

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Marino for Congress

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

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

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

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

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2015 through 09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Howard Rothenberg
Signature of Treasurer Howard Rothenberg [Electronically Filed] Date M M / D D / Y Y Y Y
10 / 15 / 2015

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Marino for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	155170.00	454012.54
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	155170.00	454012.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	57936.60	266026.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	57936.60	266026.13
8. Cash on Hand at Close of Reporting Period (from Line 27).....	276955.21	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	1935.62	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Marino for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	80890.00	244640.00
(ii) Unitemized	1280.00	10862.54
(iii) TOTAL of contributions from individuals	82170.00	255502.54
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	73000.00	198510.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	155170.00	454012.54
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	572.07	5459.71
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
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).....	155742.07	459472.25

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	57936.60	266026.13
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	67750.00	74953.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	125686.60	340979.13

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	246899.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	155742.07
25. SUBTOTAL (add Line 23 and Line 24).....	402641.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	125686.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	276955.21

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

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

FOR LINE NUMBER: PAGE 5 OF 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DANIEL K. ASTIN

Mailing Address 358 RING ROAD

City State Zip Code
CHADDS FORD PA 19317-9768

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

Name of Employer Occupation
CIARDI CIARDI & ASTIN ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2015

Transaction ID : SA11.5473

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KIM L. ASTIN

Mailing Address 358 RING ROAD

City State Zip Code
CHADDS FORD PA 19317-9768

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2015

Transaction ID : SA11.5474

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 2001 ELDEN DRIVE

City State Zip Code
CLARKS SUMMIT PA 18411-9474

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

Name of Employer Occupation
ROAD SCHOLAR TRANSPORT OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : SA11.5433

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
VINCENT BENEDETTO

Mailing Address 301 SUNSET SHORE DRIVE

City HAWLEY State PA Zip Code 18428-7041

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

Name of Employer BOLD GOLD MEDIA GROUP Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : SA11.5535

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM P. BOWDEN

Mailing Address ASHBY & GEDDES
500 DELAWARE AVE

City WILMINGTON State DE Zip Code 19801-1490

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

Name of Employer ASHBY & GEDDES Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5484

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT S. BRADY

Mailing Address 1000 N KING ST

City WILMINGTON State DE Zip Code 19801-3335

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

Name of Employer YOUNG, CONAWAY STARGATT & TAYL Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5485

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DAVID BROJACK

Mailing Address 350 COMMERCE DRIVE

City State Zip Code
SCOTT TOWNSHIP PA 18447-7738

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

Name of Employer Occupation
BROJACK LUMBER OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 26 / 2015

Transaction ID : SA11.5322

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

[MEMO ITEM]

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

Mailing Address 350 COMMERCE DRIVE

City State Zip Code
SCOTT TOWNSHIP PA 18447-7738

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

Name of Employer Occupation
BROJACK LUMBER OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2015

Transaction ID : SA11.5322B

Amount of Each Receipt this Period
-300.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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

Mailing Address 350 COMMERCE DRIVE

City State Zip Code
SCOTT TOWNSHIP PA 18447-7738

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

Name of Employer Occupation
BROJACK LUMBER OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2015

Transaction ID : SA11.5511

Amount of Each Receipt this Period
300.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DAVID BROJACK

Mailing Address 350 COMMERCE DRIVE

City State Zip Code
SCOTT TOWNSHIP PA 18447-7738

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

Name of Employer Occupation
BROJACK LUMBER OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2015

Transaction ID : SA11.5431

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 350 COMMERCE DRIVE

City State Zip Code
SCOTT TOWNSHIP PA 18447-7738

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

Name of Employer Occupation
BROJACK LUMBER OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 08 / 2015

Transaction ID : SA11.5507

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JULIA RUDOLPH CAMPBELL

Mailing Address 308 BAILEY STREET

City State Zip Code
SOUTH ABINGTON TOW PA 18411-8967

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

Name of Employer Occupation
SELF INTERIOR DESINGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11.5466

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
EDMUND J. CARR

Mailing Address 1949 NEWTON RANSOM BLVD

City	State	Zip Code
CLARKS SUMMIT	PA	18411-9628

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

Name of Employer	Occupation
SCRANTON LABEL INC	OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5456

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	State	Zip Code
CLARKS SUMMIT	PA	18411-9628

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

Name of Employer	Occupation
SCRANTON LABEL INC	OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2015

Transaction ID : SA11.5477

Amount of Each Receipt this Period
 _____ 1700.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EDMUND J. CARR

Mailing Address 1949 NEWTON RANSOM BLVD

City	State	Zip Code
CLARKS SUMMIT	PA	18411-9628

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

Name of Employer	Occupation
SCRANTON LABEL INC	OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2015

Transaction ID : SA11.5478

Amount of Each Receipt this Period
 _____ 1000.00

CONTRIBUTION

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

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

_____ 3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL W. CAVAGE

Mailing Address 116 WEST 11TH STREET

City HONESDALE State PA Zip Code 18431-1902

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

Name of Employer PIONEER CONSTRUCTION COMPANY Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2015

Transaction ID : SA11.5429

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL W. CAVAGE

Mailing Address 116 WEST 11TH STREET

City HONESDALE State PA Zip Code 18431-1902

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

Name of Employer PIONEER CONSTRUCTION COMPANY Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11.5525

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL W. CAVAGE

Mailing Address 116 WEST 11TH STREET

City HONESDALE State PA Zip Code 18431-1902

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

Name of Employer PIONEER CONSTRUCTION COMPANY Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2015

Transaction ID : SA11.5525B

Amount of Each Receipt this Period
 -300.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL W. CAVAGE

Mailing Address 116 WEST 11TH STREET

City HONESDALE State PA Zip Code 18431-1902

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

Name of Employer PIONEER CONSTRUCTION COMPANY Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2015

Transaction ID : SA11.5530

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
MR. DAVIS R. CHANT

Mailing Address 106 EAST HARFORD STREET

City MILFORD State PA Zip Code 18337-1002

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

Name of Employer SELF-EMPLOYED Occupation REALTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11.5559

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WALTER T. CHEEK JR.

Mailing Address 327 JAMES STREET

City KINGSTON State PA Zip Code 18704-5649

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5464

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 12 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
MARK S. CHEHI

Mailing Address **5 LITTLE BROOK DRIVE**

City **GREENVILLE** State **DE** Zip Code **19807-2421**

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

Name of Employer **SKADDEN, ARPS, SLATE, MEAGHER & FLOW** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5486

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD CHILDRESS

Mailing Address **PO BOX 1189**

City **WELCOME** State **NC** Zip Code **27374-1189**

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

Name of Employer **RCR** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 22 / 2015

Transaction ID : SA11.5540

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANTHONY W. CLARK

Mailing Address **ONE RODNEY SQUARE
PO BOX 636**

City **WILMINGTON** State **DE** Zip Code **19899-0636**

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

Name of Employer **SKADDEN, ARPS, SLATE, MEAGHER & FLOW** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5503

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL A. CLARK

Mailing Address 1300 PENNSYLVANIA AVENUE, NW
SUITE 700

City WASHINGTON State DC Zip Code 20004-3024

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

Name of Employer MARKCORP INC Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11.5547

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK D. COLLINS

Mailing Address 801 HILLSIDE RD

City WILMINGTON State DE Zip Code 19807-2209

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

Name of Employer RICHARDS LAYTON & FINGER Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11.5515

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 112 FATHER JOHN DR

City LAKE ARIEL State PA Zip Code 18436-4630

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11.5558

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 14 OF 87
(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)
MRS. NANCY C. CROCKETT

Mailing Address **918 LOCKHART STREET**

City **SAYRE** State **PA** Zip Code **18840-1001**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2015

Transaction ID : SA11.5555

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. O. B. CROCKETT JR.

Mailing Address **918 WEST LOCKHART STREET**

City **SAYRE** State **PA** Zip Code **18840-1001**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2015

Transaction ID : SA11.5556

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DONNA L. CULVER

Mailing Address **18 LONGACRE CT**

City **HOCKESSIN** State **DE** Zip Code **19707-2068**

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

Name of Employer **MORRIS, NICHOLS ARSHT & TUNNELL** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5487

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 15 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DANIEL J. DEFRANCESCHI

Mailing Address 12 WILLIAM HOWARD DRIVE

City State Zip Code
GLEN MILLS PA 19342-1366

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

Name of Employer Occupation
RICHARD, LAYTON & FINGER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1347.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5483

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DANIEL J. DEFRANCESCHI

Mailing Address 12 WILLIAM HOWARD DRIVE

City State Zip Code
GLEN MILLS PA 19342-1366

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

Name of Employer Occupation
RICHARD, LAYTON & FINGER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1347.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5618

Amount of Each Receipt this Period
347.50

CONTRIBUTION

EVENT CATERING

C. Full Name (Last, First, Middle Initial)
ROBERT J. DEHNEY

Mailing Address 4609 BEDFORD BLVD

City State Zip Code
WILMINGTON DE 19803-3901

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

Name of Employer Occupation
MORRIS NICHOLS ARSHT & TUNNELL ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2015

Transaction ID : SA11.5509

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

1847.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DR. ELIZABETH DEMAYE-CARUTH

Mailing Address 52 DEER LANE

City State Zip Code
HONESDALE PA 18431-1078

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

Name of Employer Occupation
MINERVA EDUCATIONAL AND WELLNESS TR HEALTH CARE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11.5551

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEITH W. ECKEL

Mailing Address 1647 FALLS ROAD

City State Zip Code
CLARKS SUMMIT PA 18411-9644

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

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4221.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5452

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

C. Full Name (Last, First, Middle Initial)
KEITH W. ECKEL

Mailing Address 1647 FALLS ROAD

City State Zip Code
CLARKS SUMMIT PA 18411-9644

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

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4221.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5452B

Amount of Each Receipt this Period
 -1521.25
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 17 OF 87
(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 18411-9644

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

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4221.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 13 2015

Transaction ID : SA11.5623

Amount of Each Receipt this Period
1521.25

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
KEITH W. ECKEL

Mailing Address 1647 FALLS ROAD

City State Zip Code
CLARKS SUMMIT PA 18411-9644

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

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4221.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 13 2015

Transaction ID : SA11.5480

Amount of Each Receipt this Period
1521.25

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DALE ENGLEHART

Mailing Address 24 HIGHWOOD RD

City State Zip Code
WYOMING PA 18644-9338

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

Name of Employer Occupation
NORTHEAST INFRASTRUCTURE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 26 2015

Transaction ID : SA11.5560

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

1771.25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
BRETT D. FALLON

Mailing Address 414 WILLOWBEND CT

City HOCKESSIN State DE Zip Code 19707-2327

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

Name of Employer MORRISJAMES Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5488

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS F. FARLEY

Mailing Address 713 WOODLOCH SPRINGS

City HAWLEY State PA Zip Code 18428-7738

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

Name of Employer KLEMEYER, FARLEY & BERNATHY, LLC Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : SA11.5536

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HAROLD E. FLACK II

Mailing Address 404 FLACK LANE

City DALLAS State PA Zip Code 18612-7720

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2015

Transaction ID : SA11.5421

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
KATHI S. FLACK

Mailing Address **280 HUNTSVILLE-IDETOWN ROAD**

City **DALLAS** State **PA** Zip Code **18612-3148**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2015

Transaction ID : SA11.5576

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HON. JONATHAN A. FRITZ

Mailing Address **101 BEECHNUT RD**

City **HONESDALE** State **PA** Zip Code **18431-9305**

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

Name of Employer **WAYNE COUNTY** Occupation **COMMISSIONER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 29 / 2015

Transaction ID : SA11.5585

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. G. RICHARD GARMAN

Mailing Address **49 LOOP ROAD**

City **MOUNTAIN TOP** State **PA** Zip Code **18707-1778**

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

Name of Employer **WAYNE MEMORIAL HEALTH SYSTEMS** Occupation **CFO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : SA11.5522

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 20 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
JOSEPH H. GIBSON

Mailing Address 5040 GLENBROOK TERRACE NW

City WASHINGTON State DC Zip Code 20016-2602

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

Name of Employer THE GIBSON GROUP Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : SA11.5581

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SALVATORE P. GIGLIO

Mailing Address 1409 BEACH LAKE HIGHWAY

City BEACH LAKE State PA Zip Code 18405-4064

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

Name of Employer WAYNE MEMORIAL HOSPITAL Occupation DEVELOPMENT OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11.5521

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NEIL B. GLASSMAN

Mailing Address 5 RED OAK ROAD

City WILMINGTON State DE Zip Code 19806-1245

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

Name of Employer BAYARD, PA Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2015

Transaction ID : SA11.5469

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT C. GRIMM

Mailing Address P.O. BOX 172

City State Zip Code
WAYMART PA 18472-0172

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

Name of Employer Occupation
GRIMM CONSTRUCTION BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2015

Transaction ID : SA11.5563

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

Mailing Address 1220 MOORGAN RIDGE CIRCLE

City State Zip Code
SHAVERTOWN PA 18708-9584

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

Name of Employer Occupation
I2M CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : SA11.5425

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK J. HARRIS

Mailing Address 729 VALLEY ROAD

City State Zip Code
MIDDLEBURG PA 17842-8836

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

Name of Employer Occupation
OWNER/OPERATOR SELF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5459

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
EDWIN HARRON

Mailing Address 1000 N KING STREET

City State Zip Code
WILMINGTON DE 19801-3335

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

Name of Employer Occupation
YOUNG CONWAY STARGATT & TAYLOR ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 08 / 2015

Transaction ID : SA11.5533

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL N. HEATH

Mailing Address 627 BOHEMIA CHURCH RD

City State Zip Code
WARWICK MD 21912-1224

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

Name of Employer Occupation
RICHARDS LAYTON & FINGER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : SA11.5514

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH LESTER HILTON

Mailing Address 255 BROAD ST

City State Zip Code
MONTOURSVILLE PA 17754-2203

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2015

Transaction ID : SA11.5552

Amount of Each Receipt this Period
1200.00
CONTRIBUTION

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

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

1950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) CHRIS S. S. ISRAEL		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015
Mailing Address 1911 WINDSOR ROAD		Transaction ID : SA11.5543
City ALEXANDRIA	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer ACG ADVOCACY	Occupation CONSULTANT	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) RICK JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2015
Mailing Address 145 HIGHFIELDS DR		Transaction ID : SA11.5554
City WILLIAMSPORT	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00	

Full Name (Last, First, Middle Initial) ELIANE KEELER		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 13 / 2015
Mailing Address 109 ESTATE DRIVE		Transaction ID : SA11.5468
City CLARKS SUMMIT	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	2200.00
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 24 OF 87
(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)
MR. JOHN S. KIESENDAHL

Mailing Address 257 SOUTHWOODS RD

City State Zip Code
HAWLEY PA 18428-7834

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

Name of Employer Occupation
WOODLOCH PINES, INC CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5578

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID L. KIRTLAND

Mailing Address 900 BATTLE STREET

City State Zip Code
SCRANTON PA 18508-2556

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

Name of Employer Occupation
DIAMOND K, INC RECYCLER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2015

Transaction ID : SA11.5430

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID L. KIRTLAND

Mailing Address 900 BATTLE STREET

City State Zip Code
SCRANTON PA 18508-2556

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

Name of Employer Occupation
DIAMOND K, INC RECYCLER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11.5526

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
JOHN HENRY KNIGHT

Mailing Address 192 SCOTT RD

City WARWICK State MD Zip Code 21912-1244

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

Name of Employer RICHARDS LAYTON & FINGER Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5489

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT J. KRAPF

Mailing Address 850 CORNER KETCH RD

City NEWARK State DE Zip Code 19711-2904

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

Name of Employer RICHARDS LAYTON & FINGER Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5490

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT G. KUKUCHKA

Mailing Address P.O. BOX 14

City TUNKHANNOCK State PA Zip Code 18657-0014

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

Name of Employer ACE ROBBINS Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : SA11.5422

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
CARL N. KUNZ III

Mailing Address **6 COLD SPRING CIR**

City **HOCKESSIN** State **DE** Zip Code **19707-2029**

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

Name of Employer **MORRISJAMES** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5491

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES J. LABAR

Mailing Address **131 OWEGO TURNPIKE**

City **WAYMART** State **PA** Zip Code **18472-3011**

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

Name of Employer **LABAR COMPUTER COMPANY** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : SA11.5519

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ADAM G. LANDIS

Mailing Address **4000 VALLEY GREEN RD**

City **WILMINGTON** State **DE** Zip Code **19807-2254**

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

Name of Employer **LANDIS RATH & COBB** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5492

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
JEFFERY ALLAN LEVINE

Mailing Address P.O. BOX 108

City State Zip Code
CARBONDALE PA 18407-0108

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

Name of Employer Occupation
HERLANDS & LEVINE LAW ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5465

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 16 S. LEXINGTON STREET

City State Zip Code
ARLINGTON VA 22204-1145

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

Name of Employer Occupation
BGR GROUP CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.5531

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. DAVID MALINOV

Mailing Address 2991 HEMLOCK FARMS

City State Zip Code
LORDS VALLEY PA 18428-9088

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2015

Transaction ID : SA11.5542

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
MR. PAUL M. MEAGHER

Mailing Address 206 BEECH GROVE ROAD

City HONESDALE State PA Zip Code 18431-4019

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

Name of Employer REMAX Occupation REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : SA11.5583

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL J. MERCHANT

Mailing Address 120 CARDINAL CIR

City HOCKESSIN State DE Zip Code 19707-2044

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

Name of Employer RICHARD LAYTON & FINGER Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5493

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KENNTH G. MILLER DDS

Mailing Address 207 SUGARBUSH ROAD

City DALTON State PA Zip Code 18414-9542

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

Name of Employer SELF Occupation ORAL & MAXILLOFACIAL SURGEON

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : SA11.5423

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL O. MILLER

Mailing Address 985 ALVIRA RD

City ALLENWOOD State PA Zip Code 17810-9569

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11.5553

Amount of Each Receipt this Period
 1200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ERIC S. MONZO

Mailing Address 500 DELAWARE AVENUE

City WILMINGTON State DE Zip Code 19801-1490

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2015

Transaction ID : SA11.5450

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. PAULINE K. MORGAN

Mailing Address 1000 N KING ST

City WILMINGTON State DE Zip Code 19801-3335

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

Name of Employer Occupation
YOUNG CONAWAY STARGATT & TAYLOR LL ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5494

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
EDMON MORTON

Mailing Address 501 COUNTRY CLUB DRIVE

City: WILMINGTON State: DE Zip Code: 19803-2430

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

Name of Employer: YOUNG CONWAY STARGATT & TAYLOR Occupation: ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 08 / 2015

Transaction ID : SA11.5534

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANDREW P. NEBZDOSKI VMD

Mailing Address 182 BEECH GROVE RD

City: HONESDALE State: PA Zip Code: 18431-4088

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

Name of Employer: WALLENPAUPACK VETERINARY CLINIC Occupation: VETERINARIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 29 / 2015

Transaction ID : SA11.5582

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RYAN NICHOLAS O' CONNOR

Mailing Address 8465 HARROW CT

City: JACKSONVILLE State: FL Zip Code: 32217-4515

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

Name of Employer: HOWARD ROTHENBERG & ASSOCIATES Occupation: ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 13 / 2015

Transaction ID : SA11.5463

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DOUGLAS B. PALLMAN

Mailing Address 1630 SUMMIT LAKE ROAD

City State Zip Code
CLARKS SUMMIT PA 18411-9591

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

Name of Employer Occupation
SUMMIT HARVEST INC SALES/MARKETING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5454

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES L. PATTON JR.

Mailing Address 123 GREENSPRING RD

City State Zip Code
WILMINGTON DE 19807-2201

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

Name of Employer Occupation
YOUNG CONAWAY STARGATT & TAYLOR LL ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11.5516

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NORMAN L. PERNICK

Mailing Address 808 BERKELEY RD

City State Zip Code
GREENVILLE DE 19807-2810

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

Name of Employer Occupation
COLE SCHOTZ PC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5502

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
GREG R. PERRY

Mailing Address 4573 LAKE ROAD

City State Zip Code
TOWANDA PA 18848-9680

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

Name of Employer Occupation
MESA PRODUCTS BUSINESS DEVELOPMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2015

Transaction ID : SA11.5443

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JULIE T. PERRY

Mailing Address 4573 LAKE ROAD

City State Zip Code
TOWANDA PA 18848-9680

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

Name of Employer Occupation
SELF FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2015

Transaction ID : SA11.5444

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARCOS A. RAMOS

Mailing Address ONE RODNEY SQUARE
920 N KING ST

City State Zip Code
WILMINGTON DE 19801-3361

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

Name of Employer Occupation
RICHARDS LAYTON & FINGER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5495

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DR. DAVID D. REYNOLDS

Mailing Address 1860 SUNRISE AVE

City HONESDALE State PA Zip Code 18431-

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

Name of Employer NORTHWESTERN GASTROENTEROLOGY Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11.5523

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BARRY D. RHOADS

Mailing Address 733 TENTH ST NW STE 400

City WASHINGTON State DC Zip Code 20001-4886

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

Name of Employer CASSIDY & ASSOCIATES Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015

Transaction ID : SA11.5414

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES V. RIGGI

Mailing Address 1309 ELKVIEW DRIVE

City CLARKS SUMMIT State PA Zip Code 18411-8880

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

Name of Employer EVERON ELECTRIC Occupation PROJECT MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : SA11.5439

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 34 OF 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
MRS. DONITA J. RODARMEL

Mailing Address 1221 WINDFIELD DRIVE

City State Zip Code
WILLIAMSPORT PA 17701-9310

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 04 2015

Transaction ID : SA11.5587

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RENNEL W. RODARMEL

Mailing Address 1221 WINDFIELD DR

City State Zip Code
WILLIAMSPORT PA 17701-9310

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

Name of Employer Occupation
ALLSTATE AGENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 04 2015

Transaction ID : SA11.5588

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

Mailing Address 5305 LITTLE FALLS RD.

City State Zip Code
ARLINGTON VA 22207-1521

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

Name of Employer Occupation
WEXLER | WALKER PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 29 2015

Transaction ID : SA11.5544

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 35 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT ROSENBERG

Mailing Address **25 LAKESIDE DRIVE**

City **SOUTH ABINGTON TOW** State **PA** Zip Code **18411-9420**

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

Name of Employer **STIFEL, NICHOLAS** Occupation **FINANICAL ADVISOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11.5467

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DEBORAH ELISE ROTHENBERG

Mailing Address **102 GENTILLY DRIVE**

City **CLARKS SUMMIT** State **PA** Zip Code **18411-1032**

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

Name of Employer **HOWARD ROTHENBERG & ASSOCIATES** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11.5462

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HOWARD ALAN ROTHENBERG

Mailing Address **102 STURBRIDGE RD**

City **CLARKS SUMMIT** State **PA** Zip Code **18411-1068**

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

Name of Employer **HOWARD ROTHENBERG & ASSOC.** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4121.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11.5481

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
HOWARD ALAN ROTHENBERG

Mailing Address 102 STURBRIDGE RD

City State Zip Code
CLARKS SUMMIT PA 18411-1068

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

Name of Employer Occupation
HOWARD ROTHENBERG & ASSOC. ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4121.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11.5482

Amount of Each Receipt this Period
1421.25

CONTRIBUTION

EXCESSIVE CONTRIBUTION, REFUND ISSUED 10/11/15, SEE OCT Q REPORT REFUND TO BE ISSUED

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

Mailing Address 56 ROVINSKY ROAD

City State Zip Code
SCOTT TOWNSHIP PA 18447-7850

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2015

Transaction ID : SA11.5447

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JEREMY W. RYAN

Mailing Address 1067 HEARTSEASE DR

City State Zip Code
WEST CHESTER PA 19382-8155

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

Name of Employer Occupation
POTTER ANDERSON CORROON ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5500

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

2671.25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. MR. JOHN C. SCHMITT		Date of Receipt M M / D D / Y Y Y Y Y 09 / 26 / 2015	
Mailing Address 251 WILLOW AVE		Transaction ID : SA11.5562	
City HOWESDALE	State PA	Zip Code 18431-1109	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer DAVIS R CHANT REALTORS	Occupation REALTOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. ERIC D. SCHWARTZ		Date of Receipt M M / D D / Y Y Y Y Y 09 / 03 / 2015	
Mailing Address 12101 N MARKET ST FL 16 PO BOX 1347		Transaction ID : SA11.5496	
City WILMINGTON	State DE	Zip Code 19899-1347	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer MORRIS NICHOLS ARSHT & TUNNELL	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. WILLIAM W. SCRANTON III		Date of Receipt M M / D D / Y Y Y Y Y 08 / 08 / 2015	
Mailing Address 527 LILY LAKE ROAD		Transaction ID : SA11.5453	
City NORTH ABINGTON TOW	State PA	Zip Code 18414-8140	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation BUSINESS EXECUTIVE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	1750.00

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

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

FOR LINE NUMBER: PAGE 38 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
FRANCIS P. SEMPA

Mailing Address 201 AMITY AVE

City OLD FORGE State PA Zip Code 18518-1047

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

Name of Employer DOJ Occupation AST.US ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : SA11.5438

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ROSEMARIE H. SHARP

Mailing Address 918 W. LOCKHART STREET

City SAYRE State PA Zip Code 18840-1001

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11.5557

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address 39 FIG AVENUE GLENBURN

City CLARKS SUMMIT State PA Zip Code 18411-7810

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

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5458

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 39 OF 87
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT P. SHEILS III

Mailing Address 1010 WOODLAND WAY

City State Zip Code
CLARKS SUMMIT PA 18411-2714

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

Name of Employer Occupation
SHEILS LAW ASSOCIATES, PC ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2015

Transaction ID : SA11.5419

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DONALD L. SHERWOOD

Mailing Address 41 SHERWOOD DRIVE

City State Zip Code
TUNKHANNOCK PA 18657-7882

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

Name of Employer Occupation
SHERWOOD CHEVROLET AUTO DEALER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : SA11.5426

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 4 QUIGLEY LN

City State Zip Code
GARNET VALLEY PA 19060-1233

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

Name of Employer Occupation
RICHARDS LAYTON & FINGER ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5497

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN F. SPALL

Mailing Address 101 ROCKY VIEW DRIVE

City State Zip Code
HAWLEY PA 18428-4536

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

Name of Employer Occupation
SPALL, RYDZEWSKI, ANDERSON ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5461

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN F. SPALL

Mailing Address 101 ROCKY VIEW DRIVE

City State Zip Code
HAWLEY PA 18428-4536

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

Name of Employer Occupation
SPALL, RYDZEWSKI, ANDERSON ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : SA11.5584

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TODD J. STEPHENS

Mailing Address 80 KERNWOOD DRIVE

City State Zip Code
HONESDALE PA 18431-3144

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

Name of Employer Occupation
MEDICAL SHOPPE LIMITED EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5579

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 41 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DAVID B. STRATTON

Mailing Address 1303 COPLEY DRIVE

City State Zip Code
WILMINGTON DE 19803-4117

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

Name of Employer Occupation
PEPPER HAMILTON LLP ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : SA11.5445

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUSAN S. STRATTON

Mailing Address 1303 COPLEY DRIVE

City State Zip Code
WILMINGTON DE 19803-4117

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : SA11.5446

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL J. SUHOSKY

Mailing Address 24 CREEKMONT LANE

City State Zip Code
LONGVIEW TX 75605-5643

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

Name of Employer Occupation
RUSSELL & SONS CONSTRUCTION MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11.5520

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 42 OF 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT L. TAMBUR

Mailing Address 1045 MOUNTAIN ROAD

City State Zip Code
SHAVERTOWN PA 18708-9753

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

Name of Employer Occupation
TAMMAC HOLDINGS SELF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11.5460

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT S. TAMBURRO

Mailing Address 1140 HIGHWAY 315

City State Zip Code
WILKES BARRE PA 18711-0911

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

Name of Employer Occupation
BURTAM CORP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : SA11.5440

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NANCY L. TIGHE

Mailing Address 1710 FALLS ROAD

City State Zip Code
CLARKS SUMMIT PA 18411-9664

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5577

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 43 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
JOEL A. WAITE

Mailing Address 1000 N KING ST

City State Zip Code
WILMINGTON DE 19801-3335

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

Name of Employer Occupation
YOUNG CONAWAY STARGATT & TAYLOR ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5498

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. MARIA E. WALBRIDGE

Mailing Address 6459 LYCOMING CREEK ROAD

City State Zip Code
COGAN STATION PA 17728-8967

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : SA11.5580

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JEFFERY M. WALTER

Mailing Address 2007 WINDSOR ROAD

City State Zip Code
ALEXANDRIA VA 22307-1108

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

Name of Employer Occupation
CAPITOL COUNSEL CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5545

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 44 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
JEFFREY R. WAXMAN

Mailing Address 1330 LOVERING AVE

City State Zip Code
WILMINGTON DE 19806-3137

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

Name of Employer Occupation
MORRISJAMES ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5499

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GREGORY W. WERKHEISER

Mailing Address 105 CEZANNE COURT

City State Zip Code
LANDENBERG PA 19350-1387

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

Name of Employer Occupation
MORRIS, NICHOLSM, ARAGT & TUNNELL LLI ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2015

Transaction ID : SA11.5476

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOANN A. WILK

Mailing Address 305 WEST GRACE STREET

City State Zip Code
OLD FORGE PA 18518-1525

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2015

Transaction ID : SA11.5418

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
EDWARD R. WILLIAMS

Mailing Address 186 GOLF HILL ROAD

City HONESDALE State PA Zip Code 18431-4170

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

Name of Employer THE METROPOLITAN AVIATION GROUP, LLC Occupation CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : SA11.5528

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address 612 TIMBER LANE

City CLARKS SUMMIT State PA Zip Code 18411-2406

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : SA11.5420

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BGR GOVERNMENT AFFAIRS, LLC

Mailing Address PO BOX 14416

City WASHINGTON State DC Zip Code 20044-4416

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5595

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

SEE ATTRIBUTION; SEE ATTRIBUTION BELOW

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
RYAN LONG

Mailing Address **16 S. LEXINGTON STREET**

City **ARLINGTON** State **VA** Zip Code **22204-1145**

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

Name of Employer **BGR GROUP** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5596

Amount of Each Receipt this Period
500.00

CONTRIBUTION

**[MEMO ITEM]
PARTNERSHIP ATTRIBUTION SEE ATTRIBUTION**

B. Full Name (Last, First, Middle Initial)
D & L REALTY

Mailing Address **400 MILL STREET**

City **DUNMORE** State **PA** Zip Code **18512-2827**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11.5455

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED;
PARTNERSHIP ATTRIBUTION REQUEST

C. Full Name (Last, First, Middle Initial)
FOX ROTHSCHILD LLP

Mailing Address **2000 MARKET ST
FL 20**

City **PHILADELPHIA** State **PA** Zip Code **19103-3222**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11.5501

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED;
PARTNERSHIP ATTRIBUTION REQUEST

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

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

3000.00

80890.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PARKWAY
SUITE 206

City METAIRIE State LA Zip Code 70006-

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015

Transaction ID : SA11.5412

Amount of Each Receipt this Period
 4000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PARKWAY
SUITE 206

City METAIRIE State LA Zip Code 70006-

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015

Transaction ID : SA11.5412B

Amount of Each Receipt this Period
 -2000.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PARKWAY
SUITE 206

City METAIRIE State LA Zip Code 70006-

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015

Transaction ID : SA11.5513

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 48 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION

Mailing Address 4301 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22203-1867

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2015

Transaction ID : SA11.5449

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 100 WEST THIRD AVE SUITE 350

City COLUMBUS State OH Zip Code 43201-7205

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11.5517

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

Mailing Address 1120 CONNECTICUT AVENUE NW SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5591

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

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

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5603

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 SEVENTH STREET, NW
SUITE 700

City WASHINGTON State DC Zip Code 20004-2801

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5594

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN INTELLECTUAL PROPERTY LAW ASSOCIATION INTELLECTUAL

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

City ARLINGTON State VA Zip Code 22202-3419

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 08 / 2015

Transaction ID : SA11.5506

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

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

Mailing Address 100 BAYER ROAD

City State Zip Code
PITTSBURGH PA 15205-9707

FEC ID number of contributing federal political committee. **C C00281162**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2015

Transaction ID : SA11.5479

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

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

Mailing Address 8400 WESTPARK DRIVE

City State Zip Code
MCLEAN VA 22102-5116

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5593

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DRINKER BIDDLE PAC

Mailing Address 1500 K ST NW
SUITE 1100

City State Zip Code
WASHINGTON DC 20005-1209

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.5504

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

11000.00

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

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

FOR LINE NUMBER: PAGE 51 OF 87
(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)
ECHOSTAR AND DISH NETWORK CORPORATION PAC

Mailing Address 1110 VERMONT AVENUE NW SUITE 750

City State Zip Code
WASHINGTON DC 20005-6322

FEC ID number of contributing federal political committee. **C C00330647**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5599

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ENTERPRISE HOLDINGS, INC. PAC

Mailing Address 600 CORPORATE PARK DRIVE

City State Zip Code
ST. LOUIS MO 63105-4204

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11.5548

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EYE OF THE TIGER PAC

Mailing Address P.O. BOX 2485

City State Zip Code
SPRINGFIELD VA 22152-0485

FEC ID number of contributing federal political committee. **C C00467431**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015

Transaction ID : SA11.5413

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
FIRST ENERGY PAC

Mailing Address **76 SOUTH MAIN STREET**

City **AKRON** State **OH** Zip Code **44308-1812**

FEC ID number of contributing federal political committee. **C C00140855**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 08 / 2015

Transaction ID : SA11.5508

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION PAC (GDC PAC)

Mailing Address **2941 FAIRVIEW PARK DR.
SUITE 100**

City **FALLS CHURCH** State **VA** Zip Code **22042-4541**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5590

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
IHEARTMEDIA, INC - CLEAR CHANNEL OUTDOOR PAC

Mailing Address **200 E BASS ROAD**

City **SAN ANTONIO** State **TX** Zip Code **78209-8328**

FEC ID number of contributing federal political committee. **C C00279216**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : SA11.5435

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 53 OF 87
(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 TRADEMARK ASSOCIATION PAC

Mailing Address **655 THIRD AVENUE
TENTH FLOOR**

City **NEW YORK** State **NY** Zip Code **10017-5646**

FEC ID number of contributing federal political committee. **C C00348243**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 28 / 2015

Transaction ID : SA11.5539

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address **1550 CRYSTAL DRIVE
SUITE 300**

City **ARLINGTON** State **VA** Zip Code **22202-4110**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2015

Transaction ID : SA11.5470

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

City **WASHINGTON** State **DC** Zip Code **20004-2601**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5601

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 54 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVENUE, NW

City WASHINGTON State DC Zip Code 20005-4171

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : SA11.5416

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C C00009985**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2015

Transaction ID : SA11.5448

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMM

Mailing Address 1101 KING STREET SUITE 600

City ALEXANDRIA State VA Zip Code 22314-2965

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5600

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMI

Mailing Address **9110 EAST NICHOLS AVENUE**

City **CENTENNIAL** State **CO** Zip Code **80112-3450**

FEC ID number of contributing federal political committee. **C C00028787**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5604

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL FEDERATION OF INDEPENDENT BUSINESS

Mailing Address **1201 F STREET NW**

City **WASHINGTON** State **DC** Zip Code **20004-1217**

FEC ID number of contributing federal political committee. **C C30001317**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 20 / 2015

Transaction ID : SA11.5417

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ROOFING CONTRACTORS ASSOCIATION ROOF PAC

Mailing Address **324 FOURTH STREET NE**

City **WASHINGTON** State **DC** Zip Code **20002-5824**

FEC ID number of contributing federal political committee. **C C00244863**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 01 / 2015

Transaction ID : SA11.5442

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
PHILIPS ELECTRONICS NORTH AMERICA CORP PAC

Mailing Address 1050 K STREET, NW
SUITE 900

City WASHINGTON State DC Zip Code 20001-4460

FEC ID number of contributing federal political committee. **C C00239780**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 28 / 2015

Transaction ID : SA11.5538

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 2 N 9TH ST

City ALLENTOWN State PA Zip Code 18101-1139

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2015

Transaction ID : SA11.5550

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

DONOR DESIGNATED

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

Mailing Address 40 WESTMINSTER STREET

City PROVIDENCE State RI Zip Code 02903-2525

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2015

Transaction ID : SA11.5441

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
THE ASCAP LEGISLATIVE FUND FOR THE ARTS

Mailing Address **ONE LINCOLN PLAZA**

City **NEW YORK** State **NY** Zip Code **10023-7129**

FEC ID number of contributing federal political committee. **C C00228296**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5589

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE RECORDING INDUSTRY ASSOCIATION OF AMERICA POLITICAL ACTI

Mailing Address **1025 F STREET NW
10TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20004-1433**

FEC ID number of contributing federal political committee. **C C00009357**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5598

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE WALT DISNEY PRODUCTIONS EMPLOYEES PAC

Mailing Address **425 3RD STREET SW, SUITE 1100**

City **WASHINGTON** State **DC** Zip Code **20024-3227**

FEC ID number of contributing federal political committee. **C C00197749**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2015

Transaction ID : SA11.5546

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

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

Mailing Address 800 CONNECTICUT AVE., NW
SUITE 1200

City WASHINGTON State DC Zip Code 20006-2736

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2015

Transaction ID : SA11.5410

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

Mailing Address 800 CONNECTICUT AVE., NW
SUITE 1200

City WASHINGTON State DC Zip Code 20006-2736

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.5602

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TWENTY-FIRST CENTURY FOX, INC. PAC (FOX PAC)

Mailing Address 400 NORTH CAPITOL STREET, NW
SUITE 890

City WASHINGTON State DC Zip Code 20001-1555

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11.5549

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address **9900 BREN ROAD EAST**

City State Zip Code
MINNETONKA MN 55343-9664

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 15 2015

Transaction ID : SA11.5472

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
UNIVERSAL MUSIC GROUP POLITICAL ACTION COMMITTEE

Mailing Address **2220 COLORADO AVENUE**

City State Zip Code
SANTA MONICA CA 90404-3506

FEC ID number of contributing federal political committee. **C C00392464**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 03 2015

Transaction ID : SA11.5409

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
VEN-PAC

Mailing Address **PO BOX 83142**

City State Zip Code
GAITHERSBURG MD 20883-3142

FEC ID number of contributing federal political committee. **C C00369660**

Name of Employer Occupation

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 30 2015

Transaction ID : SA11.5592

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

5500.00

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 60 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
VERTEX PHARMACEUTICALS INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address **1050 K STREET NW
SUITE 1125**

City **WASHINGTON** State **DC** Zip Code **20001-4954**

FEC ID number of contributing federal political committee. **C C00468660**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 08 / 2015

Transaction ID : SA11.5505

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VERTEX PHARMACEUTICALS INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address **1050 K STREET NW
SUITE 1125**

City **WASHINGTON** State **DC** Zip Code **20001-4954**

FEC ID number of contributing federal political committee. **C C00468660**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.5597

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
VIACOM INTERNATIONAL , INC PAC

Mailing Address **1501 M STREET
SUITE 1100**

City **WASHINGTON** State **DC** Zip Code **20005-1729**

FEC ID number of contributing federal political committee. **C C00167759**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 19 / 2015

Transaction ID : SA11.5411

Amount of Each Receipt this Period
1500.00
 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: (check only one)	PAGE 61 OF 87
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
WESTINGHOUSE ELECTRIC COMPANY PAC

Mailing Address 900 19TH STREET, NW
SUITE 350

City WASHINGTON State DC Zip Code 20006-2125

FEC ID number of contributing federal political committee. **C** C00346361

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2015

Transaction ID : SA11.5434

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

73000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 87
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
VICTORY FOR PENNSYLVANIA FUND

Mailing Address **824 S MILLEDGE AVE**

City **ATHENS** State **GA** Zip Code **30605-1332**

FEC ID number of contributing federal political committee. **C C00577031**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **572.07**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA12.5565

Amount of Each Receipt this Period
572.07

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. Full Name (Last, First, Middle Initial)
ADAM J. BURICK

Mailing Address **188 S MOUNTAIN BLVD**

City **MOUNTAIN TOP** State **PA** Zip Code **18707-1938**

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

Name of Employer Occupation
BURICKS AUTO SERVICE OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **33.33**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 27 / 2015

Transaction ID : SA12.5571

Amount of Each Receipt this Period
33.33

TRANSFER

[MEMO ITEM]
 JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

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

Mailing Address **10 MYSTIC DR.**

City **MOUNTAIN TOP** State **PA** Zip Code **18707-2224**

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

Name of Employer Occupation
BURICKS AUTO SERVICE OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **33.34**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 27 / 2015

Transaction ID : SA12.5572

Amount of Each Receipt this Period
33.34

TRANSFER

[MEMO ITEM]
 JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

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

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

572.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 87
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) ALLEN H. CHILDS		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015
Mailing Address 7 AURORA CT		Transaction ID : SA12.5569
City DOYLESTOWN	State PA	Zip Code 18901-2646
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 33.34	
Name of Employer BUCKS CO OPPORTUNITY COUNCIL	Occupation EXECUTIVE DIRECTOR	TRANSFER
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 33.34	[MEMO ITEM] JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

Full Name (Last, First, Middle Initial) PHILIP S. ENGLISH		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 03 / 2015
Mailing Address 1717 K ST NW		Transaction ID : SA12.5566
City WASHINGTON	State DC	Zip Code 20006-5343
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer ARENT FOX	Occupation CO-CHAIR GOVERNMENT RELATIONS	TRANSFER
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	[MEMO ITEM] JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

Full Name (Last, First, Middle Initial) MOLLY M. HOEGEN		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015
Mailing Address 41 REYNOLDS ST		Transaction ID : SA12.5567
City KINGSTON	State PA	Zip Code 18704-4724
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	TRANSFER
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 25.00	[MEMO ITEM] JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 87
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. Full Name (Last, First, Middle Initial)
DONALD M. KRONICK

Mailing Address 39 REYNOLDS ST

City KINGSTON State PA Zip Code 18704-4724

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

Name of Employer: KRONICK, KALADA AND BERDY LLC Occupation: AUDITOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **33.33**

Date of Receipt: 07 / 27 / 2015

Transaction ID : SA12.5570

Amount of Each Receipt this Period: **33.33**

TRANSFER

[MEMO ITEM]
JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

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

Mailing Address 22 SIMPSON ST #R

City WILKES BARRE State PA Zip Code 18702-1420

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

Name of Employer: INFORMATION REQUESTED PER BEST EFFC Occupation: INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **16.66**

Date of Receipt: 07 / 27 / 2015

Transaction ID : SA12.5568

Amount of Each Receipt this Period: **16.66**

TRANSFER

[MEMO ITEM]
JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

C. Full Name (Last, First, Middle Initial)
ROGER E. RIEDLEY

Mailing Address 6279 GREENHILL RD

City NEW HOPE State PA Zip Code 18938-9646

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

Name of Employer: TARA L RIEDLEY FOUNDATION Occupation: DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **33.34**

Date of Receipt: 07 / 27 / 2015

Transaction ID : SA12.5575

Amount of Each Receipt this Period: **33.34**

TRANSFER

[MEMO ITEM]
JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 65 OF 87
(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)
PAUL J. SEGEL JR.

Mailing Address 650 LANTERN HILL RD

City State Zip Code
SHAVERTOWN PA 18708-9452

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

Name of Employer Occupation
EASTERN INSURANCE INSURANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
33.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : SA12.5573

Amount of Each Receipt this Period
 33.33

TRANSFER

[MEMO ITEM]
JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

B. Full Name (Last, First, Middle Initial)
WILLIAM G. SMITH

Mailing Address R 1221 BLAIR AVE

City State Zip Code
SCRANTON PA 18508-

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
83.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : SA12.5574

Amount of Each Receipt this Period
 83.33

TRANSFER

[MEMO ITEM]
JFC ATTRIB: VICTORY FOR PENNSYLVANIA FUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

572.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. THOMAS ANTHONY MARINO		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 358 KINLEY DRIVE		Amount of Each Disbursement this Period 252.39
City COGAN STATION	State PA	
Zip Code 17728	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I2039
Candidate Name THOMAS ANTHONY MARINO	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA	District: 10	

Full Name (Last, First, Middle Initial) B. THOMAS ANTHONY MARINO		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 358 KINLEY DRIVE		Amount of Each Disbursement this Period 231.99
City COGAN STATION	State PA	
Zip Code 17728	Purpose of Disbursement MILEAGE REIMBURSEMENT	Transaction ID : SB17.I2122
Candidate Name THOMAS ANTHONY MARINO	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: PA	District: 10	

Full Name (Last, First, Middle Initial) C. PENNSYLVANIA TURNPIKE COMMISSION		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address PO BOX 67676		Amount of Each Disbursement this Period 16.40
City HARRISBURG	State PA	
Zip Code 17106	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I2123
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	252.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial)
A. THREE LOGAN SQUARE PARKING

Mailing Address 1815 CHERRY STREET

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 31 / 2015

Amount of Each Disbursement this Period: 4.00

Transaction ID : SB17.I2124

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. SENATE REPUBLICAN CAMPAIGN COMMITTEE

Mailing Address 112 STATE STREET

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement STATE PAC CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 07 / 2015

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I2050

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

Mailing Address 4934 PARKVUE DRIVE

City PITTSBURGH State PA Zip Code 15236

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 27 / 2015

Amount of Each Disbursement this Period: 4961.09

Transaction ID : SB17.I2020

SUBTOTAL of Disbursements This Page (optional)..... 5961.09

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. RYAN BARTON			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015	
Mailing Address 4934 PARKVUE DRIVE			Amount of Each Disbursement this Period 2500.00	
City PITTSBURGH	State PA	Zip Code 15236	Transaction ID : SB17.I2134	
Purpose of Disbursement STRATEGIC CONSULTING		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. RYAN BARTON			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2015	
Mailing Address 4934 PARKVUE DRIVE			Amount of Each Disbursement this Period 822.64	
City PITTSBURGH	State PA	Zip Code 15236	Transaction ID : SB17.I2135	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. RYAN BARTON			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015	
Mailing Address 4934 PARKVUE DRIVE			Amount of Each Disbursement this Period 1459.92	
City PITTSBURGH	State PA	Zip Code 15236	Transaction ID : SB17.I2136	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. RYAN BARTON			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 4934 PARKVUE DRIVE			Amount of Each Disbursement this Period 9192.93
City PITTSBURGH	State PA	Zip Code 15236	
Purpose of Disbursement CELL & DATA STIPEND		Category/ Type	Transaction ID : SB17.I2137 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. UNKNOWN			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address			Amount of Each Disbursement this Period 28.53
City	State	Zip Code	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.I2138 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. RYAN BARTON			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 4934 PARKVUE DRIVE			Amount of Each Disbursement this Period 9192.93
City PITTSBURGH	State PA	Zip Code 15236	
Purpose of Disbursement STRATEGIC CONSULTING		Category/ Type	Transaction ID : SB17.I2047
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	9192.93
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 87	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. JOYCE CASALE			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015	
Mailing Address 310 UNION AVENUE			Amount of Each Disbursement this Period 32.00	
City WILLIAMSPORT	State PA	Zip Code 17701	Transaction ID : SB17.I2045	
Purpose of Disbursement REIMBURSEMENT		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. DANIEL J. DEFRANCESCHI			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015	
Mailing Address 12 WILLIAM HOWARD DRIVE			Amount of Each Disbursement this Period 347.50	
City GLEN MILLS	State PA	Zip Code 19342-1366	Transaction ID : SB17.5618	
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type		
Candidate Name			EVENT CATERING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. KEITH W. ECKEL			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015	
Mailing Address 1647 FALLS ROAD			Amount of Each Disbursement this Period 1521.25	
City CLARKS SUMMIT	State PA	Zip Code 18411-9644	Transaction ID : SB17.5480	
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1900.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. ROBERT H. NELSON			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 1829 BAY STREET, SE			Amount of Each Disbursement this Period 3500.00
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type	Transaction ID : SB17.I2015
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. ROBERT H. NELSON			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 1829 BAY STREET, SE			Amount of Each Disbursement this Period 3605.96
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement FINANCE CONSULTING; EXPENSES		Category/ Type	Transaction ID : SB17.I2024
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. ROBERT H. NELSON			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2015
Mailing Address 1829 BAY STREET, SE			Amount of Each Disbursement this Period 3500.00
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type	Transaction ID : SB17.I2131 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	7105.96
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 87	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. ROBERT H. NELSON			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015	
Mailing Address 1829 BAY STREET, SE			Amount of Each Disbursement this Period 4123.14	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.I2132	
Purpose of Disbursement PRINTING		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015	
Mailing Address 475 L'ENFANT PLAZA SW			Amount of Each Disbursement this Period 1.96	
City D.C.	State DC	Zip Code 20260	Transaction ID : SB17.I2133	
Purpose of Disbursement POSTAGE		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ROBERT H. NELSON			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015	
Mailing Address 1829 BAY STREET, SE			Amount of Each Disbursement this Period 4123.14	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.I2038	
Purpose of Disbursement FINANCE CONSULTING; EXPENSES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	4123.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. ROBERT H. NELSON			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015	
Mailing Address 1829 BAY STREET, SE			Amount of Each Disbursement this Period 3500.00	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.I2125	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ROBERT H. NELSON			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015	
Mailing Address 1829 BAY STREET, SE			Amount of Each Disbursement this Period 281.58	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.I2127	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ROBERT H. NELSON			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015	
Mailing Address 1829 BAY STREET, SE			Amount of Each Disbursement this Period 133.00	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.I2130	
Purpose of Disbursement PRINTING		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. AMTRAK		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 50 MASSACHUSETTS AVENUE NE		Amount of Each Disbursement this Period 189.00
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I2128 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period 2.94
City D.C.	State DC	
Zip Code 20260	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I2126 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WENDY'S		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015
Mailing Address 1 DAVE THOMAS BLVD		Amount of Each Disbursement this Period 16.62
City DUBLIN	State OH	
Zip Code 43017	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB17.I2129 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. HOWARD ALAN ROTHENBERG			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015
Mailing Address 102 STURBRIDGE RD			Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5481
City CLARKS SUMMIT	State PA	Zip Code 18411-1068	
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. HOWARD ALAN ROTHENBERG			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015
Mailing Address 102 STURBRIDGE RD			Amount of Each Disbursement this Period 1421.25 Transaction ID : SB17.5482
City CLARKS SUMMIT	State PA	Zip Code 18411-1068	
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	EXCESSIVE CONTRIBUTION, REFUND ISSUED 10/11/15, SEE OCT Q REPORT
State:	District:		

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address P.O. BOX 53600			Amount of Each Disbursement this Period 29.05 Transaction ID : SB17.I2036
City PHOENIX	State AZ	Zip Code 85072	
Purpose of Disbursement CC PROCESSING		Category/ Type	
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1550.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 87
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address P.O. BOX 53600		Amount of Each Disbursement this Period 53.92 Transaction ID : SB17.I2082
City PHOENIX	State AZ	
Zip Code 85072	Purpose of Disbursement CC PROCESSING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2015
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.I2018
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2015
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.I2030
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1653.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 800.00
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement DATABASE SERVICES	Category/Type	Transaction ID : SB17.I2046
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. DISTRICT CITY CONSULTING		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 1217 DELAFIELD PLACE NW		Amount of Each Disbursement this Period 7285.00
City WASHINGTON	State DE Zip Code 20011	
Purpose of Disbursement FINANCE CONSULTING	Category/Type	Transaction ID : SB17.I2029
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. DISTRICT CITY CONSULTING		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2015
Mailing Address 1217 DELAFIELD PLACE NW		Amount of Each Disbursement this Period 2240.21
City WASHINGTON	State DE Zip Code 20011	
Purpose of Disbursement FINANCE CONSULTING	Category/Type	Transaction ID : SB17.I2033
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10325.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

A. FINE LINE DESIGNS

Full Name (Last, First, Middle Initial)
Mailing Address 232 POPLAR AVENUE

City NEW CUMBERLAND State PA Zip Code 17070

Purpose of Disbursement ACCOUNTING SERVICES CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 26 / 2015

Amount of Each Disbursement this Period: 2907.50

Transaction ID : SB17.I2032

B. LONG NYQUIST CONSULTING

Full Name (Last, First, Middle Initial)
Mailing Address 121 STATE STREET

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2015

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I2016

C. LONG NYQUIST CONSULTING

Full Name (Last, First, Middle Initial)
Mailing Address 121 STATE STREET

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 02 / 2015

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.I2023

SUBTOTAL of Disbursements This Page (optional) 4907.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. LONG NYQUIST CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015	
Mailing Address 121 STATE STREET			Amount of Each Disbursement this Period 1000.00	
City HARRISBURG	State PA	Zip Code 17101	Transaction ID : SB17.I2034	
Purpose of Disbursement STRATEGIC CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. LYCOMING COUNTY REPUBLICAN COMMITTEE - NON-FED			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015	
Mailing Address 166 PINE CREST ROAD			Amount of Each Disbursement this Period 40.00	
City JERSEY SHORE	State PA	Zip Code 17740	Transaction ID : SB17.I2043	
Purpose of Disbursement EVENT TICKETS		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. POCONO RACEWAY			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2015	
Mailing Address PO BOX 500			Amount of Each Disbursement this Period 3000.00	
City LONG POND	State PA	Zip Code 18334	Transaction ID : SB17.I2019	
Purpose of Disbursement EVENT VENUE EXPENSE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	4040.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. SEARS MASTER CARD		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address P.O. BOX 183082		Amount of Each Disbursement this Period 2527.30
City COLUMBUS	State OH	
Zip Code 43218	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I2014
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SEARS MASTER CARD		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address P.O. BOX 183082		Amount of Each Disbursement this Period 1517.86
City COLUMBUS	State OH	
Zip Code 43218	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I2022
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SEARS MASTER CARD		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address P.O. BOX 183082		Amount of Each Disbursement this Period 1655.75
City COLUMBUS	State OH	
Zip Code 43218	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I2037
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5700.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015	
Mailing Address P.O. BOX 25505			Amount of Each Disbursement this Period 140.77	
City LEHIGH VALLEY	State PA	Zip Code 18002	Transaction ID : SB17.I2017	
Purpose of Disbursement PHONE EXPENSE	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State: District:				

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2015	
Mailing Address P.O. BOX 25505			Amount of Each Disbursement this Period 139.66	
City LEHIGH VALLEY	State PA	Zip Code 18002	Transaction ID : SB17.I2027	
Purpose of Disbursement PHONE EXPENSE	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State: District:				

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2015	
Mailing Address P.O. BOX 25505			Amount of Each Disbursement this Period 141.02	
City LEHIGH VALLEY	State PA	Zip Code 18002	Transaction ID : SB17.I2040	
Purpose of Disbursement PHONE EXPENSE	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	421.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial)
A. WIDGET MAKR/MERCHANT SERVICES

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement CC PROCESSING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 30 / 2015

Amount of Each Disbursement this Period: 49.25

Transaction ID : SB17.I2021

Full Name (Last, First, Middle Initial)
B. WIDGET MAKR/MERCHANT SERVICES

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement CC PROCESSING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 04 / 2015

Amount of Each Disbursement this Period: 4.18

Transaction ID : SB17.I2026

Full Name (Last, First, Middle Initial)
C. WIDGET MAKR/MERCHANT SERVICES

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement CC PROCESSING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 19 / 2015

Amount of Each Disbursement this Period: 12.50

Transaction ID : SB17.I2028

SUBTOTAL of Disbursements This Page (optional) 65.93

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial)
A. WIDGET MAKR/MERCHANT SERVICES

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
CC PROCESSING

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Disbursement this Period
20.25

Transaction ID : SB17.I2035

Category/Type

Full Name (Last, First, Middle Initial)
B. WIDGET MAKR/MERCHANT SERVICES

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
CC PROCESSING

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Disbursement this Period
38.92

Transaction ID : SB17.I2041

Category/Type

Full Name (Last, First, Middle Initial)
C. WIDGET MAKR/MERCHANT SERVICES

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
CC PROCESSING

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 14 / 2015

Amount of Each Disbursement this Period
14.60

Transaction ID : SB17.I2042

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 73.77

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 87			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial)
A. WIDGET MAKR/MERCHANT SERVICES

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement CC PROCESSING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 02 / 2015

Amount of Each Disbursement this Period: 646.35

Transaction ID : SB17.I2080

Full Name (Last, First, Middle Initial)
B. WILLIAMSPORT LYCOMING CO COUNCIL OF REP WOMEN

Mailing Address C/O PATTY COHICK
29 LEHMAN DR

City COGAN STATION State PA Zip Code 17738

Purpose of Disbursement EVENT TICKET

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2015

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.I2031

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... 661.35

TOTAL This Period (last page this line number only)..... 57936.60

**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 85 OF 87
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. FRIENDS OF KRISTA ROGERS		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 234 GORDON ST		Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.I2044
City DUBOISTOWN	State PA	
Zip Code 17702	Purpose of Disbursement STATE CAMPAIGN CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PENNSYLVANIA FUTURE FUND		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2015
Mailing Address PO BOX 6128		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB21.I2049
City HARRISBURG	State PA	
Zip Code 17112	Purpose of Disbursement STATE PAC CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. WEST END BASEBALL ASSOCIATION		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2015
Mailing Address 433 MARKET ST		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB21.I2025
City WILLIAMSPORT	State PA	
Zip Code 17701	Purpose of Disbursement CHARITABLE DONATION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 87			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Marino for Congress

Full Name (Last, First, Middle Initial) A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 320 FIRST STREET SE			Amount of Each Disbursement this Period 60000.00
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement PARTY TRANSFER		Category/ Type	Transaction ID : SB21.I2048
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

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

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

SUBTOTAL of Disbursements This Page (optional)	60000.00
TOTAL This Period (last page this line number only)	67750.00

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

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

FOR LINE NUMBER:
 (check only one) 9
 10

NAME OF COMMITTEE (In Full)

Marino for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Camleback Lodge

Mailing Address 193 Resort Dr

City State Zip Code
 Tannersville PA 19372

Nature of Debt (Purpose):
TRAVEL

Outstanding Balance Beginning This Period **Transaction ID : SD10.529**

0.00

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

1935.62 0.00 1935.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

1) SUBTOTALS This Period This Page (optional)	1935.62
2) TOTALS This Period (last page this line number only)	1935.62
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	1935.62