53.97

Transaction ID : SB17.18441.17

[MEMO ITEM]

**B. US Airways**

Full Name (Last, First, Middle Initial)  
Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Travel-baggage fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 19 / 2015

Amount of Each Disbursement this Period: 50.00

Transaction ID : SB17.18441.21

[MEMO ITEM]

**c. Sunoco-Williamsport**

Full Name (Last, First, Middle Initial)  
Mailing Address 3725 Lycoming Creek Rd

City Williamsport State PA Zip Code 17701

Purpose of Disbursement travel-fuel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 20 / 2015

Amount of Each Disbursement this Period: 30.01

Transaction ID : SB17.18441.24

[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 64 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. The Shore Club</b>		Date of Disbursement MM / DD / YYYY 02 / 22 / 2015
Mailing Address 1901 Collins Avenue		Amount of Each Disbursement this Period 1217.01
City Miami	State FL	
Zip Code 33139	Purpose of Disbursement travel-lodging	Transaction ID : SB17.18441.30
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2015
Mailing Address PO Box 10005		Amount of Each Disbursement this Period 551.87
City Palo Alto	State CA	
Zip Code 94303	Purpose of Disbursement advertising	Transaction ID : SB17.18441.40
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>c. Sears Master Card</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2015
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 262.82
City Columbus	State OH	
Zip Code 43218	Purpose of Disbursement see memos	Transaction ID : SB17.18514
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	262.82
<b>TOTAL</b> 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 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Radisson Hotels</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 1150 Camp Hill Bypass		Amount of Each Disbursement this Period 118.81
City Camp Hill	State PA	Zip Code 17011
Purpose of Disbursement travel-lodging	Category/ Type	
Candidate Name	Transaction ID : SB17.18514.0	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. Sears Master Card</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address PO Box 183082		Amount of Each Disbursement this Period 3339.37
City Columbus	State OH	Zip Code 43218
Purpose of Disbursement see memos	Category/ Type	
Candidate Name	Transaction ID : SB17.18552	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Disalvo's</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2015
Mailing Address 341 E 4th Street		Amount of Each Disbursement this Period 2218.92
City Williamsport	State PA	Zip Code 17701
Purpose of Disbursement Fundraising expense-catering	Category/ Type	
Candidate Name	Transaction ID : SB17.18552.6	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3339.37
<b>TOTAL</b> 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 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Disalvo's</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2015
Mailing Address 341 E 4th Street		Amount of Each Disbursement this Period 731.82
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement fundraising expense-catering	Transaction ID : SB17.18552.7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>B. Springboard Media</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 121 S 13th St		Amount of Each Disbursement this Period 1000.00
City Philadelphia	State PA	
Zip Code 19107	Purpose of Disbursement Social Media Consulting	Transaction ID : SB17.18384
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Springboard Media</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2015
Mailing Address 121 S 13th St		Amount of Each Disbursement this Period 1000.00
City Philadelphia	State PA	
Zip Code 19107	Purpose of Disbursement Social Media Consulting	Transaction ID : SB17.18510
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> 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 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address PO Box 4003		Amount of Each Disbursement this Period 56.58 <b>Transaction ID : SB17.18385</b>
City Acworth	State GA	
Zip Code 30101	Purpose of Disbursement Cellular phone service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address PO Box 4003		Amount of Each Disbursement this Period 139.61 <b>Transaction ID : SB17.18428</b>
City Acworth	State GA	
Zip Code 30101	Purpose of Disbursement cellular phone service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2015
Mailing Address PO Box 4003		Amount of Each Disbursement this Period 139.66 <b>Transaction ID : SB17.18544</b>
City Acworth	State GA	
Zip Code 30101	Purpose of Disbursement cellular phone service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	335.85
<b>TOTAL</b> 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 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Vollman</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 4530 State Route 184		Amount of Each Disbursement this Period 770.00 <b>Transaction ID : SB17.18383</b>
City Trout Run	State PA Zip Code 17771	
Purpose of Disbursement Administrative expenses	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Widget Makr/Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 7704 Leesburg Pike		Amount of Each Disbursement this Period 536.39 <b>Transaction ID : SB17.18547</b>
City Falls Church	State VA Zip Code 22043	
Purpose of Disbursement credit card processing fee	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Widget Makr/Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 7704 Leesburg Pike		Amount of Each Disbursement this Period 1.60 <b>Transaction ID : SB17.18549</b>
City Falls Church	State VA Zip Code 22043	
Purpose of Disbursement credit card processing fee	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1307.99
<b>TOTAL</b> 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 72		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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**

Full Name (Last, First, Middle Initial) <b>A. Widget Makr/Merchant Services</b>		Date of Disbursement
Mailing Address 7704 Leesburg Pike		M M / D D / Y Y Y Y 03 / 30 / 2015
City	State	Zip Code
Falls Church	VA	22043
Purpose of Disbursement credit card processing fee		Amount of Each Disbursement this Period
Candidate Name		3.04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.18550
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Widget Makr/Merchant Services</b>		Date of Disbursement
Mailing Address 7704 Leesburg Pike		M M / D D / Y Y Y Y 03 / 31 / 2015
City	State	Zip Code
Falls Church	VA	22043
Purpose of Disbursement credit card processing fee		Amount of Each Disbursement this Period
Candidate Name		14.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.18551
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	17.64
<b>TOTAL</b> This Period (last page this line number only).....	69135.42

**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 72			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Lycoming Council of Republican Women</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address 433 N. Market Street			Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.18417</b>
City Williamsport	State PA	Zip Code 17701	
Purpose of Disbursement Non-federal contribution		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Lycoming Council of Republican Women</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 433 N. Market Street			Amount of Each Disbursement this Period 15.00 <b>Transaction ID : SB21.18565</b>
City Williamsport	State PA	Zip Code 17701	
Purpose of Disbursement Non-federal contribution		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>c. Lycoming County Republican Committee - Non-Fed</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2015
Mailing Address 166 Pine Crest Road			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21.18437</b>
City Jersey Shore	State PA	Zip Code 17740	
Purpose of Disbursement Non-federal contribution		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1515.00
<b>TOTAL</b> 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 72	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Susquehanna County Republican Committee- Non Fed</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address PO Box 371		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB21.18434</b>
City New Milford	State PA	
Zip Code 18834	Purpose of Disbursement Non-federal contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Wayne County Republican Committee - Non- Fed</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 7442 Main Street		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB21.18435</b>
City Honesdale	State PA	
Zip Code 18431	Purpose of Disbursement Non-federal contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</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	Category/ Type
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	2015.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Long Nyquist Consulting**

Nature of Debt (Purpose):  
**Campaign Management Fee**

Mailing Address **121 State Street**

City State Zip Code  
**Harrisburg PA 17101**

Outstanding Balance Beginning This Period

**Transaction ID : SD10.18662**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

<input type="text" value="1000.00"/>
<input type="text" value="1000.00"/>
<input type="text" value="0.00"/>
<input type="text" value="1000.00"/>