

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

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

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

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 _____ in the State of _____
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 03 31 2010

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 Jacqueline A Bell

Signature of Treasurer Electronically Filed by Jacqueline A Bell Date 05 06 2010

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

FEC Form 3 (Revised 02/2003)

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)).....	110008.19	110008.19
(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)).....	110008.19	110008.19
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	37001.13	37001.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.32	0.32
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	37000.81	37000.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	73471.88	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	9936.00	

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:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	99108.19	99108.19
(ii) Unitemized.....	5400.00	5400.00
(iii) TOTAL of contributions from individuals..... ▶	104508.19	104508.19
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	5500.00	5500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	110008.19	110008.19
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	614.50	614.50
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	614.50	614.50
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.32	0.32
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	110623.01	110623.01

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	37001.13	37001.13
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.....	150.00	150.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	37151.13	37151.13

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	110623.01
25. SUBTOTAL (add Line 23 and Line 24).....	110623.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37151.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	73471.88

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

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

Mailing Address 125 Allendale Drive

City State Zip Code
Montoursville PA 17754

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.4611

Amount of Each Receipt this Period
2400.00

Contribution

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

Mailing Address 125 Allendale Drive

City State Zip Code
Montoursville PA 17754

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.4613

Amount of Each Receipt this Period
2400.00

Contribution

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

Mailing Address 10 Alexander Drive

City State Zip Code
Montoursville PA 17753

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

Name of Employer Occupation
Alexander Dealerships Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11AI.4608

Amount of Each Receipt this Period
2400.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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: PAGE 6 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Blaise Alexander</p> <p>Mailing Address 10 Alexander Drive</p> <p>City State Zip Code Montoursville PA 17753</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Alexander Dealerships Owner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2010</p> <p>Transaction ID: SA11AI.4610</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Jeffrey Belardi</p> <p>Mailing Address 410 Spruce Street 4th FL</p> <p>City State Zip Code Scranton PA 18503</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self-Employed Attorney</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2010</p> <p>Transaction ID: SA11AI.4193</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Kent Bennett</p> <p>Mailing Address 280 Hollow Road</p> <p>City State Zip Code Muncy PA 17756</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self-Employed Financial Advisor</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2010</p> <p>Transaction ID: SA11AI.4341</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	3900.00
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 7 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) John A Blaschak	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 2816 Lincoln Drive	Transaction ID: SA11AI.4168
	City State Zip Code Montoursville PA 17754	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Fisher Mining Company Coal Operator	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) William W Brooks, III	Date of Receipt MM / DD / YYYY 03 / 22 / 2010
	Mailing Address 2428 Kellyburg Road	Transaction ID: SA11AI.4347
	City State Zip Code Trout Run PA 17771	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Logs and Lumber Self-Employed	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Patrick J Carey	Date of Receipt MM / DD / YYYY 03 / 23 / 2010
	Mailing Address 1201 Vallamont Drive NW	Transaction ID: SA11AI.4351
	City State Zip Code Williamsport PA 17701	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation West Branch Orthopedics Physician	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	3150.00
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:	PAGE 8 / 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Frank A Casale, Sr.		Date of Receipt
	Mailing Address 1525 Chestnut Street		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Williamsport	PA	17701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4349
Name of Employer Self-Employed		Occupation Restaurant Owner	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	Contribution

B.	Full Name (Last, First, Middle Initial) Michael J Casale, Jr.		Date of Receipt
	Mailing Address 33 West Third Street		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Williamsport	PA	17701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4104
Name of Employer Law Office of Casale & Bonner		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	Contribution

C.	Full Name (Last, First, Middle Initial) William C Costopoulos		Date of Receipt
	Mailing Address 831 Market Street		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Lemoyne	PA	17043
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4357
Name of Employer Costopoulos, Foster & Fields		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="1500.00"/>
		<input type="text" value="1500.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Peter DeSanto	Date of Receipt MM / DD / YYYY 03 / 26 / 2010
	Mailing Address 321 Woodland Avenue	Transaction ID: SA11AI.4693
	City State Zip Code Williamsport PA 17701	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	In-kind -Entertainment for Fundraiser
	Name of Employer DeSanto Signs Occupation Owner Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Matthew D DiRocco	Date of Receipt MM / DD / YYYY 03 / 30 / 2010
	Mailing Address 825 Woodland Avenue	Transaction ID: SA11AI.4591
	City State Zip Code Williamsport PA 17701	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Airmen, Inc. Occupation Owner Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Keith W Eckel	Date of Receipt MM / DD / YYYY 02 / 01 / 2010
	Mailing Address 1647 Falls Road	Transaction ID: SA11AI.4102
	City State Zip Code Clarks Summit PA 18411	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Self-Employed Occupation Farmer Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	3700.00
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: PAGE 10 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 13 / 2010
Transaction ID: SA11AI.4145
 Amount of Each Receipt this Period 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Charles D. Flack

Mailing Address 243 West Eighth Street

City Wyoming State PA Zip Code 18644

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

Name of Employer Diamond Manufacturing Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 11 / 2010
Transaction ID: SA11AI.4139
 Amount of Each Receipt this Period 2400.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Charles D. Flack

Mailing Address 243 West Eighth Street

City Wyoming State PA Zip Code 18644

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

Name of Employer Diamond Manufacturing Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 30 / 2010
Transaction ID: SA11AI.4584
 Amount of Each Receipt this Period 2400.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 5800.00

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:	PAGE 11 / 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Harold Flack, II	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address PO Box 174	Transaction ID: SA11AI.4137
	City State Zip Code Wyoming PA 18644	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Diamond Manufacturing President	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) Kevin A Foley	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address PO Box 432	Transaction ID: SA11AI.4602
	City State Zip Code Mountain Top PA 18707	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Self-Employed CPA	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Robert Fortinsky	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 315 Simpson Street	Transaction ID: SA11AI.4161
	City State Zip Code Swyersville PA 18704	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Fortune Fabric Principal	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	4400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Curtis Guyette

Mailing Address 304 Bowen Drive

City Williamsport State PA Zip Code 17701

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 09 / 2010
Transaction ID: SA11AI.4133
 Amount of Each Receipt this Period: 1000.00
 Contribution

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

Mailing Address 1500 Market Street Suite 3500E

City Philadelphia State PA Zip Code 17102

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

Name of Employer Dilworth Paxson LLP Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11AI.4618
 Amount of Each Receipt this Period: 500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Mark L Helmer

Mailing Address 18 Roosevelt Street

City Dallas State PA Zip Code 18612

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

Name of Employer Tammac Holding Corporation Occupation Sr. Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 15 / 2010
Transaction ID: SA11AI.4197
 Amount of Each Receipt this Period: 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

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

Mailing Address 753 Ransome Road

City State Zip Code
Dallas PR 18612

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

Name of Employer Occupation
Frank Martz Coach Company Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.4182

Amount of Each Receipt this Period
1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Thomas R Hession

Mailing Address 1103 Stewart Avenue
Suite 200

City State Zip Code
Garden City NY 11530

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

Name of Employer Occupation
Hession Bekoff Cooper et al Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 22 / 2010

Transaction ID: SA11AI.4355

Amount of Each Receipt this Period
250.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Michael J Hirthler

Mailing Address 620 Baltimore Drive

City State Zip Code
Wilkes Barre PA 18702

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

Name of Employer Occupation
Self-Employed Financial Advisor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.4201

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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: PAGE 14 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Gary Hutchinson

Mailing Address 601 Kane Street

City State Zip Code
South Williamsport PA 17702

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 11 / 2010

Transaction ID: SA11AI.4141

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Sandy Insalaco, Sr.

Mailing Address 50 Old Mill Road

City State Zip Code
Wilkes Barre PA 18702

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

Name of Employer Occupation
Insalaco Development Group Partner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 19 / 2010

Transaction ID: SA11AI.4218

Amount of Each Receipt this Period
2400.00

Contribution

C. Full Name (Last, First, Middle Initial)
Sandy Insalaco, Sr.

Mailing Address 50 Old Mill Road

City State Zip Code
Wilkes Barre PA 18702

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

Name of Employer Occupation
Insalaco Development Group Partner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 19 / 2010

Transaction ID: SA11AI.4220

Amount of Each Receipt this Period
2400.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **5300.00**

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

B. Form/Schedule : **SA11AI**

Re-Designation Letter was sent to donor.

Transaction ID : **SA11AI.4218**

**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 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) D Peter Johnson	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 40 North Eighth Street	Transaction ID: SA11AI.4652
	City State Zip Code Lewisburg PA 17837	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Union County	Occupation District Attorney	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Angela Kaiser	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 216 Reservoir Road	Transaction ID: SA11AI.4703
	City State Zip Code Williamsport PA 17701	Amount of Each Receipt this Period 1296.00
	FEC ID number of contributing federal political committee. C	In-kind - Campaign Office Rent for Jan thru March
Name of Employer Susquehanna Health Systems	Occupation Athletic Trainer	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1296.00	

C.	Full Name (Last, First, Middle Initial) Ceecil Kilmer	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address RR1 Box, 1130	Transaction ID: SA11AI.4606
	City State Zip Code Nicholson PA 18446	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Cecil Kilmer Stone, LLC	Occupation Owner	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2796.00
TOTAL This Period (last page this line number only)	

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.4703**

Building is owned by 5 partners. The fair market value for this is property is 2160 per month. The rent is divided by the 5 partners which equals 432 per month times 3 months equals 1296.00 for Jan thru March.

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Helana L. Kincel

Mailing Address 901 Forest Road

City State Zip Code
Jefferson Township PA 18436

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

Name of Employer Self-Employed Occupation
Insurance Broker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.4180

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Joseph E Kluger

Mailing Address 1768 Penns Crossings

City State Zip Code
Allentown PA 18104

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

Name of Employer Hourigan, Kluger & Quinn PC Occupation
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.4176

Amount of Each Receipt this Period
500.00

Contribution

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

Mailing Address 500 Rose Street

City State Zip Code
Williamsport PA 17701

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

Name of Employer Retired Occupation
Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 22 / 2010

Transaction ID: SA11AI.4679

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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: PAGE 19 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

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

Mailing Address PO Box 14

City State Zip Code
Tunkahannock PA 18657

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

Name of Employer Occupation
Ace Robbins Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.4600

Amount of Each Receipt this Period
2400.00

Contribution

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

Mailing Address 1847 Harriman Road

City State Zip Code
Unityville PA 17774

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

Name of Employer Occupation
Twin Hills Health Center Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.4656

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Charles W Luppert

Mailing Address 1618 Heather Lane

City State Zip Code
Williamsport PA 17701

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2010

Transaction ID: SA11AI.4225

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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: PAGE 20 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

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

Mailing Address PO Box 308

City State Zip Code
Montoursville PA 17754

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

Name of Employer Occupation
Fairfield Auto Group Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.4127

Amount of Each Receipt this Period
1000.00

Contribution

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

Mailing Address 1408 Cherry Street

City State Zip Code
Williamsport PA 17701

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

Name of Employer Occupation
Susquehanna Health Systems Administrator

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4438

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Matthew M McGowan

Mailing Address 170 Redwood Avenue

City State Zip Code
Sugarloaf PA 18249

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

Name of Employer Occupation
Hallmark Homes CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.4170

Amount of Each Receipt this Period
1000.00

Contributon

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 21 / 91
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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Daniel Meuser	Date of Receipt MM / DD / YYYY 02 / 01 / 2010
	Mailing Address 182 Susquehanna Avenue	Transaction ID: SA11AI.4100
	City State Zip Code West Pittston PA 18643	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Pride Mobility Products President Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Daniel Meuser	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 182 Susquehanna Avenue	Transaction ID: SA11AI.4156
	City State Zip Code West Pittston PA 18643	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Pride Mobility Products President Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Carolyn Miele	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 802 Faxon Parkway	Transaction ID: SA11AI.4706
	City State Zip Code Williamsport PA 17701	Amount of Each Receipt this Period 1296.00
	FEC ID number of contributing federal political committee. C	In-kind - Campaign Office Rent Jan thru March
	Name of Employer Occupation Dr. Donato Midwife Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1296.00	

SUBTOTAL of Receipts This Page (optional)	3296.00
TOTAL This Period (last page this line number only)	

C. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.4706**

Building is owned by 5 partners. The fair market value for this is property is 2160 per month. The rent is divided by the 5 partners which equals 432 per month times 3 months equals 1296.00 for Jan thru March.

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

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

FOR LINE NUMBER: PAGE 23 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Louis D. Miele

Mailing Address 1209 Wheatfield Drive

City Williamsport State PA Zip Code 17701

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

Name of Employer Miele Inc. Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11AI.4715
 Amount of Each Receipt this Period: 1296.00
 In-kind - Campaign Office Rent Jan thru March

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

Mailing Address 1918 Logan Street

City Harrisburg State PA Zip Code 17101

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

Name of Employer Student Occupation Student

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11AI.4712
 Amount of Each Receipt this Period: 1296.00
 In-kind - Campaign Office Rent Jan thru March

C. Full Name (Last, First, Middle Initial)
Jerome P Natishan, Jr

Mailing Address 53 Atherton

City Wyoming State PA Zip Code 18644

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

Name of Employer Green Valley Landscaping Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11AI.4616
 Amount of Each Receipt this Period: 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► **3592.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.4715**

Building is owned by 5 partners. The fair market value for this is property is 2160 per month. The rent is divided by the 5 partners which equals 432 per month times 3 months equals 1296.00 for Jan thru March.

B. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.4712**

Building is owned by 5 partners. The fair market value for this is property is 2160 per month. The rent is divided by the 5 partners which equals 432 per month times 3 months equals 1296.00 for Jan thru March.

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Helen Ochs

Mailing Address 12466 North Golden Mirror

City Marana State AZ Zip Code 85658

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1296.00

Date of Receipt 03 / 31 / 2010
Transaction ID: SA11AI.4709
 Amount of Each Receipt this Period 1296.00
 In-kind - Campaign Office Rent Jan thru March

B. Full Name (Last, First, Middle Initial)
Vincent A Parvini, Jr.

Mailing Address 36 Second Avenue

City Haddon Heights State NJ Zip Code 08035

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

Name of Employer Legacy Advisors Occupation Financial Advisor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2010
Transaction ID: SA11AI.4620
 Amount of Each Receipt this Period 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
John J Passan

Mailing Address 1 Passan Drive

City Wilkes Barre State PA Zip Code 18702

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

Name of Employer Valley Distributing & Storage Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2010
Transaction ID: SA11AI.4626
 Amount of Each Receipt this Period 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 3296.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.4709**

Building is owned by 5 partners. The fair market value for this is property is 2160 per month. The rent is divided by the 5 partners which equals 432 per month times 3 months equals 1296.00 for Jan thru March.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Francis Pedriani	Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2010
	Mailing Address 433 West Centre Street PO Box 239	Transaction ID: SA11AI.4184
	City Mahony City State PA Zip Code 17948	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Pedriani Construction Occupation Owner Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Richard D. Pencek	Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2010
	Mailing Address RR 2, Box 2489	Transaction ID: SA11AI.4163
	City Factoryville State PA Zip Code 18419	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Creative Planning Ltd Occupation Insurance Agent Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Joseph C Perfilio	Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2010
	Mailing Address 12 Alpine Drive	Transaction ID: SA11AI.4174
	City Moosic State PA Zip Code 18507	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Self-Employed Occupation Investment Advisor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
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: PAGE 28 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) John E Person</p> <p>Mailing Address 113 Horizon Drive</p> <p>City State Zip Code Cogan Station PA 17728</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self-Employed Occupation Attorney</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2010</p> <p>Transaction ID: SA11AI.4203</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Margaret E Phillips</p> <p>Mailing Address 32 Westminster Drive</p> <p>City State Zip Code Dallas PA 18612</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2010</p> <p>Transaction ID: SA11AI.4166</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Ann C Prato</p> <p>Mailing Address 1776 Williams Road</p> <p>City State Zip Code Williamsport PA 17701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2010</p> <p>Transaction ID: SA11AI.4227</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	1250.00
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: PAGE 29 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Barry L Rake

Mailing Address 1004 Dawne Drive

City State Zip Code
Williamsport PA 17701

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

Name of Employer Occupation
Kent Bennett & Associates Insurance Agent

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2010

Transaction ID: SA11AI.4423

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Samuel C. Ranck

Mailing Address 325 Boiardi Lane

City State Zip Code
Milton PA 17847

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.4149

Amount of Each Receipt this Period
300.00

Contribution

C. Full Name (Last, First, Middle Initial)
William F Rinaldi

Mailing Address PO Box 3972

City State Zip Code
Scranton PA 18505

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.4624

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **2800.00**

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: PAGE 30 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Steven D Rockoff

Mailing Address 1769 McConnell Drive

City State Zip Code
Williamsport PA 17701

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

Name of Employer
Susquehanna Urologic Assoc.
c.

Occupation
Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
02 / 18 / 2010

Transaction ID: SA11AI.4114

Amount of Each Receipt this Period
500.00

Contribution

B.

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

Mailing Address 1221 Windfield Drive

City State Zip Code
Williamsport PA 17701

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

Name of Employer
Self-Employed

Occupation
Insurance Agent

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2010

Transaction ID: SA11AI.4614

Amount of Each Receipt this Period
500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
John P Rodgers

Mailing Address 15 Public Square
Suite 210

City State Zip Code
Wilkes Barre PA 18701

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

Name of Employer
Wetzel, Caverly, Shea, et
al

Occupation
Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 15 / 2010

Transaction ID: SA11AI.4199

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

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

Mailing Address 25 Lakeside Drive

City State Zip Code
Clarks Summit PA 18411

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

Name of Employer Occupation
MorganStanleySmithBarney Financial Advisor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11AI.4580

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Yvonne M Roskowski

Mailing Address 1414 Wynwood Lane

City State Zip Code
Williamsport PA 17701

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2010

Transaction ID: SA11AI.4593

Amount of Each Receipt this Period
2400.00

Contribution

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

Mailing Address 2250 Packard Avenue

City State Zip Code
Huntingdon PA 19006

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2010

Transaction ID: SA11AI.4589

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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: PAGE 32 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
William M Scott

Mailing Address 1225 Nalliamont Drive NW

City State Zip Code
Williamsport PA 17701

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

Name of Employer Occupation
Williams & Smay Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2010

Transaction ID: SA11AI.4215

Amount of Each Receipt this Period
300.00

Contribution

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

Mailing Address 131 Sherwood Drive

City State Zip Code
Tunkahannock PA 18657

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.4604

Amount of Each Receipt this Period
1000.00

Contribution

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

Mailing Address 41 Sherwood Lane

City State Zip Code
Tunkhannock PA 18657

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

Name of Employer Occupation
Sherwood Chevrolet Auto Dealer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 19 / 2010

Transaction ID: SA11AI.4221

Amount of Each Receipt this Period
2000.00

Contributon

SUBTOTAL of Receipts This Page (optional) ► **3300.00**

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: PAGE 33 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2010
Transaction ID: SA11AI.4628
 Amount of Each Receipt this Period 500.00
 Contribution

B. Full Name (Last, First, Middle Initial)
William C Simmers

Mailing Address 510 Fairfield Church Road

City Montoursville State PA Zip Code 17754

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

Name of Employer US Attorney's Office Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 26 / 2010
Transaction ID: SA11AI.4426
 Amount of Each Receipt this Period 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
R W Simms

Mailing Address 740 Sutton Road

City Shavertown State PA Zip Code 18708

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

Name of Employer Petroleum Services Co., Inc. Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 15 / 2010
Transaction ID: SA11AI.4191
 Amount of Each Receipt this Period 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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: PAGE 34 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Patrick J Solano

Mailing Address 157 Center Street

City State Zip Code
Pittston PA 18640

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

Name of Employer Self-Employed Occupation
Professional Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.4172

Amount of Each Receipt this Period
2000.00

Contribution

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

Mailing Address 350 Poplar Church Road

City State Zip Code
Camp Hill PA 17011

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

Name of Employer Sordoni Construction Services Occupation
Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.4195

Amount of Each Receipt this Period
2400.00

Contribution

C. Full Name (Last, First, Middle Initial)
William B Sordoni

Mailing Address 45 Owen Street

City State Zip Code
Forty Fort PA 18702

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

Name of Employer Sordoni Construction Services Occupation
Vice Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	1	0

Transaction ID: SA11AI.4143

Amount of Each Receipt this Period
2400.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **6800.00**

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: PAGE 35 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard A Sprague

Mailing Address 407 Rose Lane

City Haverford State PA Zip Code 19041

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

Name of Employer Sprague & Sprague Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 02 / 19 / 2010
Transaction ID: SA11AI.4115
 Amount of Each Receipt this Period 2400.00
 Contributor

B. Full Name (Last, First, Middle Initial)
Thomas A Sprague

Mailing Address 725 Waverly Road

City Bryn Mawr State PA Zip Code 19010

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

Name of Employer Sprague and Sprague Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 02 / 24 / 2010
Transaction ID: SA11AI.4119
 Amount of Each Receipt this Period 500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Scott A Stiner

Mailing Address 38 Kipling Drive

City Moosic State PA Zip Code 18507

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

Name of Employer Taylor Consulting & Contractin Occupation General Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 15 / 2010
Transaction ID: SA11AI.4157
 Amount of Each Receipt this Period 500.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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: PAGE 36 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

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

Mailing Address 1045 Mountain Road

City State Zip Code
Shavertown PA 18708

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

Name of Employer Occupation
Tammac Holding Corporation Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.4153

Amount of Each Receipt this Period
1100.00

Contribution

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

Mailing Address 1045 Mountain Road

City State Zip Code
Shavertown PA 18708

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

Name of Employer Occupation
Tammac Holding Corporation Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2010

Transaction ID: SA11AI.4151

Amount of Each Receipt this Period
2400.00

Contribution

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

Mailing Address 1045 Mountain Road

City State Zip Code
Shavertown PA 18708

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

Name of Employer Occupation
Tammac Holding Corporation Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2010

Transaction ID: SA11AI.4688

Amount of Each Receipt this Period
1428.19

In-kind - Fundraising Catering

SUBTOTAL of Receipts This Page (optional) ► **4928.19**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **SA11AI.4153**

Refund check of excessive funds sent to Robert Tambur on 4/15/2010 in the amount of 128.19.

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

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

FOR LINE NUMBER: PAGE 38 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert S. Tamburro

Mailing Address 1140 Highway 315

City State Zip Code
Wilkes Barre PA 18711

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

Name of Employer Occupation
TFP Limited Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.4622

Amount of Each Receipt this Period
1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Stephen M Tasselli

Mailing Address 136 South Parsons Drive

City State Zip Code
Mill Hall PA 17751

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

Name of Employer Occupation
Jersey Shore State Bank Sr. Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 19 / 2010

Transaction ID: SA11AI.4210

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
William W Them

Mailing Address RR 2, Box 128D

City State Zip Code
Wysox PA 18854

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

Name of Employer Occupation
Self-Employed Real Estate Broker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.4178

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Schell Ulrich
Mailing Address 1305 Adele Road
City Montoursville State PA Zip Code 17754
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 1000.00
Contribution 1000.00
Date of Receipt 02 / 23 / 2010
Transaction ID: SA11AI.4117

B. Full Name (Last, First, Middle Initial)
Claudia B Valente
Mailing Address 7055 Leestone Street
City Alexandria State VA Zip Code 22151
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 1000.00
Contribution 1000.00
Date of Receipt 02 / 06 / 2010
Transaction ID: SA11AI.4106

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: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 2400.00
Contribution 2400.00
Date of Receipt 03 / 16 / 2010
Transaction ID: SA11AI.4205

SUBTOTAL of Receipts This Page (optional) ► **4400.00**
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:	PAGE 40 / 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Sandor Yelen		Date of Receipt
	Mailing Address 1000 Citizens Bank Center 8 West Market Street		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Wilkes Barre	PA	18701
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Self-Employed		Occupation Attorney
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>	
		Transaction ID: SA11AI.4186	
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>	
		Contribution	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="99108.19"/>

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

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

FOR LINE NUMBER: PAGE 41 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
AQUA AMERICA, INC. H2O POLITICAL ACTION COMMITTEE

Mailing Address 762 West Lancaster Avenue

City State Zip Code
Bryn Mawr PA 19010

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	0

Transaction ID: SA11C.4637

Amount of Each Receipt this Period

1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
EAGLE FORUM PAC

Mailing Address P.O. Box 618

City State Zip Code
Alton IL 62002

FEC ID number of contributing federal political committee. **C** C00103937

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	9	/	2	0	1	0

Transaction ID: SA11C.4124

Amount of Each Receipt this Period

2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
FUND FOR AMERICAN OPPORTUNITY

Mailing Address PO Box 65796

City State Zip Code
Washington DC 20035

FEC ID number of contributing federal political committee. **C** C00336297

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	6	/	2	0	1	0

Transaction ID: SA11C.4109

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ►

5500.00

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

5500.00

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

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

FOR LINE NUMBER: PAGE 42 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
 Mailing Address 358 KINLEY DRIVE
 City State Zip Code
 COGAN STATION PA 17728
 FEC ID number of contributing federal political committee. **C** H0PA10078
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 72.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 7 / 2 0 1 0
Transaction ID: SA13A.4669
 Amount of Each Receipt this Period
 72.00
 Advance - PO Box Fees

B. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
 Mailing Address 358 KINLEY DRIVE
 City State Zip Code
 COGAN STATION PA 17728
 FEC ID number of contributing federal political committee. **C** H0PA10078
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 95.04
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 0 1 / 2 0 1 0
Transaction ID: SA13A.4672
 Amount of Each Receipt this Period
 23.04
 Advance - Delivery Services

C. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
 Mailing Address 358 KINLEY DRIVE
 City State Zip Code
 COGAN STATION PA 17728
 FEC ID number of contributing federal political committee. **C** H0PA10078
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 110.27
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 2 / 2 0 1 0
Transaction ID: SA13A.4670
 Amount of Each Receipt this Period
 15.23
 Advance - Meals

SUBTOTAL of Receipts This Page (optional) ► **110.27**
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: PAGE 43 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
 Mailing Address 358 KINLEY DRIVE
 City State Zip Code
 COGAN STATION PA 17728
 FEC ID number of contributing federal political committee. **C** H0PA10078
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 260.27
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 1 / 2 0 1 0
Transaction ID: SA13A.4676
 Amount of Each Receipt this Period
 150.00
 Advance- NonFederal Contribution

B. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
 Mailing Address 358 KINLEY DRIVE
 City State Zip Code
 COGAN STATION PA 17728
 FEC ID number of contributing federal political committee. **C** H0PA10078
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 273.27
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 2 / 2 0 1 0
Transaction ID: SA13A.4673
 Amount of Each Receipt this Period
 13.00
 Advance- Ticket to Luncheon

C. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
 Mailing Address 358 KINLEY DRIVE
 City State Zip Code
 COGAN STATION PA 17728
 FEC ID number of contributing federal political committee. **C** H0PA10078
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 330.50
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 3 / 2 0 1 0
Transaction ID: SA13A.4671
 Amount of Each Receipt this Period
 57.23
 Advance - Office Supplies

SUBTOTAL of Receipts This Page (optional) ► **220.23**
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: PAGE 44 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
Mailing Address 358 KINLEY DRIVE
City COGAN STATION State PA Zip Code 17728
FEC ID number of contributing federal political committee. **C** H0PA10078
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 430.50
Date of Receipt: 02 / 28 / 2010
Transaction ID: SA13A.4674
Amount of Each Receipt this Period: 100.00
Advance - County Dinner Tickets

B. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
Mailing Address 358 KINLEY DRIVE
City COGAN STATION State PA Zip Code 17728
FEC ID number of contributing federal political committee. **C** H0PA10078
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 510.50
Date of Receipt: 03 / 07 / 2010
Transaction ID: SA13A.4675
Amount of Each Receipt this Period: 80.00
Advance - Brunch Tickets

C. Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO
Mailing Address 358 KINLEY DRIVE
City COGAN STATION State PA Zip Code 17728
FEC ID number of contributing federal political committee. **C** H0PA10078
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 590.50
Date of Receipt: 03 / 15 / 2010
Transaction ID: SA13A.4667
Amount of Each Receipt this Period: 80.00
Advance - Tickets to Womens Luncheon

SUBTOTAL of Receipts This Page (optional) ► 260.00
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: PAGE 45 / 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO

Mailing Address 358 KINLEY DRIVE

City State Zip Code
COGAN STATION PA 17728

FEC ID number of contributing federal political committee. **C** H0PA10078

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 614.50

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 1 0

Transaction ID: SA13A.4678

Amount of Each Receipt this Period
 24.00

Advance - Ticket to Function

SUBTOTAL of Receipts This Page (optional)	▶	24.00
TOTAL This Period (last page this line number only)	▶	614.50

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Bradford County Republican Committee - Non Fed

Mailing Address PO Box 277

City Troy State PA Zip Code 16974

Purpose of Disbursement
Express Advocacy Advertisement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17.4238

Date of Disbursement

02 / 18 / 2010

Amount of Each Disbursement this Period

100.00

B. Full Name (Last, First, Middle Initial)
Bradford County Republican Committee - Non Fed

Mailing Address PO Box 277

City Troy State PA Zip Code 16974

Purpose of Disbursement
Dinner Tickets

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17.4531

Date of Disbursement

02 / 28 / 2010

Amount of Each Disbursement this Period

100.00

C. Full Name (Last, First, Middle Initial)
City of Wilkes-Barre

Mailing Address 40 East Market Street

City Wilkes-Barre State PA Zip Code 18701

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17.4448

Date of Disbursement

03 / 18 / 2010

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional) ▶

220.00

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Clear Channel Radio</p> <p>Mailing Address 1500 West 4th Street</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Radio Advertising Fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4295</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="78.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Comcast</p> <p>Mailing Address PO Box 3005</p> <p>City Southeastern State PA Zip Code 19398</p> <p>Purpose of Disbursement Digital Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4274</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="229.40"/></p>
<p>C. Full Name (Last, First, Middle Initial) Commonwealth of PA</p> <p>Mailing Address Department of State North Office Building</p> <p>City Harrisburg State PA Zip Code 17120</p> <p>Purpose of Disbursement Filing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4259</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="155.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

462.40

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Consolidated Sportsmen of Muncy Creek</p> <p>Mailing Address 660 Clarkstown Road</p> <p>City Muncy State PA Zip Code 17756</p> <p>Purpose of Disbursement Dinner Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4286</p> <p>Date of Disbursement MM / DD / YYYY 03 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 24.00</p>
<p>B. Full Name (Last, First, Middle Initial) Crate & Freight</p> <p>Mailing Address 506 Hepburn Street</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Delivery Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4284</p> <p>Date of Disbursement MM / DD / YYYY 03 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 41.78</p>
<p>C. Full Name (Last, First, Middle Initial) Peter DeSanto</p> <p>Mailing Address 321 Woodland Avenue</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement In-kind -Entertainment for Fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4695</p> <p>Date of Disbursement MM / DD / YYYY 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1065.78

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Fine Line Designs</p> <p>Mailing Address 232 Poplar Avenue</p> <p>City New Cumberland State PA Zip Code 17070</p> <p>Purpose of Disbursement Administrative Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4290</p> <p>Date of Disbursement 03 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p>B. Full Name (Last, First, Middle Initial) Shumanick George</p> <p>Mailing Address 61 Putman Street</p> <p>City Tunkahannock State PA Zip Code 18657</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4444</p> <p>Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 130.00</p>
<p>C. Full Name (Last, First, Middle Initial) Rocky Mount Elks Foundation</p> <p>Mailing Address 5705 Grant Creek</p> <p>City Missoula State MT Zip Code 59808</p> <p>Purpose of Disbursement Tickets to Dinner</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4444.0</p> <p>Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 130.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

580.00

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 50 / 91

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) JDM Consultants</p> <p>Mailing Address 601 Liberty Street</p> <p>City Watsonstown State PA Zip Code 17777</p> <p>Purpose of Disbursement Political Consulting Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4240</p> <p>Date of Disbursement 02 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1250.00</p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) JDM Consultants</p> <p>Mailing Address 601 Liberty Street</p> <p>City Watsonstown State PA Zip Code 17777</p> <p>Purpose of Disbursement Reimbursed Expenses-See Memos</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4533</p> <p>Date of Disbursement 02 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 279.72</p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) US Postmaster- Watsonstown</p> <p>Mailing Address 316 Main Street</p> <p>City Watsonstown State PA Zip Code 17777</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4533.0</p> <p>Date of Disbursement 01 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 88.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1529.72

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The Pierce Street Deli

Mailing Address 517 Pierce Street

City Kingston State PA Zip Code 18704

Purpose of Disbursement
Food for Announcement Stop

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4533.1
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	0

Amount of Each Disbursement this Period

132.29

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Perkins Restaurant

Mailing Address 309 North Derr Drive

City Lewisburg State PA Zip Code 17837

Purpose of Disbursement
Food for Media Event

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4533.2
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	0

Amount of Each Disbursement this Period

46.76

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
KMart

Mailing Address 1915 E. Third Street

City Williamsport State PA Zip Code 17701

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4533.3
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	0

Amount of Each Disbursement this Period

12.67

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) JDM Consultants</p> <p>Mailing Address 601 Liberty Street</p> <p>City: Watsontown State: PA Zip Code: 17777</p> <p>Purpose of Disbursement: Mileage Reimbursement</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4535</p> <p>Date of Disbursement: 02 / 11 / 2010</p> <p>Amount of Each Disbursement this Period: 74.00</p>
<p>B. Full Name (Last, First, Middle Initial) JDM Consultants</p> <p>Mailing Address 601 Liberty Street</p> <p>City: Watsontown State: PA Zip Code: 17777</p> <p>Purpose of Disbursement: Political Consulting</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4536</p> <p>Date of Disbursement: 03 / 22 / 2010</p> <p>Amount of Each Disbursement this Period: 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) JDM Consultants</p> <p>Mailing Address 601 Liberty Street</p> <p>City: Watsontown State: PA Zip Code: 17777</p> <p>Purpose of Disbursement: Mileage Reimbursement</p> <p>Candidate Name: _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4537</p> <p>Date of Disbursement: 03 / 22 / 2010</p> <p>Amount of Each Disbursement this Period: 138.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2712.50

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
JDM Consultants

Transaction ID: SB17.4538
Date of Disbursement

Mailing Address 601 Liberty Street

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	0

City State Zip Code
Watsontown PA 17777

Amount of Each Disbursement this Period

3656.31

Purpose of Disbursement
Reimbursable Expenses- See Memos

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 3010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Comfort Inn Riverfront

Transaction ID: SB17.4538.0
Date of Disbursement

Mailing Address 525 South Front Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	0

City State Zip Code
Harrisburg PA 17104

Amount of Each Disbursement this Period

94.34

Purpose of Disbursement
Travel - Lodging

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Harrisburg Hilton

Transaction ID: SB17.4538.1
Date of Disbursement

Mailing Address Market and Second Sts

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	0

City State Zip Code
Harrisburg PA 17101

Amount of Each Disbursement this Period

1229.99

Purpose of Disbursement
Meet & Greet Reception- Catering

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

3656.31

TOTAL This Period (last page this line number only)

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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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Raspberry Creative

Transaction ID: SB17.4538.2
Date of Disbursement

Mailing Address 241 Paxtonville Road

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	1	0

City Middleburg State PA Zip Code 17842

Amount of Each Disbursement this Period

280.00

Purpose of Disbursement
Letterhead and Logo Design

Category/Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Raspberry Creative

Transaction ID: SB17.4538.3
Date of Disbursement

Mailing Address 241 Paxtonville Road

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	0

City Middleburg State PA Zip Code 17842

Amount of Each Disbursement this Period

60.83

Purpose of Disbursement
Business Cards

Category/Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Sunoco Service Station - Allenwood

Transaction ID: SB17.4538.4
Date of Disbursement

Mailing Address 421 N. Main Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	0

City Muncy State PA Zip Code 17756

Amount of Each Disbursement this Period

44.30

Purpose of Disbursement
Travel - Fuel

Category/Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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**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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Short Stop	Transaction ID: SB17.4538.5 Date of Disbursement
	Mailing Address 1020 Main Street	<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Watsonstown State PA Zip Code 17777	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel - Fuel	<input type="text" value="29.82"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Lewisburg Hotel	Transaction ID: SB17.4538.6 Date of Disbursement
	Mailing Address 136 Market Street	<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Lewisburg State PA Zip Code 17837	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel - Dinner	<input type="text" value="62.74"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB17.4538.7 Date of Disbursement
	Mailing Address 1915 E. Third Street	<input type="text" value="02"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Williamsport State PA Zip Code 17701	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies	<input type="text" value="8.48"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The James Restaurant

Mailing Address 100 Pine Street

City Williamsport State PA Zip Code 17701

Purpose of Disbursement
Business Dinner

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4538.8
Date of Disbursement

02 / 09 / 2010

Amount of Each Disbursement this Period

19.73

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 1915 E. Third Street

City Williamsport State PA Zip Code 17701

Purpose of Disbursement
Copies of Petitions

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4538.9
Date of Disbursement

02 / 14 / 2010

Amount of Each Disbursement this Period

382.55

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 1915 E. Third Street

City Williamsport State PA Zip Code 17701

Purpose of Disbursement
Petition Letters

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4538.10
Date of Disbursement

02 / 15 / 2010

Amount of Each Disbursement this Period

123.07

[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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) US Postmaster	Transaction ID: SB17.4538.11 Date of Disbursement																			
	Mailing Address Center City Finance Station	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	3		2	0	1	0												
	City Williamsport State PA Zip Code 17703	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Postage	<table border="1"><tr><td>88.00</td></tr></table>	88.00																		
88.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Crate & Freight	Transaction ID: SB17.4538.12 Date of Disbursement																			
	Mailing Address 506 Hepburn Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	1	0												
	City Williamsport State PA Zip Code 17701	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Postage	<table border="1"><tr><td>360.25</td></tr></table>	360.25																		
360.25																					
	Candidate Name NATIONAL RIFLE ASSOCIATION (INSTITUTE FOR LEGISLATIVE ACTION)	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) The River Stone Inn	Transaction ID: SB17.4538.13 Date of Disbursement																			
	Mailing Address RR6, Box 1628	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	9		2	0	1	0												
	City Towanda State PA Zip Code 18848	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Business Dinner	<table border="1"><tr><td>51.09</td></tr></table>	51.09																		
51.09																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 25505

City State Zip Code
Lehigh Valley PA 18002

Purpose of Disbursement
Digital Telephone Service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4538.14
Date of Disbursement

02 / 28 / 2010

Amount of Each Disbursement this Period

54.54

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Raspberry Creative

Mailing Address 241 Paxtonville Road

City State Zip Code
Middleburg PA 17842

Purpose of Disbursement
Letterhead & Envelopes

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4538.15
Date of Disbursement

02 / 04 / 2010

Amount of Each Disbursement this Period

766.58

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Jersey Shore State Bank

Mailing Address 300 Market Street

City State Zip Code
Williamsport PA 17701

Purpose of Disbursement
Checks and Deposit Slips

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4263
Date of Disbursement

02 / 09 / 2010

Amount of Each Disbursement this Period

23.40

SUBTOTAL of Disbursements This Page (optional) ▶

23.40

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 59 / 91

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Angela Kaiser <hr/> Mailing Address 216 Reservoir Road <hr/> City Williamsport State PA Zip Code 17701 <hr/> Purpose of Disbursement In-kind - Campaign Office Rent for Jan thru March Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4705 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1296.00
B.	Full Name (Last, First, Middle Initial) Long Nyquist Consulting <hr/> Mailing Address 121 State Street <hr/> City Harrisburg State PA Zip Code 17101 <hr/> Purpose of Disbursement Palm Cards Candidate Name MARINO FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4281 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 2539.50
C.	Full Name (Last, First, Middle Initial) Luzerne County Republican Party-Non-Fed <hr/> Mailing Address 41 South Main Street <hr/> City Wilkes Barre State PA Zip Code 18701 <hr/> Purpose of Disbursement Express Advocacy Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4242 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4835.50

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Luzerne County Republican Party-Non-Fed</p> <p>Mailing Address 41 South Main Street</p> <p>City Wilkes Barre State PA Zip Code 18701</p> <p>Purpose of Disbursement Dinner Ticket</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4244</p> <p>Date of Disbursement 02 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p>B. Full Name (Last, First, Middle Initial) Lycoming Council of Republican Women</p> <p>Mailing Address 433 N. Market Street</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Ticket to Luncheon</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4515</p> <p>Date of Disbursement 02 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 13.00</p>
<p>C. Full Name (Last, First, Middle Initial) Lycoming Council of Republican Women</p> <p>Mailing Address 433 N. Market Street</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Tickets to Luncheon</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4527</p> <p>Date of Disbursement 03 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 80.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

143.00

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Lycoming County Conservation Mailing Address 542 County Farm House Road City Montoursville State PA Zip Code 17754 Purpose of Disbursement Tickets to Function Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4644 Date of Disbursement 03 / 23 / 2010 Amount of Each Disbursement this Period 24.00
B.	Full Name (Last, First, Middle Initial) Lycoming County Republican Committee - Non-Fed Mailing Address 166 Pine Crest Road City Jersey Shore State PA Zip Code 17740 Purpose of Disbursement Dinner Tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4292 Date of Disbursement 03 / 18 / 2010 Amount of Each Disbursement this Period 245.00
C.	Full Name (Last, First, Middle Initial) Margery Scranton Council of Republican Women Mailing Address PO Box 1242 City Scranton State PA Zip Code 18501 Purpose of Disbursement Tickets to Womens Branch Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4529 Date of Disbursement 03 / 07 / 2010 Amount of Each Disbursement this Period 80.00

SUBTOTAL of Disbursements This Page (optional) ▶	349.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Carolyn Miele			Transaction ID: SB17.4708 Date of Disbursement <input type="text" value="0"/> <input <input="" type="text" value="3"/> <input <input="" type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
	Mailing Address 802 Faxon Parkway			Amount of Each Disbursement this Period <input type="text" value="1296.00"/>		
	City Williamsport		State PA			
	Purpose of Disbursement In-kind - Campaign Office Rent Jan thru March			Category/Type		
Candidate Name						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:						
B.	Full Name (Last, First, Middle Initial) Louis D. Miele			Transaction ID: SB17.4717 Date of Disbursement <input type="text" value="0"/> <input <input="" type="text" value="3"/> <input <input="" type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
	Mailing Address 1209 Wheatfield Drive			Amount of Each Disbursement this Period <input type="text" value="1296.00"/>		
	City Williamsport		State PA			
	Purpose of Disbursement In-kind - Campaign Office Rent Jan thru March			Category/Type		
Candidate Name						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:						
C.	Full Name (Last, First, Middle Initial) Michelle Miele			Transaction ID: SB17.4714 Date of Disbursement <input type="text" value="0"/> <input <input="" type="text" value="3"/> <input <input="" type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
	Mailing Address 1918 Logan Street			Amount of Each Disbursement this Period <input type="text" value="1296.00"/>		
	City Harrisburg		State PA			
	Purpose of Disbursement In-kind - Campaign Office Rent Jan thru March			Category/Type		
Candidate Name						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:						

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3888.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Miele Sales & Service Mailing Address 410 East Third Street City Williamsport State PA Zip Code 17701 Purpose of Disbursement Trailer Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4574 Date of Disbursement 03 / 21 / 2010 Amount of Each Disbursement this Period 159.00
B.	Full Name (Last, First, Middle Initial) Miele Sales & Service Mailing Address 410 East Third Street City Williamsport State PA Zip Code 17701 Purpose of Disbursement Bumper Stickers, Yard Signs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4576 Date of Disbursement 03 / 21 / 2010 Amount of Each Disbursement this Period 4072.10
C.	Full Name (Last, First, Middle Initial) Montour County Republican Committee - Non-Fed Mailing Address PO Box 316 City Danville State PA Zip Code 17821 Purpose of Disbursement Dinner Ticket Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4257 Date of Disbursement 02 / 27 / 2010 Amount of Each Disbursement this Period 25.00

SUBTOTAL of Disbursements This Page (optional) ▶

4256.10

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Northumberland County Republican Committee Non-Fed</p> <p>Mailing Address PO Box 202</p> <p>City Northumberland State PA Zip Code 17857</p> <p>Purpose of Disbursement 2 Dinner Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4250</p> <p>Date of Disbursement MM / DD / YYYY 02 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 45.00</p>
<p>B. Full Name (Last, First, Middle Initial) Helen Ochs</p> <p>Mailing Address 12466 North Golden Mirror</p> <p>City Marana State AZ Zip Code 85658</p> <p>Purpose of Disbursement In-kind - Campaign Office Rent Jan thru March</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4711</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 1296.00</p>
<p>C. Full Name (Last, First, Middle Initial) Panera Bread</p> <p>Mailing Address 84 s. 32ND Street</p> <p>City Camp Hill State PA Zip Code 17011</p> <p>Purpose of Disbursement Travel - Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4521</p> <p>Date of Disbursement MM / DD / YYYY 02 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 15.23</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1356.23

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PayPal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Monthly Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4266</p> <p>Date of Disbursement 03 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Raspberry Creative</p> <p>Mailing Address 241 Paxtonville Road</p> <p>City Middleburg State PA Zip Code 17842</p> <p>Purpose of Disbursement Creative Design Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4276</p> <p>Date of Disbursement 03 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 315.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Red Stag Enterprises, Inc.</p> <p>Mailing Address 502 Main Street</p> <p>City Peckville State PA Zip Code 18452</p> <p>Purpose of Disbursement Political Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4236</p> <p>Date of Disbursement 02 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 4500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4845.00

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Sears Master Card Mailing Address PO Box 183082 City Columbus State OH Zip Code 43218 Purpose of Disbursement See Memos Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4452 Date of Disbursement 03 / 15 / 2010 Amount of Each Disbursement this Period 1410.06 Category/Type
B.	Full Name (Last, First, Middle Initial) Staples Mailing Address 1915 E. Third Street City Williamsport State PA Zip Code 17701 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4452.0 Date of Disbursement 02 / 04 / 2010 Amount of Each Disbursement this Period 97.46 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Sunoco Service Station Mailing Address 1300 Washington Blvd City Williamsport State PA Zip Code 17701 Purpose of Disbursement Travel - Fuel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4452.1 Date of Disbursement 02 / 05 / 2010 Amount of Each Disbursement this Period 26.11 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	1410.06
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 68 / 91

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Ramada Plaza Hotel

Mailing Address 920 Northern Blvd

City State Zip Code
S. Abington Townsh PA 18411

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4452.2
Date of Disbursement

02 / 06 / 2010

Amount of Each Disbursement this Period

109.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Sunoco Service Station- Bloomsburg

Mailing Address 510 W. Main Street

City State Zip Code
Bloomsburg PA 17815

Purpose of Disbursement
Travel - Fuel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4452.3
Date of Disbursement

02 / 06 / 2010

Amount of Each Disbursement this Period

26.01

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Denny's

Mailing Address 131 Paper Mill Road

City State Zip Code
Bloomsburg PA 17815

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4452.4
Date of Disbursement

02 / 06 / 2010

Amount of Each Disbursement this Period

21.91

[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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Sunoco Service Station - Allenwood

Transaction ID: SB17.4452.5
Date of Disbursement

Mailing Address 421 N. Main Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	1	0

City Muncy State PA Zip Code 17756

Amount of Each Disbursement this Period

36.00

Purpose of Disbursement

Travel - Fuel

Category/Type

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
Sunoco Service Station

Transaction ID: SB17.4452.6
Date of Disbursement

Mailing Address 1300 Washington Blvd

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	1	0

City Williamsport State PA Zip Code 17701

Amount of Each Disbursement this Period

51.21

Purpose of Disbursement

Travel - Fuel

Category/Type

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
Harrisburg Hilton

Transaction ID: SB17.4452.7
Date of Disbursement

Mailing Address Market and Second Sts

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	0

City Harrisburg State PA Zip Code 17101

Amount of Each Disbursement this Period

147.64

Purpose of Disbursement

Travel- Lodging

Category/Type

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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**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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The River Stone Inn

Mailing Address RR6, Box 1628

City Towanda State PA Zip Code 18848

Purpose of Disbursement
Travel - Meals
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB17.4452.8
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
KMart

Mailing Address 1915 E. Third Street

City Williamsport State PA Zip Code 17701

Purpose of Disbursement
Office Supplies
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB17.4452.9
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Sunoco Service Station

Mailing Address 1300 Washington Blvd

City Williamsport State PA Zip Code 17701

Purpose of Disbursement
Travel - Fuel
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB17.4452.10
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Sunoco Service Station</p> <p>Mailing Address 1300 Washington Blvd</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Travel - Fuel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4452.11</p> <p>Date of Disbursement MM / DD / YYYY 02 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 26.14</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Sunoco Service Station</p> <p>Mailing Address 1300 Washington Blvd</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Travel - Fuel</p> <p>Candidate Name MARINO FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4452.12</p> <p>Date of Disbursement MM / DD / YYYY 02 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 37.28</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Sunoco Service Station</p> <p>Mailing Address 1300 Washington Blvd</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Travel - Fuel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4452.13</p> <p>Date of Disbursement MM / DD / YYYY 02 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 44.99</p> <p>[MEMO ITEM]</p>

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Sons of Italy Club</p> <p>Mailing Address 144 E. Fourth Street</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4452.14</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="34.10"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002</p> <p>Purpose of Disbursement Digital Telephone Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4452.15</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="333.23"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) The UPS Store</p> <p>Mailing Address 1738 E. Third Street</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Delivery Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4452.16</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="23.71"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.4452.17 Date of Disbursement 02 / 26 / 2010
	Mailing Address 1300 Washington Blvd	Amount of Each Disbursement this Period 47.82
	City Williamsport State PA Zip Code 17701	
	Purpose of Disbursement Travel - Fuel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.4452.18 Date of Disbursement 03 / 02 / 2010
	Mailing Address 1300 Washington Blvd	Amount of Each Disbursement this Period 44.31
	City Williamsport State PA Zip Code 17701	
	Purpose of Disbursement Travel - Fuel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Co-op Fuel	Transaction ID: SB17.4452.19 Date of Disbursement 02 / 24 / 2010
	Mailing Address 2 Front Street	Amount of Each Disbursement this Period 52.99
	City Northumberland State PA Zip Code 17857	
	Purpose of Disbursement Travel - Fuel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.4452.20 Date of Disbursement																			
	Mailing Address 1300 Washington Blvd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	0												
	City Williamsport State PA Zip Code 17701	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel - Fuel	<table border="1"><tr><td>23.98</td></tr></table>	23.98																		
23.98																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.4452.21 Date of Disbursement																			
	Mailing Address 1300 Washington Blvd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	0												
	City Williamsport State PA Zip Code 17701	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel - Fuel	<table border="1"><tr><td>50.52</td></tr></table>	50.52																		
50.52																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB17.4452.22 Date of Disbursement																			
	Mailing Address 1915 E. Third Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	6		2	0	1	0												
	City Williamsport State PA Zip Code 17701	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office Supplies	<table border="1"><tr><td>58.26</td></tr></table>	58.26																		
58.26																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1915 E. Third Street</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4523</p> <p>Date of Disbursement MM / DD / YYYY 02 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 57.23</p>
<p>B. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1915 E. Third Street</p> <p>City Williamsport State PA Zip Code 17701</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4278</p> <p>Date of Disbursement MM / DD / YYYY 03 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 52.98</p>
<p>C. Full Name (Last, First, Middle Initial) Lance Strange, Jr.</p> <p>Mailing Address 117 Arnold Avenue</p> <p>City Scranton State PA Zip Code 18506</p> <p>Purpose of Disbursement Reimbursement for Membership</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.4252</p> <p>Date of Disbursement MM / DD / YYYY 02 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

135.21

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) NATIONAL RIFLE ASSOCIATION (INSTITUTE FOR LEGISLATIVE ACTION) Mailing Address 11250 WAPLES MILL ROAD City FAIRFAX State VA Zip Code 22030 Purpose of Disbursement Membership Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4252.0 Date of Disbursement 02 / 25 / 2010 Amount of Each Disbursement this Period 25.00 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Susquehanna County Republican Committee- Non Fed Mailing Address PO Box 371 City New Milford State PA Zip Code 18834 Purpose of Disbursement 2 Dinner Tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4231 Date of Disbursement 02 / 03 / 2010 Amount of Each Disbursement this Period 40.00
C.	Full Name (Last, First, Middle Initial) Susquehanna Farm Bureau Mailing Address 903 Ridge Road City Thompson State PA Zip Code 18465 Purpose of Disbursement Tickets to Candidate's Forum Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4440 Date of Disbursement 03 / 25 / 2010 Amount of Each Disbursement this Period 45.00

SUBTOTAL of Disbursements This Page (optional) ▶	85.00
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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Robert Tambur

Transaction ID: SB17.4689
Date of Disbursement

Mailing Address 1045 Mountain Road

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	0

City State Zip Code
Shavertown PA 18708

Amount of Each Disbursement this Period

1428.19

Purpose of Disbursement
In-kind - Fundraising Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
The UPS Store

Transaction ID: SB17.4525
Date of Disbursement

Mailing Address 1738 E. Third Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	0

City State Zip Code
Williamsport PA 17701

Amount of Each Disbursement this Period

23.04

Purpose of Disbursement
Delivery Service

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
US Postmaster

Transaction ID: SB17.4514
Date of Disbursement

Mailing Address Center City Finance Station

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	0

City State Zip Code
Williamsport PA 17703

Amount of Each Disbursement this Period

72.00

Purpose of Disbursement
Post Office Box Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1523.23

TOTAL This Period (last page this line number only)

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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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address Center City Finance Station</p> <p>City Williamsport State PA Zip Code 17703</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4248</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.60"/></p>
<p>B. Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address Center City Finance Station</p> <p>City Williamsport State PA Zip Code 17703</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4288</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="70.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address Center City Finance Station</p> <p>City Williamsport State PA Zip Code 17703</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.4289</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.28"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="108.88"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Transaction ID: SB17.4578
Date of Disbursement

Mailing Address PO Box 25505

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	0

City State Zip Code
Lehigh Valley PA 18002

Amount of Each Disbursement this Period

336.35

Purpose of Disbursement
Digital Telephone Service

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Wayne County Republican Committee - Non- Fed

Transaction ID: SB17.4245
Date of Disbursement

Mailing Address 7442 Main Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	1	0

City State Zip Code
Honesdale PA 18431

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Express Advocacy Advertising

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Wayne County Republican Committee - Non- Fed

Transaction ID: SB17.4247
Date of Disbursement

Mailing Address 7442 Main Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	1	0

City State Zip Code
Honesdale PA 18431

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Dinner Ticket

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

486.35

TOTAL This Period (last page this line number only)

36945.87

**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 80 / 91

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

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NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Friends of Andy Jarbola- Non-Federal

Transaction ID: SB21.4518

Date of Disbursement

Mailing Address 200 N. Washington Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	1	0

City State Zip Code
Scranton PA 18503

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

150.00

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

150.00

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4669

LOAN SOURCE Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 358 KINLEY DRIVE

City COGAN STATION State PA ZIP Code 17728

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
72.00	0.00	72.00

TERMS

Date Incurred: Date Due: None Interest Rate: 0.0000 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="72.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4672

LOAN SOURCE Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 358 KINLEY DRIVE

City COGAN STATION State PA ZIP Code 17728

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
23.04	0.00	23.04

TERMS

Date Incurred: MM DD YY Date Due: None Interest Rate: 0.0000 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="23.04"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4670

LOAN SOURCE Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 358 KINLEY DRIVE

City COGAN STATION State PA ZIP Code 17728

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15.23	0.00	15.23

TERMS

Date Incurred: M M 0 2 D D 1 2 Y Y Y Y 2 0 1 0 Date Due: None Interest Rate: 0.0000 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	15.23
TOTALS This Period (last page in this line only)	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

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

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FOR LINE NUMBER: (check only one) 13a 13b

LOANS

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4676

LOAN SOURCE Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 358 KINLEY DRIVE

City COGAN STATION State PA ZIP Code 17728

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150.00	0.00	150.00

TERMS

Date Incurred: M M 0 2, D D 2 1, Y Y Y Y 2 0 1 0

Date Due: None

Interest Rate: 0.0000 % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional) ► 150.00

TOTALS This Period (last page in this line only) ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4673

LOAN SOURCE Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 358 KINLEY DRIVE

City COGAN STATION State PA ZIP Code 17728

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
13.00	0.00	13.00

TERMS

Date Incurred: M M 0 2, D D 2 2, Y Y Y Y 2 0 1 0
 Date Due: None
 Interest Rate: 0.0000 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	13.00
TOTALS This Period (last page in this line only)	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 86 / 91
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

LOANS

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4671

LOAN SOURCE Full Name (Last, First, Middle Initial) THOMAS ANTHONY MARINO - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 358 KINLEY DRIVE	
City COGAN STATION State PA ZIP Code 17728	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
57.23	0.00	57.23

TERMS

Date Incurred M M 02 D D 23 Y Y Y Y 2010	Date Due None	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	57.23
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4674

LOAN SOURCE Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 358 KINLEY DRIVE

City COGAN STATION State PA ZIP Code 17728

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS

Date Incurred: MM DD YY Date Due: Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="100.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 88 / 91
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4675

LOAN SOURCE Full Name (Last, First, Middle Initial) THOMAS ANTHONY MARINO - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 358 KINLEY DRIVE	
City COGAN STATION State PA ZIP Code 17728	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
80.00	0.00	80.00

TERMS

Date Incurred MM DD YY 03 07 2010	Date Due None	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	80.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4667

LOAN SOURCE Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 358 KINLEY DRIVE

City COGAN STATION State PA ZIP Code 17728

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
80.00	0.00	80.00

TERMS

Date Incurred: M M 03 D D 15 Y Y Y Y 2010
 Date Due: None
 Interest Rate: 0.0000 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	80.00
TOTALS This Period (last page in this line only)	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
MARINO FOR CONGRESS

Transaction ID: SC/10.4678

LOAN SOURCE Full Name (Last, First, Middle Initial)
THOMAS ANTHONY MARINO - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 358 KINLEY DRIVE

City COGAN STATION State PA ZIP Code 17728

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
24.00	0.00	24.00

TERMS

Date Incurred: MM DD YY

Date Due:

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="24.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value="614.50"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

(Use separate schedule(s) for each numbered line)	PAGE 91 / 91
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 MARINO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Miele Sales & Service			Nature of Debt (Purpose): Remaining Balance for Yard Signs
Mailing Address 410 East Third Street			
City Williamsport	State PA	ZIP Code 17701	

Outstanding Balance Beginning This Period		Transaction ID: SD10.5059	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
9321.50	0.00	9321.50	

1) SUBTOTALS This Period This Page (optional).....	9321.50
2) TOTALS This Period (last page this line number only).....	9321.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	614.50
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	9936.00