

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 WILLIAMSPORT PA 17703

2. FEC IDENTIFICATION NUMBER C00475145 3. IS THIS REPORT NEW OR AMENDED STATE ZIP CODE STATE DISTRICT PA 10

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

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on 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 2011 through 03 31 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer John D. Moran, Jr.

Signature of Treasurer Electronically Filed by John D. Moran, Jr. Date 04 14 2011

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: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<hr/>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	59900.00	120745.69
(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)).....	59900.00	120745.69
<hr/>		
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	31157.76	102782.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	334.38	1969.34
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	30823.38	100813.17
<hr/>		
8. Cash on Hand at Close of Reporting Period (from Line 27).....	37594.98	
<hr/>		
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
<hr/>		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

**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).....

24800.00

35558.96

(ii) Unitemized.....

400.00

1588.93

(iii) TOTAL of contributions

25200.00

37147.89

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

34700.00

83597.80

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

59900.00

120745.69

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

334.38

1969.34

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

60234.38

122715.03

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	31157.76	102782.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	614.50
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	614.50
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	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.....	666.00	1016.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	31823.76	104413.01

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9184.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	60234.38
25. SUBTOTAL (add Line 23 and Line 24).....	69418.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31823.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	37594.98

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

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

FOR LINE NUMBER: PAGE 5 / 43  
(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)  
Karen T Bolus  
Mailing Address 229 Furnace Road  
City Lewisburg State PA Zip Code 17837  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Homemaker Occupation Homemaker  
Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 02 / 21 / 2011  
Transaction ID: SA11AI.9672  
Amount of Each Receipt this Period 1000.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Edmund J. Carr  
Mailing Address 1949 Newton Ransom Blvd  
City Clarks Summit State PA Zip Code 18411  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Scranton Label Inc. Occupation Owner  
Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2500.00  
Date of Receipt 03 / 24 / 2011  
Transaction ID: SA11AI.9858  
Amount of Each Receipt this Period 2500.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Nancy Crockett  
Mailing Address 918 Lockhart Street  
City Sayre State PA Zip Code 18840  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 02 / 21 / 2011  
Transaction ID: SA11AI.9674  
Amount of Each Receipt this Period 250.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3750.00  
**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 / 43  
(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)  
Amy L Decristo

Mailing Address 6740 Windfall Road

City State Zip Code  
Canton PA 17724

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

Name of Employer Occupation  
Ald Supply Inc CEO

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 04 / 2011

**Transaction ID:** SA11AI.9708

Amount of Each Receipt this Period  
1000.00

Contribution

**B.**

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

Mailing Address 316 Jordan Avenue

City State Zip Code  
Montoursville PA 17754

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

Name of Employer Occupation  
Impact Advertising Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 04 / 2011

**Transaction ID:** SA11AI.9703

Amount of Each Receipt this Period  
500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Douglas Doherty

Mailing Address 1315 Campbell Street

City State Zip Code  
Williamsport PA 17701

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

Name of Employer Occupation  
McDonald's Restaurant Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 05 / 2011

**Transaction ID:** SA11AI.9651

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

**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 7 / 43  
(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)  
Keith W Eckel

Mailing Address 1647 Falls Road

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

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation  
Farmer

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID: SA11AI.9653**

Amount of Each Receipt this Period  
2400.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Kevin A Foley

Mailing Address PO Box 432

City State Zip Code  
**Mountain Top PA 18707**

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation  
CPA

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

**Transaction ID: SA11AI.9694**

Amount of Each Receipt this Period  
1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Joseph H Gibson

Mailing Address 5040 Glenbrook Terrace NW

City State Zip Code  
**Washington DC 20016**

FEC ID number of contributing federal political committee. C

Name of Employer The Gibson Group Occupation  
Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID: SA11AI.9678**

Amount of Each Receipt this Period  
500.00

Contribution

**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: PAGE 8 / 43  
(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)  
Maria Page Grossman  
Mailing Address 7546 Hampden Lane

City State Zip Code  
**Bethesda MD 20814**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
American Continental Group Consultant

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID: SA11AI.9680**

Amount of Each Receipt this Period  
500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
John P Kameen  
Mailing Address 636 Main Street

City State Zip Code  
**Forest City PA 18421**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Forest City News, Inc. President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID: SA11AI.9849**

Amount of Each Receipt this Period  
1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Charles T. Kannebecker  
Mailing Address PO box 751

City State Zip Code  
**Dingsman Ferry PA 18328**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID: SA11AI.9851**

Amount of Each Receipt this Period  
2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... 4000.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 43  
(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: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2011

Transaction ID: SA11AI.9695

Amount of Each Receipt this Period  
2500.00

Contribution

**B.** 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: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 02 / 2011

Transaction ID: SA11AI.9669

Amount of Each Receipt this Period  
1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Jimmy Masarwa

Mailing Address 16 Orbit Lane

City State Zip Code  
Staten Island NY 10314

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

Name of Employer Occupation  
American Eagle Furniture President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 04 / 2011

Transaction ID: SA11AI.9704

Amount of Each Receipt this Period  
250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3750.00**

**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 / 43

(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)  
Kathryn S Nassberg

Mailing Address 1501 Glen Echo Road

City State Zip Code  
Williamsport PA 17701

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

Name of Employer Occupation  
Penn Square Apartments Vice President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.9692

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Howard Rothenberg

Mailing Address 102 Sturbridge Rd

City State Zip Code  
Clarks Summit PA 18411

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

Name of Employer Occupation  
Herlands Rothenberg & Lev- in Attorney

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.9847

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

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

Mailing Address PO Box 248

City State Zip Code  
Montoursville PA 17754

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

Name of Employer Occupation  
John Savoy & Son Inc. Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.9687

Amount of Each Receipt this Period

500.00

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 11 / 43  
(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)  
Ray A Thompson

Mailing Address 222 Roderick Road

City State Zip Code  
Williamsport PA 17701

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

Name of Employer Supply Source Occupation  
Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 7 / 2 0 1 1

**Transaction ID:** SA11AI.9661

Amount of Each Receipt this Period  
2400.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Carlyle Thorsen

Mailing Address 3906 Aspen Street

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Thorsen French Advocacy Occupation  
Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 1 1

**Transaction ID:** SA11AI.9701

Amount of Each Receipt this Period  
1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Duane Vanfleet

Mailing Address 820 Northway Road

City State Zip Code  
Williamsport PA 17701

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

Name of Employer St Jude Medical Occupation  
Regional Sales Manager

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

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

**Transaction ID:** SA11AI.9668

Amount of Each Receipt this Period  
1000.00

Contribution

**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 12 / 43	
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul A. Wendolowski		Date of Receipt																					
	Mailing Address 2116 Laurel Hill Road		<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>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	2		2	0	1	1														
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.9717																				
	Clarks Summit	PA	17754	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	C		500.00																					
Name of Employer Retired	Occupation Retired		Contribution																					
Receipt For: 2012	Election Cycle-to-Date ▼																							
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			500.00																					
<input type="checkbox"/> Other (specify) ▼																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	24800.00

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

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

FOR LINE NUMBER: PAGE 13 / 43  
(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)  
ACTION COMMITTEE. FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

Mailing Address 4301 Wilson Boulevard

City State Zip Code  
Arlington VA 22203

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** SA11C.9689

Amount of Each Receipt this Period  
 1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
AFLAC PAC

Mailing Address Worldwide Headquarters  
1932 Wynnton Road

City State Zip Code  
Columbus GA 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 2 9 / 2 0 1 1

**Transaction ID:** SA11C.9663

Amount of Each Receipt this Period  
 1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE. NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** SA11C.9867

Amount of Each Receipt this Period  
 1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 43

(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)  
AMERICAN INTELLECTUAL PROPERTY LAW ASSOCIATION INTELLECTUAL PROPERTY PAC

Mailing Address 241 18TH STREET SOUTH SUITE #700  
SUITE #700

City State Zip Code  
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C** C00156935

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: SA11C.9685

Amount of Each Receipt this Period

1000.00

Contribution

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

Mailing Address 208 S. Akard Street  
Suite 3521

City State Zip Code  
Dallas TX 75202

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11C.9840

Amount of Each Receipt this Period

1000.00

Contribution

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

Mailing Address PO Box 277

City State Zip Code  
Troy PA 16974

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

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

Transaction ID: SA11C.9676

Amount of Each Receipt this Period

200.00

Non-Federal Contribution

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

2200.00

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

C. Form/Schedule : **SA11C**

Permissible Funds under PA Election law

Transaction ID : **SA11C.9676**

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

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

FOR LINE NUMBER: PAGE 16 / 43  
(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)  
COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL

Mailing Address 1701 JFK Blvd, 49th Floor  
35th Floor

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 03 / 28 / 2011  
**Transaction ID:** SA11C.9864  
 Amount of Each Receipt this Period: 2500.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 Westpark Drive

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 01 / 05 / 2011  
**Transaction ID:** SA11C.9775  
 Amount of Each Receipt this Period: 5000.00  
 Contribution

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

Mailing Address 228 S. Washington St.  
Ste. 115

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 04 / 2011  
**Transaction ID:** SA11C.9778  
 Amount of Each Receipt this Period: 1000.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

**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 17 / 43

(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)  
FREE AND STRONG AMERICA PAC INC.

Mailing Address 80 Hayden Avenue

City State Zip Code  
Lexington MA 02421

FEC ID number of contributing federal political committee. **C** C00449280

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2011

Transaction ID: SA11C.9870

Amount of Each Receipt this Period

2000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
FRIENDS OF JOE PITTS

Mailing Address PO BOX 775

City State Zip Code  
Unionville PA 19375

FEC ID number of contributing federal political committee. **C** C00310136

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 04 / 2011

Transaction ID: SA11C.9699

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
HARDWOOD FEDERATION PAC, INC

Mailing Address 1111 NINETEENTH STREET, NW;  
SUITE 800

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00396671

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 25 / 2011

Transaction ID: SA11C.9862

Amount of Each Receipt this Period

1000.00

Contribution

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 43  
(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)  
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS  
Mailing Address 1750 NEW YORK AVENUE

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C70003108

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** SA11C.9877

Amount of Each Receipt this Period  

1000.00
---------

**Contribution**

**B.** Full Name (Last, First, Middle Initial)  
LARSON DESIGN GROUP PAC  
Mailing Address 1000 COMMERCE PARK DRIVE

City State Zip Code  
WILLIAMSPORT PA 17701

FEC ID number of contributing federal political committee. **C** C00366229

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** SA11C.9865

Amount of Each Receipt this Period  

500.00
--------

**Contribution**

**C.** Full Name (Last, First, Middle Initial)  
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE  
Mailing Address 1550 Crystal Drive Suite 300

City State Zip Code  
Arlington VA 22202

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	8	/	2	0	1	1

**Transaction ID:** SA11C.9714

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) ..... ► 

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

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

FOR LINE NUMBER: PAGE 19 / 43

(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)  
METLIFE INC POLITICAL PARTICIPATION FUND A - FEDERAL ONLY

Mailing Address 1095 AVENUE OF THE AMERICAS

City State Zip Code  
NEW YORK NY 10036

FEC ID number of contributing federal political committee. **C** C00493551

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 15 / 2011

Transaction ID: SA11C.9841

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 King Street  
Suite 600

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 16 / 2011

Transaction ID: SA11C.9843

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC

Mailing Address 1655 N. Fort Myer Dr.  
Suite 850

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 21 / 2011

Transaction ID: SA11C.9846

Amount of Each Receipt this Period

1500.00

Contribution

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

5000.00

**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 / 43  
(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)  
NMPAC

Mailing Address 975 F STREET, NW  
SUITE 375

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00412619

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

**Transaction ID:** SA11C.9879

Amount of Each Receipt this Period  
500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address 3 Commercial Place  
Suite 375

City Norfolk State VA Zip Code 23510

FEC ID number of contributing federal political committee. **C** C00009282

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

**Transaction ID:** SA11C.9656

Amount of Each Receipt this Period  
2000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 1 8 / 2 0 1 1

**Transaction ID:** SA11C.9844

Amount of Each Receipt this Period  
1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

**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 21 / 43  
(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)  
Realtors PAC

Mailing Address 430 North Michigan Avenue

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11C.9853

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address 1150 18TH ST., NW, #600

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00345793

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11C.9871

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address 40 WESTMINSTER STREET

City State Zip Code  
PROVIDENCE RI 02903

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11C.9697

Amount of Each Receipt this Period  
1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 43  
(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)  
TEXTRON INC. POLITICAL ACTION COMMITTEE

Mailing Address 40 WESTMINSTER STREET

City Providence State RI Zip Code 02903

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 31 / 2011  
**Transaction ID:** SA11C.9869  
 Amount of Each Receipt this Period 1000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 22945

City HIALEAH State FL Zip Code 33002

FEC ID number of contributing federal political committee. **C** C00387720

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2011  
**Transaction ID:** SA11C.9873  
 Amount of Each Receipt this Period 1000.00  
 Contribution

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

Mailing Address 1300 CONNECTICUT AVENUE, N.W.  
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00365122

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2011  
**Transaction ID:** SA11C.9875  
 Amount of Each Receipt this Period 1000.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**TOTAL** This Period (last page this line number only) ..... ► 34700.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Astral Computing, Inc.

Transaction ID: SB17.9727  
Date of Disbursement

Mailing Address PO Box 544

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	1	1

City Tarrytown State NY Zip Code 10591

Amount of Each Disbursement this Period

Purpose of Disbursement  
Email Management Service

--

200.00
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Bravo Group

Transaction ID: SB17.9881  
Date of Disbursement

Mailing Address 20 N. Second Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	1

City Harrisburg State PA Zip Code 17101

Amount of Each Disbursement this Period

Purpose of Disbursement  
Reimbursement for Lodging and Parking

--

1179.51
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Barclay Intercontinental

Transaction ID: SB17.9881.0  
Date of Disbursement

Mailing Address 111 East 45th Street

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

City New York State NY Zip Code 10017

Amount of Each Disbursement this Period

Purpose of Disbursement  
Lodging and Parking - PA Society

--

1179.51
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

1379.51
---------

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><b>A.</b> Full Name (Last, First, Middle Initial) Thomas Cahill</p> <p>Mailing Address 113 Ash Street</p> <p>City Tunkhannock State PA Zip Code 18657</p> <p>Purpose of Disbursement Win Bonus 2010 Cycle</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9753</p> <p>Date of Disbursement 01 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> 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>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9724</p> <p>Date of Disbursement 01 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 330.00</p>
<p><b>C.</b> 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>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9750</p> <p>Date of Disbursement 02 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 520.00</p>

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

1850.00

**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)  
Jason Fitzgerald

Transaction ID: SB17.9741  
Date of Disbursement

Mailing Address Penn Street

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

City State Zip Code  
Williamsport PA 17701

Amount of Each Disbursement this Period

75.00
-------

Purpose of Disbursement  
Reimbursement for Dinner Ticket

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Hammond & Associates

Transaction ID: SB17.9771  
Date of Disbursement

Mailing Address PO Box 368

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

City State Zip Code  
Falls Church VA 22040

Amount of Each Disbursement this Period

298.27
--------

Purpose of Disbursement  
Reimbursable Expense

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Hammond & Associates

Transaction ID: SB17.9740  
Date of Disbursement

Mailing Address PO Box 368

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	1	1

City State Zip Code  
Falls Church VA 22040

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Campaign Management Consulting

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

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

1373.27
---------

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)  
Hammond & Associates

Transaction ID: SB17.9763  
Date of Disbursement

Mailing Address PO Box 368

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	1	1

City Falls Church State VA Zip Code 22040

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Draw on Commission Base

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Hammond & Associates

Transaction ID: SB17.9764  
Date of Disbursement

Mailing Address PO Box 368

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	1	1

City Falls Church State VA Zip Code 22040

Amount of Each Disbursement this Period

624.43
--------

Purpose of Disbursement  
See Itemized Memos

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
COSI

Transaction ID: SB17.9764.1  
Date of Disbursement

Mailing Address 301 Pennsylvania Avenue, SE

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

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

313.93
--------

Purpose of Disbursement  
Event Catering Costs

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

1624.43
---------

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)  
Hammond & Associates

Transaction ID: SB17.9764.2  
Date of Disbursement

Mailing Address PO Box 368

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

City Falls Church State VA Zip Code 22040

Amount of Each Disbursement this Period

98.50
-------

Purpose of Disbursement  
Cost of Blast Fax  
Candidate Name

Category/  
Type

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
Hammond & Associates

Transaction ID: SB17.9764.3  
Date of Disbursement

Mailing Address PO Box 368

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

City Falls Church State VA Zip Code 22040

Amount of Each Disbursement this Period

125.00
--------

Purpose of Disbursement  
Web-based Database Manager  
Candidate Name

Category/  
Type

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Hammond & Associates

Transaction ID: SB17.9885  
Date of Disbursement

Mailing Address PO Box 368

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	1

City Falls Church State VA Zip Code 22040

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Commission Based Draw  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: District:

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

1000.00
---------

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Hammond & Associates  Mailing Address PO Box 368  City Falls Church State VA Zip Code 22040  Purpose of Disbursement See Itemized Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.9886 Date of Disbursement 03 / 29 / 2011  Amount of Each Disbursement this Period 218.00  Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Hammond & Associates  Mailing Address PO Box 368  City Falls Church State VA Zip Code 22040  Purpose of Disbursement Web Database Management Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.9886.0 Date of Disbursement 03 / 17 / 2011  Amount of Each Disbursement this Period 125.00  [MEMO ITEM]
<b>C.</b>	Full Name (Last, First, Middle Initial) Hammond & Associates  Mailing Address PO Box 368  City Falls Church State VA Zip Code 22040  Purpose of Disbursement Blast Fax Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.9886.1 Date of Disbursement 03 / 17 / 2011  Amount of Each Disbursement this Period 93.00  [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	218.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 43

<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) Hope Enterprises	Transaction ID: SB17.9735 Date of Disbursement 02 / 04 / 2011
	Mailing Address 2401 Reach Road	Amount of Each Disbursement this Period 787.58
	City Williamsport State PA Zip Code 17703	
	Purpose of Disbursement Bulk Mailing Service- Christmas Cards	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) JDM Consultants	Transaction ID: SB17.9733 Date of Disbursement 02 / 07 / 2011
	Mailing Address 601 Liberty Street	Amount of Each Disbursement this Period 3500.00
	City Watsontown State PA Zip Code 17777	
	Purpose of Disbursement Campaign Management Consulting	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) JDM Consultants	Transaction ID: SB17.9734 Date of Disbursement 02 / 26 / 2011
	Mailing Address 601 Liberty Street	Amount of Each Disbursement this Period 3500.00
	City Watsontown State PA Zip Code 17777	
	Purpose of Disbursement Campaign Management Consulting	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7787.58
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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><b>A.</b> Full Name (Last, First, Middle Initial) Long Nyquist Consulting</p> <p>Mailing Address 121 State Street</p> <p>City Harrisburg State PA Zip Code 17101</p> <p>Purpose of Disbursement Campaign Management Consulting</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9754</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7500.00"/></p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sears Master Card</p> <p>Mailing Address PO Box 183082</p> <p>City Columbus State OH Zip Code 43218</p> <p>Purpose of Disbursement See Split Entries</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9772</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>Category/Type</p>
<p><b>C.</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</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9772.0</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <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="54.70"/></p> <p><b>[MEMO ITEM]</b></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) Capitol Hill Suites	Transaction ID: SB17.9772.3 Date of Disbursement
	Mailing Address 200 C Street, SE	<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel - Lodging	<input type="text" value="414.50"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.9772.5 Date of Disbursement
	Mailing Address 1300 Washington Blvd	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Williamsport State PA Zip Code 17701	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel - Fuel	<input type="text" value="29.80"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.9772.7 Date of Disbursement
	Mailing Address 1300 Washington Blvd	<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Williamsport State PA Zip Code 17701	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel - Fuel	<input type="text" value="50.01"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> 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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bastian Tire and Auto</p> <p>Mailing Address 430 Washington Blvd</p> <p>City Willimspport State PA Zip Code 17701</p> <p>Purpose of Disbursement Auto Repairs</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9772.9</p> <p>Date of Disbursement 11 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 768.86</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Sears Master Card</p> <p>Mailing Address PO Box 183082</p> <p>City Columbus State OH Zip Code 43218</p> <p>Purpose of Disbursement See Split Entries</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9773</p> <p>Date of Disbursement 02 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Sunoco Service Station - Allenwood</p> <p>Mailing Address 421 N. Main Street</p> <p>City Muncy State PA Zip Code 17756</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</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9773.0</p> <p>Date of Disbursement 12 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 61.53</p> <p><b>[MEMO ITEM]</b></p>

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

2500.00

**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) Exxon Mobil Williamsport	Transaction ID: SB17.9773.2 Date of Disbursement 12 / 15 / 2010
	Mailing Address 1005 Heilman Road	Amount of Each Disbursement this Period 61.73
	City Montoursville State PA Zip Code 17754	
	Purpose of Disbursement Travel - Fuel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.9773.3 Date of Disbursement 12 / 17 / 2010
	Mailing Address 1300 Washington Blvd	Amount of Each Disbursement this Period 58.13
	City Williamsport State PA Zip Code 17701	
	Purpose of Disbursement Travel - Fuel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.9773.5 Date of Disbursement 12 / 22 / 2010
	Mailing Address 1300 Washington Blvd	Amount of Each Disbursement this Period 63.30
	City Williamsport State PA Zip Code 17701	
	Purpose of Disbursement Travel - Fuel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

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

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

FOR LINE NUMBER: (check only one)

<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: SB17.9773.6 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>1</td><td>2</td><td></td><td>2</td><td>4</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	1	2		2	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	4		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>40.24</td></tr></table>	40.24																		
40.24																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Sears Master Card	Transaction ID: SB17.9773.9 Date of Disbursement																			
	Mailing Address PO Box 183082	<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>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	7		2	0	1	1												
	City Columbus State OH Zip Code 43218	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Interest Charge	<table border="1"><tr><td>84.79</td></tr></table>	84.79																		
84.79																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Sunoco Service Station	Transaction ID: SB17.9773.11 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>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	1	1												
	City Williamsport State PA Zip Code 17701	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel - Fuel	<table border="1"><tr><td>58.06</td></tr></table>	58.06																		
58.06																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
<b>TOTAL</b> 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)  
Triangle Tavern

Mailing Address 300 Shiffer Avenue

City Williamsport State PA Zip Code 17701

Purpose of Disbursement  
Staff Dinner

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.9773.14  
Date of Disbursement

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

Amount of Each Disbursement this Period

217.24
--------

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Capitol Hill Brewing Company

Mailing Address 2 Massachusetts Avenue

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Inaugural -Meals

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.9773.16  
Date of Disbursement

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

Amount of Each Disbursement this Period

302.97
--------

[MEMO ITEM]

C.

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 Split Entries

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.9774  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	1

Amount of Each Disbursement this Period

2628.99
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SUBTOTAL of Disbursements This Page (optional) .....

2628.99
---------

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><b>A.</b> Full Name (Last, First, Middle Initial) Washington Court Hotel</p> <p>Mailing Address 525 New Jersey Avenue, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Travel - Lodging</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9774.0 <b>Date of Disbursement</b> 01 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 1100.31</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sunoco Service Station - Allenwood</p> <p>Mailing Address 421 N. Main Street</p> <p>City Muncy State PA Zip Code 17756</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9774.1 <b>Date of Disbursement</b> 01 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 40.21</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Liason Capitol Hill</p> <p>Mailing Address 415 New Jersey Ave, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Business Meeting</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9774.4 <b>Date of Disbursement</b> 01 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 207.25</p> <p><b>[MEMO ITEM]</b></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><b>A.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 First Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Business Meeting</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9774.5</p> <p>Date of Disbursement 01 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 163.88</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Congressional Institute</p> <p>Mailing Address 1001 N. Fairfax Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Congressional Retreat Fees</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9774.6</p> <p>Date of Disbursement 02 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 1044.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 First Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Business Meeting</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.9774.7</p> <p>Date of Disbursement 02 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 143.43</p> <p><b>[MEMO ITEM]</b></p>

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

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

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

FOR LINE NUMBER:  
(check only one)

<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) Capitol Hill Club	Transaction ID: SB17.9774.8 Date of Disbursement 02 / 17 / 2011
	Mailing Address 300 First Street, SE	Amount of Each Disbursement this Period 538.56
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Business Meeting	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: SB17.9774.9 Date of Disbursement 03 / 01 / 2011
	Mailing Address 300 First Street, SE	Amount of Each Disbursement this Period 7.14
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Meals	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB17.9729 Date of Disbursement 01 / 17 / 2011
	Mailing Address 1915 E. Third Street	Amount of Each Disbursement this Period 79.03
	City Williamsport State PA Zip Code 17701	
	Purpose of Disbursement Office Supplies	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	79.03
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<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><b>A.</b></p> <p>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 Tax Preparation Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9730</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.20"/></p>
<p><b>B.</b></p> <p>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>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9739</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.18"/></p>
<p><b>C.</b></p> <p>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 PO Box Annual Fee and Stamps</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9728</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <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="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="114.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="165.38"/>
<b>TOTAL</b> 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

<p><b>A.</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 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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9731</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <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="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.15"/></p> <p>Category/Type</p>
<p><b>B.</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9726</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="152.62"/></p> <p>Category/Type</p>
<p><b>C.</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 Wireless Telephone 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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.9755</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="158.22"/></p> <p>Category/Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="326.99"/>
<b>TOTAL</b> 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)

PAGE 41 / 43

<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

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)  
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: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.9787

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
0	3		1	2		2	0	1	1

Amount of Each Disbursement this Period

153.22
--------

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

153.22
--------

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

30586.40
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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)

PAGE 42 / 43

<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)  
Lackawanna County Republican Committee

Mailing Address 400 Spruce Street

City State Zip Code  
Scranton PA 18503

Purpose of Disbursement  
Dinner Tickets and Program Advertisement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21.9759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ..... ▶

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

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
MARINO FOR CONGRESS

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Thomas Cahill			Nature of Debt (Purpose): Win Bonus
Mailing Address 113 Ash Street			
City Tunkhannock	State PA	ZIP Code 18657	

Outstanding Balance Beginning This Period 1000.00		Transaction ID: SD10.9487	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Long Nyquist Consulting			Nature of Debt (Purpose): Campaign Management Consulting Fees
Mailing Address 121 State Street			
City Harrisburg	State PA	ZIP Code 17101	

Outstanding Balance Beginning This Period 7500.00		Transaction ID: SD10.9491	
Amount Incurred This Period 0.00	Payment This Period 7500.00	Outstanding Balance at Close of This Period 0.00	

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