



FEDERAL ELECTION COMMISSION

1325 K STREET N.W.  
WASHINGTON, D.C. 20463

THIS IS THE END OF MUR # 1539

Date Filmed 8/24/83 Camera No. --- 4

Cameraman JRL

FEDERAL ELECTION COMMISSION

All internal routing cards

12 Day Report + Comment Sheets

Original page 3 of general Counsel's Report

Attachment 3 of general Counsel's Report

Correspondence relating to conciliation

Copy of check with account number on it

Memo to Commission dated July 29, 1983 re: conciliation agreement

The above-described material was removed from this file pursuant to the following exemption provided in the Freedom of Information Act, 5 U.S.C. Section 552(b):

83040431518

- |                                     |                                                           |                                     |                                                  |
|-------------------------------------|-----------------------------------------------------------|-------------------------------------|--------------------------------------------------|
| <input type="checkbox"/>            | (1) Classified Information                                | <input type="checkbox"/>            | (6) Personal privacy                             |
| <input type="checkbox"/>            | (2) Internal rules and practices                          | <input type="checkbox"/>            | (7) Investigatory files                          |
| <input checked="" type="checkbox"/> | (3) Exempted by other statute                             | <input checked="" type="checkbox"/> | (8) Banking Information                          |
| <input type="checkbox"/>            | (4) Trade secrets and commercial or financial information | <input type="checkbox"/>            | (9) Well Information (geographic or geophysical) |
| <input checked="" type="checkbox"/> | (5) Internal Documents                                    |                                     |                                                  |

Signed Marybeth Tanant  
Date 8/10/83



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

August 4, 1983

Thomas B. Kenworthy, Treasurer  
Michael Marino for U.S. Congress Committee  
c/o Morgan, Lewis & Bockius  
2100 The Fidelity Building  
123 South Broad Street  
Philadelphia, Pennsylvania 19109

Re: MUR 1539

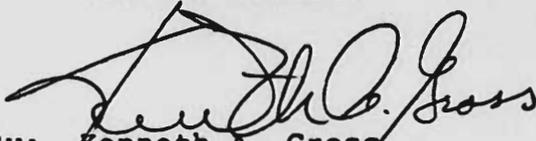
Dear Mr. Kenworthy:

On August 2, 1983, the Commission accepted the conciliation agreement signed by you and a civil penalty in settlement of a violation of 2 U.S.C. § 434(a)(2)(A), a provision of the Federal Election Campaign Act of 1971, as amended. Accordingly, the file has been closed in this matter, and it will become a part of the public record within 30 days. However, 2 U.S.C. § 437g(a)(4)(B) prohibits any information derived in connection with any conciliation attempt from becoming public without the written consent of the respondent and the Commission. Should you wish any such information to become part of the public record, please advise us in writing.

Enclosed you will find a fully executed copy of the final conciliation agreement for your files.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Kenneth A. Gross  
Associate General Counsel

Enclosure  
Conciliation agreement

83040431519



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

August 4, 1983

Uriah Fields, Agent  
Active Bond and Collection Agency  
P.O. Box 304  
Darby, Pennsylvania 19023

Re: MUR 1539

Dear Mr. Fields:

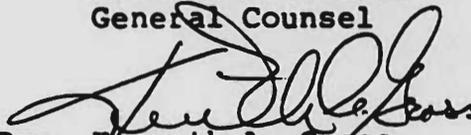
This is in reference to the complaint you filed with the Commission on March 21, 1983, concerning the Michael Marino for U.S. Congress Committee (the "Committee").

After conducting an investigation in this matter, the Commission determined there was reason to believe that the Committee violated 2 U.S.C. § 434(a)(2)(A), a provision of the Federal Election Campaign Act of 1971, as amended. On August 2, 1983, a conciliation agreement signed by the treasurer of the committee was accepted by the Commission, thereby concluding the matter. A copy of the agreement is enclosed for your information.

The file number in this matter is MUR 1539. If you have any questions, please contact Marybeth Tarrant, the staff member assigned to this matter, at 202-523-4057.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Kenneth A. Gross  
Associate General Counsel

Enclosure  
Conciliation Agreement

83040131520

In the Matter of )  
 Michael Marino for U.S. Congress Committee ) MUR 1539

**CONCILIATION AGREEMENT**

This matter was initiated by a signed, sworn, and notarized complaint by Uriah Fields, agent of the Active Bond and Collection Agency. An investigation was conducted, and reason to believe was found that the Michael Marino for U.S. Congress Committee ("Respondent") violated 2 U.S.C. § 434(a)(2)(A) by failing to timely file the 30 Day Post General Election and 1982 Year End Reports.

NOW THEREFORE, the Commission and Respondent, having participated in informal methods of conciliation, prior to a finding of probable cause to believe, do hereby agree as follows:

I. The Commission has jurisdiction over the Respondent, and the subject matter of this proceeding, and this agreement has the effect of an agreement entered pursuant to 2 U.S.C. § 437g(a)(4)(A)(i).

II. Respondent has had a reasonable opportunity to demonstrate that no action should be taken in this matter.

III. Respondent enters voluntarily into this Agreement with the Commission.

IV. The pertinent facts in this matter are as follows:

1. Respondent was the principal campaign committee for Michael Marino, Republican candidate for the House of

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Representatives from the 1st district of Pennsylvania in the November, 1982 general election.

2. Respondent filed the 30 Day Post General Election Report which was due December 2, 1982, on May 5, 1983.

3. Respondent filed the 1982 Year End Report, which was due on January 31, 1983, on May 5, 1983.

V. Respondent violated 2 U.S.C. § 434(a)(2)(A) by failing to timely file the 30 Day Post General and 1982 Year End Reports.

VI. Respondent will pay a civil penalty to the Treasurer of the United States in the amount of one hundred dollars (\$100), pursuant to 2 U.S.C. § 437g(a)(5)(A).

VII. Respondent agrees that it shall not undertake any activity which is in violation of the Federal Election Campaign Act of 1971, as amended, 2 U.S.C. § 431, et seq.

VIII. The Commission, on request of anyone filing a complaint under 2 U.S.C. § 437g(a)(1) concerning the matters at issue herein or on its own motion, may review compliance with this agreement. If the Commission believes that this agreement or any requirement thereof has been violated, it may institute a civil action for relief in the United States District Court for the District of Columbia.

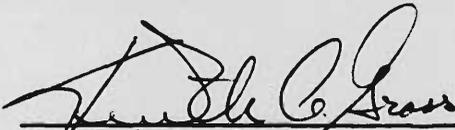
IX. This agreement shall become effective as of the date that all parties hereto have executed same and the Commission has approved the entire agreement.

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X. Respondent shall have no more than (30) days from the date this agreement becomes effective to comply with and implement the requirements contained in this agreement and to so notify the Commission.

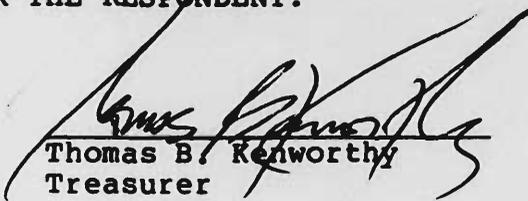
FOR THE COMMISSION:

Charles N. Steele  
General Counsel

By:   
Kenneth A. Gross

August 5, 1983  
Date

FOR THE RESPONDENT:

  
Thomas B. Kenworthy  
Treasurer

July 11, 1983  
Date

83040431510



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

Thomas B. Kenworthy, Treasurer  
Michael Marino for U.S. Congress Committee  
c/o Morgan, Lewis & Bockius  
2100 The Fidelity Building  
123 South Broad Street  
Philadelphia, Pennsylvania 19109

Re: MUR 1539

Dear Mr. Kenworthy:

On , 1983, the Commission accepted the conciliation agreement signed by you and a civil penalty in settlement of a violation of 2 U.S.C. § 434(a)(2)(A), a provision of the Federal Election Campaign Act of 1971, as amended. Accordingly, the file has been closed in this matter, and it will become a part of the public record within 30 days. However, 2 U.S.C. § 437g(a)(4)(B) prohibits any information derived in connection with any conciliation attempt from becoming public without the written consent of the respondent and the Commission. Should you wish any such information to become part of the public record, please advise us in writing.

Enclosed you will find a fully executed copy of the final conciliation agreement for your files.

Sincerely,

Charles N. Steele  
General Counsel

By: Kenneth A. Gross  
Associate General Counsel

Enclosure  
Conciliation agreement

MT  
8/3/83

83040431514



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

Uriah Fields, Agent  
Active Bond and Collection Agency  
P.O. Box 304  
Darby, Pennsylvania 19023

Re: MUR 1539

Dear Mr. Fields:

This is in reference to the complaint you filed with the Commission on March 21, 1983, concerning the Michael Marino for U.S. Congress Committee (the "Committee").

After conducting an investigation in this matter, the Commission determined there was reason to believe that the Committee violated 2 U.S.C. § 434(a)(2)(A), a provision of the Federal Election Campaign Act of 1971, as amended. On 1983, a conciliation agreement signed by the treasurer of the committee was accepted by the Commission, thereby concluding the matter. A copy of the agreement is enclosed for your information.

The file number in this matter is MUR 1539. If you have any questions, please contact Marybeth Tarrant, the staff member assigned to this matter, at 202-523-4057.

Sincerely,

Charles N. Steele  
General Counsel

By: Kenneth A. Gross  
Associate General Counsel

Enclosure  
Conciliation Agreement

MT  
9/3/83

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BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 ) MUR 1539  
Michael Marino for U.S. )  
Congress Committee )

CERTIFICATION

I, Marjorie W. Emmons, Secretary of the Federal Election Commission, do hereby certify that on August 2, 1983, the Commission decided by a vote of 5-0 to take the following actions in MUR 1539:

1. Accept the conciliation agreement as attached to the General Counsel's July 28, 1983 Memorandum to the Commission.
2. Close the file.
3. Approve the proposed letters as attached to the July 28, 1983 Memorandum.

Commissioners Aikens, Elliott, Harris, McDonald and McGarry voted affirmatively in this matter; Commissioner Reiche did not cast a vote.

Attest:

8-2-83

Date

Marjorie W. Emmons

Marjorie W. Emmons  
Secretary of the Commission

Received in Office of Commission Secretary:  
Circulated in 48 hour tally basis:

7-29-83, 2:15  
7-29-83, 2:00

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MICHAEL MARINO FOR CONGRESS  
1420 SNYDER AVE.  
PHILA., PA 19145

111

July 7 19 82 3-7337/7360

PAY TO THE  
ORDER OF

United States Treasury

\$ 100.00

One Hundred Dollars

100 DOLLARS

BURTON C  
**SIMON  
SAVINGS**  
ASSOCIATION

*John J. Kane Jr.*  
*Chairman*

FOR 11416 1539



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

June 2, 1983

Thomas B. Kenworthy, Treasurer  
Michael Marino for U.S. Congress Committee  
c/o Morgan, Lewis & Bockius  
2100 The Fidelity Building  
123 South Broad Street  
Philadelphia, Pennsylvania 19109

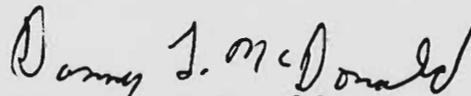
Re: MUR 1539

Dear Mr. Kenworthy:

On May 27, 1983, the Commission found reason to believe that your committee violated 2 U.S.C. § 434(a)(2)(A) by failing to timely file the 30 Day Post General Election and 1982 Year End Reports. At your request, the Commission also determined to enter into negotiations directed towards reaching a conciliation agreement in settlement of this matter prior to a finding of probable cause to believe.

Enclosed is a conciliation agreement that the Commission has approved in settlement of this matter. If you agree with the provisions of the enclosed agreement, please sign and return it, along with the civil penalty, to the Commission. Please make your check for the civil penalty payable to the U.S. Treasurer. In light of the fact that conciliation negotiations, prior to a finding of probable cause to believe, are limited to a maximum of 30 days, you should respond to this notification as soon as possible. If you have any questions or suggestions for changes in the agreement, or if you wish to arrange a meeting in connection with a mutually satisfactory conciliation agreement, please contact Marybeth Tarrant, the staff member assigned to this matter, at 202-523-4529.

Sincerely,

  
Danny L. McDonald  
Chairman

Enclosure

83040431528

BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 )  
Michael Marino for U.S. ) MUR 1539  
Congress Committee )

CERTIFICATION

I, Marjorie W. Emmons, Secretary of the Federal Election Commission, do hereby certify that on May 27, 1983, the Commission decided by a vote of 6-0 to take the following actions in MUR 1539:

1. Find reason to believe that the Michael Marino for Congress Committee violated 2 U.S.C. § 434(a)(2)(A).
2. Enter into pre-probable cause conciliation with the respondent.
3. Approve the attached conciliation agreement as submitted with the General Counsel's Report signed May 24, 1983.
4. Approve the letter as attached to the May 24, 1983 General Counsel's Report.

Commissioners Aikens, Elliott, Harris, McDonald, McGarry, and Reiche voted affirmatively for the decision.

Attest:

5/27/83  
Date

Marjorie W. Emmons  
Marjorie W. Emmons  
Secretary of the Commission

Received in Office of Commission Secretary:  
Circulated on 48 hour tally basis:

5-25-83, 9:47  
5-25-83, 4:00

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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

MEMORANDUM

TO: Office of the Commission Secretary  
FROM: Office of General Counsel *CW*  
DATE: May 25, 1983  
SUBJECT: MUR 1539 - General Counsel's Report

The attached is submitted as an Agenda document  
for the Commission Meeting of \_\_\_\_\_  
Open Session \_\_\_\_\_  
Closed Session \_\_\_\_\_

CIRCULATIONS

48 Hour Tally Vote [X]  
Sensitive [X]  
Non-Sensitive [ ]  
24 Hour No Objection [ ]  
Sensitive [ ]  
Non-Sensitive [ ]  
Information [ ]  
Sensitive [ ]  
Non-Sensitive [ ]  
Other [ ]

DISTRIBUTION

Compliance [X]  
Audit Matters [ ]  
Litigation [ ]  
Closed MUR Letters [ ]  
Status Sheets [ ]  
Advisory Opinions [ ]  
Other (see distribution below) [ ]

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SENSITIVE**

**BEFORE THE FEDERAL ELECTION COMMISSION**

RECEIVED  
OFFICE OF THE  
COMMISSION SECRETARY

In the Matter of  
Michael Marino for U.S. Congress Committee

) 83 MAY 25 A 9: 47  
)  
) MUR 1539

**GENERAL COUNSEL'S REPORT**

**I. Background**

On March 21, 1983, a complaint was filed by Uriah Fields, as an agent of the Active Bond and Collection Agency, against the Michael Marino for U.S. Congress Committee ("Respondent") \*/ alleging that the Respondent had failed to file the 30 Day Post General Election Report for 1982. In addition, the complainant stated that the Respondent had outstanding debts and, therefore, was not in a position to terminate. It was apparent from the complaint that the Active Bond and Collection Agency had been hired to collect a particular debt owed to Minute Man Press, although reports previously filed by the Respondent did not show an outstanding debt to this company.

On March 25, 1983, a letter, enclosing a copy of the complaint, was sent to Thomas B. Kenworthy, treasurer of the committee. The letter was returned to this office on April 15, 1983. On April 18, 1983, the letter was resent to a new address. The committee responded on May 5, 1983, by filing a 30 Day Post General Election Report and a 1982 Year End Report. See

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\*/ Michael Marino, Republican candidate for the House of Representatives from the 1st district of Pennsylvania, lost in the November, 1982 General Election receiving 27% of the vote.

8 3 0 4 0 4 3 1 5 3 1

Attachment 1. In addition, Mr. Kenworthy requested to enter into conciliation. See Attachment 2.

**II. Factual and Legal Analysis**

Pursuant to 2 U.S.C. § 434(a)(2)(A), an authorized committee of a congressional candidate is required to file a post-general election report. The report is to be filed no later than the 30th day after any general election in which such candidate has sought election. In addition, pursuant to that same section, the committee is required to file, in an election year, quarterly reports, which are to be filed no later than the 15th day after the last day of each calendar quarter: except that the report for the quarter ending December 31 shall be filed no later than January 31 of the following calendar year.

The committee has now filed both the 30 Day Post General Election Report and the 1982 Year End Report. The reports disclose outstanding debts totalling \$28,580.76. Included in this figure is a \$3,359.52 debt owed to Minute Man Press. The debt to this company was not incurred until the 30 Day Post General Election reporting period.

Mr. Kenworthy explained in his response that the reports had not been filed earlier due to a communications breakdown between the committee's Treasurer and the Assistant Treasurer as to post-election reporting responsibilities.

As the reports were not filed in a timely fashion, the

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General Counsel recommends that the Commission find reason to believe that the Respondent violated 2 U.S.C. § 434(a)(2)(A). In addition, the General Counsel recommends, in light of Mr. Kenworthy's request, that the Commission enter into pre-probable cause conciliation with the Respondent.

III. Recommendations

1. Find reason to believe that the Michael Marino for Congress Committee violated 2 U.S.C. § 434(a)(2)(A).
2. Enter into pre-probable cause conciliation with the Respondent.
3. Approve the attached conciliation agreement.
4. Approve the attached letter.

May 24, 1983  
Date

Charles N. Steele  
General Counsel

By:

Kenneth A. Gross  
Kenneth A. Gross  
Associate General Counsel

Attachments

1. Reports (pp. 1-39)
2. Letter from Mr. Kenworthy (p. 40)
3. Proposed conciliation agreement (pp. 41-43)
4. Proposed letter (p. 44)

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**REPORTS OF RECEIPTS AND DISBURSEMENTS**  
For Authorized Committee

(Summary Page)

*COPY*

83 MAY 5

A11: 88

①

<b>ALIGN AREA</b>	<b>1. Name of Committee (in Full)</b> Michael Marino For U.S. Congress Committee	<b>2. FEC Identification Number</b> 098515	<b>ALIGN AREA</b>
<b>Address (Number and Street)</b> 1420 Snyder Avenue		<b>3. Is this Report an Amendment?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<b>City, State and Zip Code</b> Philadelphia, PA 19145		<input type="checkbox"/> Check if address is different than previously reported.	

**Attachment 1**

**4. TYPE OF REPORT**

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
<input type="checkbox"/> July 15 Quarterly Report	
<input type="checkbox"/> October 15 Quarterly Report	<input checked="" type="checkbox"/> Thirtieth day report following the General Election on <u>November 2</u> in the State of <u>Pennsylvania</u>
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for -  Primary Election  General Election  Special Election  Runoff Election

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SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<b>5. Covering Period</b> <u>10/14/82</u> through <u>11/22/82</u>		
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (From Line 11 (e))	\$49,609.16	\$262,715.91
(b) Total Contribution Refunds (from Line 20 (d))	- 0 -	\$ 100.00
(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	\$49,609.16	\$262,615.91
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17)	\$53,279.65	\$264,559.14
(b) Total Offsets to Operating Expenditures (from Line 14)	- 0 -	\$ 360.50
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))	\$53,279.65	\$264,198.64
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)</b>	\$ 1,356.88	
<b>9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D)</b>	- 0 -	
<b>10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D)*</b>	\$28,580.76	

\*Does not include \$10,000 debt guarantee by candidate  
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-523-4068

Thomas B. Kenworthy  
Type or Print Name of Treasurer

*Thomas B. Kenworthy*  
SIGNATURE OF TREASURER

May 4, 1983  
Date

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

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

**DETAILED SUMMARY PAGE  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)**

②

Name of Committee (in Full) **Michael Marino For U.S. Congress Committee** Report Covering the Period: From: **10/14/82** To: **11/22/82**

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees . . . . .	(Memo Entry Unitemized \$ <u>15,309.16</u> )	\$31,384.16	\$209,540.91	11 (a)
(b) Political Party Committees . . . . .		\$ 1,025.00	\$ 27,025.00	11 (b)
(c) Other Political Committees . . . . .		\$17,200.00	\$ 26,150.00	11 (c)
(d) The Candidate . . . . .		- 0 -	- 0 -	11 (d)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).		\$49,609.16	\$262,715.91	11 (e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES . . . . .		- 0 -	- 0 -	12
13. LOANS:				
(a) Made or Guaranteed by the Candidate . . . . .		- 0 -	\$ 10,000.00	13 (a)
(b) All Other Loans . . . . .		\$ 2,550.00	\$ 2,550.00	13 (b)
(c) TOTAL LOANS (add 13 (a) and 13 (b)). . . . .		\$ 2,550.00	\$ 12,550.00	13 (c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) . . . . .		- 0 -	\$ 360.50	14
15. OTHER RECEIPTS (Dividends, Interest, etc.) . . . . .		- 0 -	\$ 389.61	15
16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15) . . . . .		\$52,159.16	\$276,016.02	16
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES . . . . .		\$53,279.65	\$264,559.14	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES . . . . .		- 0 -	- 0 -	18
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate . . . . .		- 0 -	- 0 -	19 (a)
(b) Of All Other Loans . . . . .		- 0 -	- 0 -	19 (b)
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)). . . . .		- 0 -	- 0 -	19 (c)
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees . . . . .		- 0 -	\$ 100.00	20 (a)
(b) Political Party Committees . . . . .		- 0 -	- 0 -	20 (b)
(c) Other Political Committees . . . . .		- 0 -	- 0 -	20 (c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c)) . . . . .		- 0 -	\$ 100.00	20 (d)
21. OTHER DISBURSEMENTS . . . . .		- 0 -	- 0 -	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21) . . . . .		\$53,279.65	\$264,659.14	22

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**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD . . . . .	\$	<u>12,477.37</u>	23
24. TOTAL RECEIPTS THIS PERIOD (From Line 16) . . . . .	\$	<u>52,159.16</u>	24
25. SUBTOTAL (Add Line 23 and Line 24) . . . . .	\$	<u>64,636.53</u>	25
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) . . . . .	\$	<u>53,279.65</u>	26
26a. Guaranteed repayment of debt treated as loan (from Line 13(a) Column B)	\$	<u>10,000.00</u>	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)			27

SCHEDULE A

ITEMIZED RECEIPTS

3

Any information copied from such Reports or 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)  
 Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code JAY SWIDER 111 Bainbridge Street Philadelphia, PA 19147	Name of Employer SpectaGuard The Spectrum Philadelphia, PA	Date (month, day, year) 10/15/82	Amount of Each Receipt this Period \$500.00
	Occupation President	Aggregate Year-to-Date-\$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code A. H. GORDON Kidder, Peabody & Co. 10 Hanover Square New York, New York	Name of Employer Kidder, Peabody & Co. 10 Hanover Square New York, New York	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$200.00
	Occupation Investment Broker, Chicago	Aggregate Year-to-Date-\$ 200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code George M. Ross 1116 Byberry Road Bryn Mawr, PA 19010	Name of Employer Goldman Sachs & Co 3 GICARD PLAZA Philadelphia PA	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$300.00
	Occupation Investment Banker	Aggregate Year-to-Date-\$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code Elsie H. Hillman	Name of Employer	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$750.00
	Occupation Homemaker	Aggregate Year-to-Date-\$ 750.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code H J Heinz, II Goodwood P.O. Box 57 Sewickley PA 15143	Name of Employer H J Heinz & Co. P. Hsburnh, PA	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$500.00
	Occupation Homeowner President	Aggregate Year-to-Date-\$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code Alexandra Ewing Orchard Lane Wallingford, PA 19086	Name of Employer	Date (month, day, year) 10/19/82	Amount of Each Receipt This Period \$500.00
	Occupation Retired	Aggregate Year-to-Date-\$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code Teresa M. Marino 3774 KRATZ ROAD Collegeville, PA 19426	Name of Employer	Date (month, day, year) 10/20/82	Amount of Each Receipt This Period \$250.00
	Occupation Housewife	Aggregate Year-to-Date-\$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) ..... \$3000.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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) Michael Marino For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lewis KATZ 705 N. Kings Highway Cherry Hill, N.J.	Self-employed	10/30/82	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
FRANK G. WARBURTON 31 Morningside Drive YARADBY, PA	MAIC HURDMAN Suite 1600 3 PONY CENTER PLAZA Philadelphia, PA 19102	10/22/82	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Accountant	Aggregate Year-to-Date-\$ 400.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peter MATOUN 107 ROCK ROSE Lane RAONOR, PA	BAZZANO, SPINA, AND JONES & JONES 30 S 17th Street Philadelphia, Pa 19103	10/22/82	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ella Warren MILLER 115 Maple Hill ROAD Glaowynr PA 19035		10/14/82	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date-\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward L. PEIN 1804 RITTENHOUSE Square Philadelphia, PA 19103	NATIONAL PROPERTY ANALYSIS 1804 RITTENHOUSE Square Philadelphia PA 19103	10/14/82	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate Investment Executive	Aggregate Year-to-Date-\$ 450.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John A. Philbrick, III 320 Walnut Street Philadelphia, PA 19106	H.C. Knight & Co. 320 Walnut Street Philadelphia PA 19106	10/14/82	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Broker	Aggregate Year-to-Date-\$ 525.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harold G. Schaeffer 160 W. Gulph Rd. King of Prussia, PA 19406		10/15/82	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 500.00	
SUBTOTAL of Receipts This Page (optional) . . . . .			\$ 2400.00
TOTAL This Period (last page this line number only) . . . . .			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or 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)  
 Michael Marino for U. S. Congress Committee

A. Full Name, Mailing Address and ZIP Code Louis J. Esposito 1600 N. 72d Street Philadelphia, PA 19151	Name of Employer Esposito's 1001 S. 9th Street Philadelphia PA 19147	Date (month, day, year) 10/15/82	Amount of Each Receipt this Period \$500.00
	Occupation Restaurateur Aggregate Year-to-Date-\$500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code OLGA PISZEK Pennsylvania Ave. Box 305 Ft. Washington, PA 19034	Name of Employer	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$500.00
	Occupation Housewife Aggregate Year-to-Date-\$500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code Winifred S. Cheston 229 Spruce Street Philadelphia, PA 19106	Name of Employer	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$250.00
	Occupation Housewife Aggregate Year-to-Date-\$200.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code George W. Cheston 229 Spruce Street Philadelphia PA 19106	Name of Employer Self-employed	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$250.00
	Occupation Business Exec Aggregate Year-to-Date-\$250.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code Dr. Stanley G. Glanville 630 Richards Road Wayne, PA	Name of Employer Jefferson Hospital Philadelphia, PA	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$500.00
	Occupation Physician Aggregate Year-to-Date-\$500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code David C. Auten 120 Delaney Street Philadelphia PA 19106	Name of Employer Reed, Smith, Tower & Munson 1600 Walnut Street 2125 Philadelphia, PA 19107	Date (month, day, year) 10/15/82	Amount of Each Receipt This Period \$500.00
	Occupation Attorney Aggregate Year-to-Date-\$600.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code Dorothy Cassard 8134 Seminole Ave. Philadelphia, PA 19118	Name of Employer	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$200.00
	Occupation Housewife Aggregate Year-to-Date-\$700.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) ..... \$2700.00

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

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Name of Committee (in Full)  
 Miller/Morino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code David W. Twomey 100 Matsouforn Pond RADNOR PA 19087	Name of Employer Sunoil Company 100 matsouforn RADNOR PA 19087	Date (month, day, year) 10/22/82	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Executive Aggregate Year-to-Date-\$ 200.00		

B. Full Name, Mailing Address and ZIP Code Joseph Healy 250 4114 Presidential Drive Lafayette Hill, PA 19144	Name of Employer Deloitte Haskins & Sells 2500 Third Green Plaza Philadelphia, PA 19102	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CPA Aggregate Year-to-Date-\$ 250.00		

C. Full Name, Mailing Address and ZIP Code Michael W Lloyd Janney Montgomery Scott 5 Penn Center Plaza Philadelphia PA 19102	Name of Employer Janney Montgomery Scott 5 Penn Center Plaza Philadelphia, Pa 19102	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Securities Trader Aggregate Year-to-Date-\$ 200.00		

D. Full Name, Mailing Address and ZIP Code Nelson G. Harris Presidential Drive Lafayette Hill, PA 19144	Name of Employer Trusty Baking Company 280 Hunting Park Ave. Philadelphia PA 19129	Date (month, day, year) 10/20/82	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pres Sec? Aggregate Year-to-Date-\$ 500.00		

E. Full Name, Mailing Address and ZIP Code Susan Griffin 624 Dorset Road Devon PA 19333	Name of Employer Campbell Soup Company Campbell Place Camden, NJ 08104	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife Aggregate Year-to-Date-\$ 500.00		

F. Full Name, Mailing Address and ZIP Code Zoe Coulson 220 Locust Street Philadelphia PA 19106	Name of Employer Campbell Soup Company Campbell Place Camden, N.J. 08101	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date-\$ 500.00		

G. Full Name, Mailing Address and ZIP Code Harry P. Beguire 1900 Market Street Philadelphia, PA 19103	Name of Employer Atium Leasing Co. 1900 Market Street Philadelphia, Pa 19103	Date (month, day, year) 10/27/82	Amount of Each Receipt This Period \$450.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation At Home Aggregate Year-to-Date-\$ 450.00		

SUBTOTAL of Receipts This Page (optional) ..... \$12600.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full) Michael Marino For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code W Atlee Davis, III 2600 The Fidelity Building Philadelphia, PA 19107	Name of Employer Dilworth Plaza, Enid Stadium 2600 The Fidelity Bldg. Philadelphia, PA 19109	Date (month, day, year) 10/27/82	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Scott M. Delman Lehman Brothers Kuhn Loeb 55 Water Street New York, NY 10048	Name of Employer Lehman Brothers Kuhn Loeb 55 Water Street New York NY 10048	Date (month, day, year) 10/27/82	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Banker	Aggregate Year-to-Date-\$ 500.00	
C. Full Name, Mailing Address and ZIP Code J Morris Evans 4700 Blytheville Road Swanton Valley, PA 19437	Name of Employer PQ Corp P.O. Box 840 Valla Forge PA 19482	Date (month, day, year) 10/27/82	Amount of Each Receipt This Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date-\$ 200.00	
D. Full Name, Mailing Address and ZIP Code Newbold Strongy Center Square West 1500 Market Street Philadelphia PA	Name of Employer Center Square West 1500 Market Street Philadelphia PA	Date (month, day, year) 10/27/82	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Executive	Aggregate Year-to-Date-\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Arthur J. Kania Two Bala Cynwyd Plaza Bala Cynwyd, PA 19004	Name of Employer Kania, Arthur, Insole Ferry Two Bala Cynwyd Plaza Bala Cynwyd, PA 19004	Date (month, day, year) 10/28/82	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code Frank Piasecki Tunbridge Road Haverford, PA 19041	Name of Employer Piasecki Aircraft Co. Sharon Hill, PA	Date (month, day, year) 10/28/82	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Francis J. Baguella 2 Bala Cynwyd Plaza Bala Cynwyd, PA 19004	Name of Employer Fawcett & Co. 2 Bala Cynwyd Plaza Bala Cynwyd, PA 19004	Date (month, day, year) 10/27/82	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Resident Manager	Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional) . . . . .			\$2200.00
TOTAL This Period (last page this line number only) . . . . .			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)  
 Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Samuel MARINO 3774 Kentz Road Collyersville, PA 19426 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Subaru of America Norristown, PA Occupation Car Dealer Aggregate Year-to-Date-\$200.00	11/15/82	\$200.00
William A. Graham TD 828 Conshohocken SHD Road Gladwyne, PA 19035 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	The Graham Co. 2124 Race Street Philadelphia, PA Occupation Insurance Broker Aggregate Year-to-Date-\$450.00	11/15/82	\$200.00
Raymond S. Page, JR. Campbell Place Camden, N.J. 08101 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Campbell Soup Co. Campbell Place Camden, N.J. 08101 Occupation VP - Corporate Relations Aggregate Year-to-Date-\$300.00	11/19/82	\$300.00
Robert L. Trescher 710 Mill Creek Road Gladwyne PA 19035 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Philadelphia, PA 19102 Occupation Attorney Aggregate Year-to-Date-\$350.00	10/30/82	\$50.00
Richard P. Brown, JR. 8200 Towanda St. Philadelphia, PA 19118 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Morgan, Lewis & Bockius 2100 The Fidelity Bldg Philadelphia PA 19107 Occupation Attorney Aggregate Year-to-Date-\$600.00	11/16/82	\$100.00
Carmen C. Nasuti 1717 Portre Street Philadelphia, PA 19145 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Nasuti & Miller 1335 Spruce Street Philadelphia, PA 19107 Occupation Attorney Aggregate Year-to-Date-\$750.00	10/18/82	\$50.00
Joseph Procacci 3655 S. Lawrence St. Philadelphia PA 19148 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Procacci Bros. Sales Corp. 3655 S. Lawrence St. Philadelphia, PA 19148 Occupation Treasurer Aggregate Year-to-Date-\$256.00	10/30/82	\$50.00
SUBTOTAL of Receipts This Page (optional)			\$850.00
TOTAL This Period (last page this line number only)			\$850.00

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)  
 Michael Marino for U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anna H. Watts 219 Spruce Street Philadelphia PA 19106	Occupation Housewife	10/22/82	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 900.00		
B. Full Name, Mailing Address and ZIP Code Edwin E. Tuttle 514 Pine Street Philadelphia PA 19106	Name of Employer Pennwalt Corp. Three Parkway Philadelphia PA 19102	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manufacturing Exec. Chem	Aggregate Year-to-Date-\$ 300.00	
C. Full Name, Mailing Address and ZIP Code F. Stanton Moyer 37 Evans Lane Haverford PA 19041	Name of Employer Kidder Peabody & Co. Three Girard Plaza Philadelphia PA	Date (month, day, year) 10/14/82	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Broker	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code H. Thomas Hollowell, Jr. 916 The Bensen East Jenkintown, PA 19046	Name of Employer SPS Technologies Inc. 916 The Bensen East Jenkintown PA 19046	Date (month, day, year) 10/14/82	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Executive	Aggregate Year-to-Date-\$ 550.00	
E. Full Name, Mailing Address and ZIP Code T. Edward O'Neill 412 S. Bainbridge Street Philadelphia, PA 19147	Name of Employer Butcher & Singer 211 S. Broad St. Philadelphia PA	Date (month, day, year) 10/27/82	Amount of Each Receipt This Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Counselor	Aggregate Year-to-Date-\$ 400.00	
F. Full Name, Mailing Address and ZIP Code William Y. Giles 1755 Cedar Lane North Villanova, PA 19085	Name of Employer Philadelphia Phillies Veterans Stadium Philadelphia, PA	Date (month, day, year) 10/14/82	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President-Professional Baseball Team	Aggregate Year-to-Date-\$ 300	
G. Full Name, Mailing Address and ZIP Code J. Welles Henderson Public Ledger Building Philadelphia, PA 19106	Name of Employer Pomeroy Biecup & Henderson Public Ledger Building Philadelphia, PA 19106	Date (month, day, year) 10/22/82	Amount of Each Receipt This Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional) .....			\$ 700.00
TOTAL This Period (last page this line number only) .....			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full) Michael Marino For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code Hannah L. Henderson 316 Willings Alley Philadelphia, PA 19106	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		\$150.00
B. Full Name, Mailing Address and ZIP Code Daniel P. O'Connell	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		\$150.00 \$25.00
C. Full Name, Mailing Address and ZIP Code George P. Steele 112 Pine Street Philadelphia, PA	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		\$50.00
D. Full Name, Mailing Address and ZIP Code Joseph Irizabile, Jr. 735 Racine Place Blue Bell, PA 19422	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		\$50.00
E. Full Name, Mailing Address and ZIP Code W. L. Bemis PO Box 243 Bryn Mawr, PA 19010	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 350.00		\$50.00 \$100.00
F. Full Name, Mailing Address and ZIP Code Edward H. Rosen 941 Bryn Mawr Ave Uargoth PA 19072	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 300.00		\$100.00
G. Full Name, Mailing Address and ZIP Code Samuel A. Breeve 22 National Transit Bldg Oil City, PA 16301	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 300.00		\$100.00
SUBTOTAL of Receipts This Page (optional) . . . . .			\$775.00
TOTAL This Period (last page this line number only) . . . . .			

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Name of Committee (in Full)  
 Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code Brennan Spahr, Andrews & Ingersoll 30 South 17th Street Philadelphia, PA 19103	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$250.00
	Occupation	10/22/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 300.00		

B. Full Name, Mailing Address and ZIP Code Constance Coreno 827 Lindale Ave. Drexel Hill, PA	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$100.00
	Occupation Housewife	10/18/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 845.00		

C. Full Name, Mailing Address and ZIP Code Robert L. McNeil, Jr. 601 East Euclid Ave Wyndmoor, PA 19118	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$500.00
	Occupation	10/24/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

SUBTOTAL of Receipts This Page (optional) ..... \$ 850.00

TOTAL This Period (last page this line number only) ..... \$16,075.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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)  
 Michael Morino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code Republican 55th Urban Committee 2714 Harbison Ave Philadelphia, PA 19131	Name of Employer  Occupation	Date (month, day, year) 10/15/82	Amount of Each Receipt this Period \$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 25.00		

B. Full Name, Mailing Address and ZIP Code Michel For Congress Committee Robert H. Michel 1029 N. Glenwood Ave. Peoria, Ill. 61606	Name of Employer  Occupation	Date (month, day, year) 10/29/82	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 1,000.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

D. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

E. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

F. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

SUBTOTAL of Receipts This Page (optional) . . . . .	\$1025.00
TOTAL This Period (last page this line number only) . . . . .	\$1025.00

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 6 for  
 LINE NUMBER 1166  
 (Use separate schedule(s) for each  
 category of the Detailed  
 Summary Page)

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Any information copied from such Reports or 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)  
 Michael MARINO For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code UEC Employees Fed. Credit Union 30 South 17 <sup>th</sup> Street Philadelphia, PA 19103	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$50.00
	Occupation	10/27/82	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 50.00		

B. Full Name, Mailing Address and ZIP Code Build PAC of the Nat'l Ass'n of Home Builders National Housing Center 15th & M Streets, NW WASHINGTON, D.C. 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$1000.00
	Occupation	10/27/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		

C. Full Name, Mailing Address and ZIP Code Arthur Young & Co PAC 277 PARK Ave New York, NY 10017	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$ 100.00
	Occupation	10/27/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 100.00		

D. Full Name, Mailing Address and ZIP Code Building Industries Govt Government Committee 20 Box 21207 Greensboro NC 27420	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$1000.00
	Occupation	10/27/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		

E. Full Name, Mailing Address and ZIP Code SEARS PAC 233 S. Wacker Drive Chicago, Illinois 60606	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$500.00
	Occupation	10/28/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.00		

F. Full Name, Mailing Address and ZIP Code SUW PAC 100 MATSONFORD ROAD RADFORD, PA 17087	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$500.00
	Occupation	10/28/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1500.00		

G. Full Name, Mailing Address and ZIP Code SAMPAC American Collectors Ass'n 4040 W. 70th Street MINNEAPOLIS, MINN 55435	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$500.00
	Occupation	10/27/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.00		

SUBTOTAL of Receipts This Page (optional) ..... \$/3650.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or 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)  
 Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Flora Public Affairs Committee 3333 Michelson Drive Irvine, California 92730		10/29/82	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Employers of Mustang Political Action Committee 1100 First National Center East Oklahoma City, OK 73102		11/1/82	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dallas Energy PAC 811 Preston Bank Building 811 Preston Road Dallas TX 75225		10/14/82	\$2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$2000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
SLOT PAC SLOT Paper Company SLOT Plaza Philadelphia PA 19113		10/14/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PNB PAC Philadelphia National Bank Broad & Chestnut Streets Philadelphia PA 19107		10/15/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Smith Drive PAC One Franklin Plaza P.O. Box 7929 Philadelphia, PA 19101		10/15/82	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
American Family PAC P.O. Box 1480 Columbus, GA 31902		10/16/82	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$500.00	
SUBTOTAL of Receipts This Page (optional) .....			\$4650.00
TOTAL This Period (last page this line number only) .....			

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or 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)  
Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code Union Oil Political Awareness Fund Room M-01 461 South Boylston St. Los Angeles, CA 90017	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$950.00
	Occupation	10/14/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 750.00		

B. Full Name, Mailing Address and ZIP Code BROY PAC P.O. Box 700 Lenoir, NC 28645	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$ 250.00
	Occupation	10/14/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

C. Full Name, Mailing Address and ZIP Code Central Penn Govt Government Committee Central Penn Institute Bank 1700 Arch Street Philadelphia PA 17103	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$250.00
	Occupation	10/16/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

D. Full Name, Mailing Address and ZIP Code COLPAC Colonial Life & Accident Insurance Co. 200 Colonial Life Boulevard West Columbia, SC 29210	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$200.00
	Occupation	10/18/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 200.00		

E. Full Name, Mailing Address and ZIP Code FED PAC Federation of American Hospitals P.O. Box 28359 Washington, D.C. 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$250.00
	Occupation	10/20/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

F. Full Name, Mailing Address and ZIP Code LUPAC National Assoc of Life Underwriters PAC 1922 K Street Washington, D.C. 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$ 500.00
	Occupation	10/20/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.00		

G. Full Name, Mailing Address and ZIP Code BUD0 Citizenship PAC 3155 W. Big Beaver Road Troy, Michigan	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$ 1000.00
	Occupation	10/21/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		

SUBTOTAL of Receipts This Page (optional) . . . . . \$3200.00

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

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Name of Committee (in Full)  
 Michael Maricivo For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code STERL PAC Madison Ave. at 3rd Street New York, N.Y.	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$250.00
	Occupation	10/21/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

B. Full Name, Mailing Address and ZIP Code PACOSA Pennsylvania Savings League P.O. Box 797 Harrisburg, PA 17108	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$300.00
	Occupation	10/22/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 300.00		

C. Full Name, Mailing Address and ZIP Code Wholesale-Distributor PAC 1725 K Street NW Washington, DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$100.00
	Occupation	10/22/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 100.00		

D. Full Name, Mailing Address and ZIP Code Globe Employees Political Action Committee Globe Life & Accident Insurance Co. Globe Life Center Oklahoma City, OK 73184	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$200.00
	Occupation	10/22/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 200.00		

E. Full Name, Mailing Address and ZIP Code 97th Club Campaign Committee 200 A Justice Court NE Washington, D.C. 20002	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$500.00
	Occupation	10/26/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.00		

F. Full Name, Mailing Address and ZIP Code Continental Bank Good Government Committee Continental Bank PAC 1500 Market Street Philadelphia PA 19102	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$250.00
	Occupation	10/26/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

G. Full Name, Mailing Address and ZIP Code Rover Group Good Government Fund 500 Virginia Drive Fort Washington, PA 19034	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$400
	Occupation	10/26/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 400.00		

SUBTOTAL of Receipts This Page (optional) ..... \$2000.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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)  
 Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code FIRST PA PAC First Pennsylvania Bank Philadelphia, PA 19101	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$200.00
	Occupation	10/26/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 200.00		

B. Full Name, Mailing Address and ZIP Code ALCO PAC P.O. Box 22479 Cleveland, Ohio 44122	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$250.00
	Occupation	10/26/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

C. Full Name, Mailing Address and ZIP Code DART & KRAFT, Inc. PAC 8450 Beverly Boulevard Los Angeles, CA. 90048	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$500.00
	Occupation	10/26/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.00		

D. Full Name, Mailing Address and ZIP Code HARSCO PAC 350 Poplar Church Road Camp Hill, PA 17011	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$250.00
	Occupation	10/26/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

E. Full Name, Mailing Address and ZIP Code SEAPAC Small Employers PAC One Shell Plaza P.O. Box 2546 Houston, TX 77001	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$250.00
	Occupation	11/1/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

F. Full Name, Mailing Address and ZIP Code Hoffman LaRoche 6000 Government Committee 340 Kingsland Road Nutley, N.J. 07110	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$200.00
	Occupation	11/1/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 200.00		

G. Full Name, Mailing Address and ZIP Code Tooling & Machine PAC Nat'l Tool Die & Machine Ass'n P.O. Box 55162 Washington, DC 20022	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$1000.00
	Occupation	11/1/82	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		

SUBTOTAL of Receipts This Page (optional) ..... \$2650.00

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

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Name of Committee (in Full)			
Michael Marino For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Merrill Lynch PAC Merrill Lynch Pierce, Fenner & Smith One Liberty Plaza New York, NY 10005		11/1/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
TRW Good Gov't Fund 23555 Euclid Ave. Cleveland, Ohio 44117		11/1/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
REN Lobster Employee's Good Gov't Fund PO Box 13147 Orlando, FL 32859		11/5/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anti-Society of Public Accountants PAC 147 Hamistice Blvd Pawtucket, R.I. 02862		10/25/82	8100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 100.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
IU PAC The PAC of IU International 1500 Walnut Street Philadelphia PA 19102		11/17/82	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 400.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$	
SUBTOTAL of Receipts This Page (optional)			\$1050.00
TOTAL This Period (last page this line number only)			\$17,200.00

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1  
 LINE NUMBER 136  
 (Use separate schedule(s) for each category of the Detailed Summary Page) 19

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Name of Committee (in Full)  
 Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code SHAWN SPECTER 2400 Chestnut Street Philadelphia, PA	Name of Employer  Occupation STUDENT	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 510.00		

B. Full Name, Mailing Address and ZIP Code HERBERT HAHN 55 E. 86th Street N.Y. N.Y. 10025	Name of Employer  Occupation	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		

C. Full Name, Mailing Address and ZIP Code MARIA HAHN	Name of Employer  Occupation	Date (month, day, year) 10/26/82	Amount of Each Receipt This Period \$750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 750.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

E. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

F. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

SUBTOTAL of Receipts This Page (optional) ..... \$2550.00

TOTAL This Period (last page this line number only) ..... \$2550.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)  
 Michael Marino For U.S. Congress Committee

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert Goodman Agency Box 512 Brooklandville, Md 21022	Advertising - TV	10/14/82	\$ 3500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/5/82	\$ 3500.00
Postmaster of Philadelphia 30th Street Philadelphia, PA	Stamps - postage	10/14/82	\$ 10.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/82 10/25/82 11/27/82	\$ 100.00 \$ 400.00 \$ 100.00
" "	Stamps - postage	10/29/82	\$ 150.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Queen Village Recording Studio 500 S 4th Street Philadelphia, PA	Advertising - radio	10/14/82	\$ 362.50
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Alling & Conry Co. 1300 W Lehigh Ave. Philadelphia, PA	Stationery	10/14/82	\$ 345.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Printer's Place 1315 Walnut Street Philadelphia, PA 19107	Printing	10/15/82	\$ 92.50
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/14/82	\$ 36.00
Lou Pasanivick 313 S. 41st St. Philadelphia, PA	Campaign consultation services - reimbursement	10/15/82	\$ 50.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/14/82 10/22/82 11/25/82	\$ 140.00 (stamps) \$ 48.00 \$ 35.00 (stamps)
Loretta D'Antonio 906 E. Passyunk Ave. Philadelphia, PA 19147	Campaign consultation services - reimbursement	10/15/82	\$ 100.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/82 11/18/82 11/16/82	\$ 100.00 \$ 100.00 (stamps) \$ 125.40 (stamps)
Chris French 416 S. 41st Street Philadelphia, PA	Campaign consultation services	10/15/82	\$ 50.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/82 11/16/82	\$ 50.00 \$ 92.30 (stamps)
SUBTOTAL of Disbursements This Page (optional) .....			\$ 9486.70
TOTAL This Period (last page this line number only) .....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

LINE NUMBER 15  
 (Use separate schedule(s) for each category of the Detailed Summary Page)

21

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Name of Committee (in Full)			
Michael Marino For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Dowdell 416 S. 41st St. Philadelphia, PA	Campaign consultation services & reimbursement	10/15/82	\$40.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/82 10/25/82 10/29/82	\$40.00 \$36.49 (Cash stamps) + 20.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
" "	" "	11/16/82	\$112.26 (reducing)
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Licia Hahn 1818 Shunk Street Philadelphia, PA	Campaign consultation services & reimbursement	10/15/82	\$100.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/16/82 10/22/82 11/5/82	\$100.00 (stamps) \$50.00 \$412.38 (cash stamps)
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell of PA Box 8585 Philadelphia, PA 19173	Telephones	10/16/82	\$489.77
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/82 11/16/82	\$201.13 \$937.60
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WDAS - RADIO Bismont & Edgely Rd. Philadelphia, PA	Advertising - Radio	10/15/82	\$999.60
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/82	\$999.60
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WHAT - RADIO 3930 Conshohocken Ave. Philadelphia, PA	Advertising - Radio	10/14/82	\$850.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/82	\$850.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Minute Man Press 6917 Ludlow St. Upper Darby, PA 19082	Printing	10/18/82	\$161.20
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/14/82 10/27/82 10/29/82	\$55.80 \$312.70 \$750.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WCAU-TV City Line & Monument Aves Bala Cynwyd, PA 19131	Advertising - TV	10/15/82	\$1491.75
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/82 10/25/82 10/27/82	\$5163.75 \$2150.00 \$5163.75
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KYW-TV 5th & Market Streets Philadelphia, PA 19106	Advertising - TV	10/14/82	\$4037.60
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional) .....			\$-25,525.28
TOTAL This Period (last page this line number only) .....			

3304043133

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 5 of 10  
 LINE NUMBER 17  
 (Use separate schedule(s) for each category of the Detailed Summary Page) **22**

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Name of Committee (in Full)  
 Michael Marino For U.S. Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PALUMBO'S CAFE - Restaurant 824 Catherine St. Philadelphia, PA	Rental of facility For Fund Raising Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/82	\$ 2187.50
B. Full Name, Mailing Address and ZIP Code WCAU-TV City Line & Monument Aves Bala Cynwyd, PA 1931	Advertising - TV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/82	\$ 1572.50
C. Full Name, Mailing Address and ZIP Code Philadelphia Tribune 522 S. 16th St. Philadelphia, PA	Advertising - Newspaper Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/82	\$ 1000.00
D. Full Name, Mailing Address and ZIP Code CARMEN MARINO 1400 Spruce Ave Phila PA 19145	Purpose of Disbursement Campaign (consulting services & reimbursement) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/82 11/5/82	\$100.00 \$238.00
E. Full Name, Mailing Address and ZIP Code WPVI-TV 6 4100 City Line Ave. Phila. PA 19131	Purpose of Disbursement Advertising - TV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/82 10/27/82 10/29/82	\$85.00 \$888.75 \$420.00
F. Full Name, Mailing Address and ZIP Code City of Philadelphia Phila, PA	Purpose of Disbursement Bonds for Posters Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/82	\$490.00
G. Full Name, Mailing Address and ZIP Code Replica IV 226 S. 40th St. Phila, PA	Purpose of Disbursement COPYING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/82 10/25/82 10/27/82 10/29/82	\$93.28 \$26.44 \$5.00 \$25.44
H. Full Name, Mailing Address and ZIP Code 1	Purpose of Disbursement COPYING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/82	\$162.71
I. Full Name, Mailing Address and ZIP Code WKBS-TV 3201 S. 26th St Phila, PA 19145	Purpose of Disbursement Advertising - TV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/28/82	\$1041.25

SUBTOTAL of Disbursements This Page (optional) ..... \$ 12,294.87

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

304043135

SCHEDULE B

ITEMIZED DISBURSEMENTS

LINE NUMBER 13  
 (Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WPHL-TV 5001 Wynnefield Ave. Philadelphia PA 19131	Advertising - TV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/82	\$ 3196.00
B. Full Name, Mailing Address and ZIP Code Minuteman Press 6917 Ludlow St. Upper Darby, PA 19082	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/82	\$ 750.00
C. Full Name, Mailing Address and ZIP Code Montco Graphics	Campaign buttons Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/82	\$ 476.89
D. Full Name, Mailing Address and ZIP Code Se Spedy 401 D.F.C. Blvd Phila. PA	Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/1/82	\$ 181.63
E. Full Name, Mailing Address and ZIP Code Frank Dillon	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/5/82	\$ 750.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional) .....			\$ 5354.57
TOTAL This Period (last page this line number only) .....			\$ 62, 661.37

1133040431353

24

Name of Committee (in Full) <b>Michael MARINO For U.S. Congress Committee</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>Robert Goodman Agency See Schedule D</b>	Original Amount of Loan <b>Exemption of credit in the ordinary course of business</b>	Cumulative Payment To Date <b>-0-</b>	Balance Outstanding at Close of This Period <b>\$10,000.00</b>
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <b>8/20/82</b> Date Due <b>1/1/83</b> Interest Rate <b>15</b> %(apr) <b>after 1/1/83</b> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code <b>Michael Marino 1420 Snyder Ave Philadelphia, PA 19145</b>	Name of Employer		
	Occupation <b>CANDIDATE</b>		
	Amount Guaranteed Outstanding: <b>\$10,000.00</b>		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) .....			<b>\$10,000.00</b>
TOTALS This Period (last page in this line only) .....			<b>\$10,000.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

3040431537

Name of Committee (in Full)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<u>Herbert Hahn 55 E. 86th Street N.Y., N.Y. 10028</u>	<u>\$1000.00</u>	<u>- 0 -</u>	<u>\$1000.00</u>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Terms: Date Incurred 10/26/82 Date Due Demand Interest Rate \_\_\_\_\_ % (apr)  Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer	Amount Guaranteed Outstanding: \$
	Occupation	
2. Full Name, Mailing Address and ZIP Code	Name of Employer	Amount Guaranteed Outstanding: \$
	Occupation	
3. Full Name, Mailing Address and ZIP Code	Name of Employer	Amount Guaranteed Outstanding: \$
	Occupation	

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<u>MARINA HAHN</u>	<u>\$750.00</u>	<u>- 0 -</u>	<u>\$750.00</u>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Terms: Date Incurred 10/26/82 Date Due Demand Interest Rate \_\_\_\_\_ % (apr)  Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer	Amount Guaranteed Outstanding: \$
	Occupation	
2. Full Name, Mailing Address and ZIP Code	Name of Employer	Amount Guaranteed Outstanding: \$
	Occupation	
3. Full Name, Mailing Address and ZIP Code	Name of Employer	Amount Guaranteed Outstanding: \$
	Occupation	

SUBTOTALS This Period This Page (optional) ..... \$ 1750.00

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

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

83040431538

Name of Committee (in Full) <b>Michael Marino For U.S. Congress Committee</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>Shawin Spector 2400 Chestnut Street Philadelphia, PA</b>	Original Amount of Loan <b>\$800.00</b>	Cumulative Payment To Date <b>- 0 -</b>	Balance Outstanding at Close of This Period <b>\$800.00</b>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>10/25/82</u> Date Due <u>Demand</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) .....			<b>\$800.00</b>
TOTALS This Period (last page in this line only) .....			<b>\$2550.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

83040431559

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Michael Mann For U.S. Congress Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Robert Goodman Agency Box 512 Brooklandville, Md 21022	\$15,603.26	\$7,000.00	\$7,000.00	\$15,603.26
Nature of Debt (Purpose): Advertising				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor PACKARD PRESS Tenth & Spring Garden Streets Philadelphia, PA 19123	\$2916.54	-0-	-0-	\$2916.54
Nature of Debt (Purpose): PRINTING				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Printers Place 1315 Walnut Street Philadelphia, PA 19107	\$2178.00	\$128.50	\$128.50	\$2178.00
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Duplicax PO Box 650 Camden, N.J. 08101	-0-	\$235.95	-0-	\$235.95
Nature of Debt (Purpose): Printing - Supplies				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor IBM c/o Furst & Furst 225 W. 34th N.Y., New York	-0-	\$531.38	-0-	\$531.38
Nature of Debt (Purpose): Office Equipment				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor MCI Telecommunications c/o Marvin Shapiro P.O. Box F Levittown, N.Y. 11756	-0-	\$330.84	-0-	\$330.84
Nature of Debt (Purpose): Telephone long distance service				
1) SUBTOTALS This Period This Page (optional) .....				21,795.97
2) TOTAL This Period (last page this line only) .....				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....				
4) (See 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....				

83040431560



REPORTS OF RECEIPTS AND DISBURSEMENTS  
For Authorized Committee

RECEIVED AT THE FEC  
29

83 MAY 5 All: 85

(Summary Page)

ALIGN AREA		ALIGN AREA
1. Name of Committee (in Full) <b>Michael Marino For U.S. Congress Committee</b>		2. FEC Identification Number <b>098515</b>
Address (Number and Street) <b>1420 Snyder Avenue</b>		3. Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
City, State and Zip Code <b>Philadelphia, PA 19145</b>		<input type="checkbox"/> Check if address is different than previously reported.

RECEIVED AT THE FEC  
 MAY - 6 1983  
 FEDERAL ELECTION COMMISSION  
 OFFICE OF THE CLERK  
 WASHINGTON, D.C. 20543

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding
<input type="checkbox"/> July 15 Quarterly Report	election on _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on
<input checked="" type="checkbox"/> January 31 Year End Report	_____ in the State of _____
<input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for -  Primary Election  General Election  Special Election  Runoff Election

83040431562

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/23/82</u> through <u>12/31/82</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (From Line 11 (e))	\$3,050.00	\$265,765.91
(b) Total Contribution Refunds (from Line 20 (d))	\$2,500.00	\$ 2,600.00
(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	\$ 550.00	\$263,165.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$1,148.56	\$265,707.70
(b) Total Offsets to Operating Expenditures (from Line 14)	- 0 -	\$ 360.50
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))	\$1,148.56	\$265,347.20
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$ 758.32	
9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D)	- 0 -	
10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D) *	\$28,580.76	

\* Does not include \$10,000 debt guarantee by candidate  
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-523-4068

**Thomas B. Kenworthy**  
Type or Print Name of Treasurer

*Thomas B. Kenworthy*  
SIGNATURE OF TREASURER

*May 4, 1983*  
Date

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

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

**DETAILED SUMMARY PAGE  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)**

30

Name of Committee (in Full)  
**Michael Marino For U.S. Congress Committee**

Report Covering the Period:  
From: **11/23/82** To: **12/31/82**

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>				
(a) Individuals/Persons Other Than Political Committees (Memo Entry Unitized \$ _____)		\$ 550.00	\$210,090.91	11 (a)
(b) Political Party Committees		\$2,500.00	\$ 29,525.00	11 (b)
(c) Other Political Committees		- 0 -	\$ 26,150.00	11 (c)
(d) The Candidate		- 0 -	- 0 -	11 (d)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).		\$3,050.00	\$265,765.91	11 (e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>				
		- 0 -	- 0 -	12
<b>13. LOANS:</b>				
(a) Made or Guaranteed by the Candidate		- 0 -	\$ 10,000.00	13 (a)
(b) All Other Loans		- 0 -	\$ 2,550.00	13 (b)
(c) TOTAL LOANS (add 13 (a) and 13 (b)).		- 0 -	\$ 12,550.00	13 (c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>				
		- 0 -	\$ 360.50	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>				
		- 0 -	\$ 389.61	15
<b>16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)</b>				
		\$3,050.00	\$279,066.02	16
<b>II. DISBURSEMENTS</b>				
<b>17. OPERATING EXPENDITURES</b>				
		\$1,148.56	\$265,707.70	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>				
		- 0 -	- 0 -	18
<b>19. LOAN REPAYMENTS:</b>				
(a) Of Loans Made or Guaranteed by the Candidate		- 0 -	- 0 -	19 (a)
(b) Of All Other Loans		- 0 -	- 0 -	19 (b)
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)).		- 0 -	- 0 -	19 (c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>				
(a) Individuals/Persons Other Than Political Committees		- 0 -	\$ 100.00	20 (a)
(b) Political Party Committees		\$2,500.00	\$ 2,500.00	20 (b)
(c) Other Political Committees		- 0 -	- 0 -	20 (c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))		\$2,500.00	\$ 2,600.00	20 (d)
<b>21. OTHER DISBURSEMENTS</b>				
		- 0 -	- 0 -	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)</b>				
		\$3,648.56	\$268,307.70	22

III. CASH SUMMARY				
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	1,356.88		23
<b>24. TOTAL RECEIPTS THIS PERIOD (From Line 16)</b>	\$	3,050.00		24
<b>25. SUBTOTAL (Add Line 23 and Line 24)</b>	\$	4,406.88		25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)</b>	\$	3,648.56		26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)</b>	\$	758.32		27

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1  
 LINE NUMBER 11a  
 (Use separate schedule(s) for each category of the Detailed Summary Page)

31

Any information copied from such Reports or 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)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code ROBERTA RELL 1226 Rock Creek Rd Gladwyne, PA 19035	Name of Employer	Date (month, day, year) 11/25/92	Amount of Each Receipt This Period \$ 250.00
	Occupation HONORARY		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 250.00		

B. Full Name, Mailing Address and ZIP Code W. James MacIntosh 641 Black Rock Road Bryn Mawr, PA 19010	Name of Employer	Date (month, day, year) 11/23/92	Amount of Each Receipt This Period \$ 200.00
	Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 200.00		

C. Full Name, Mailing Address and ZIP Code GORDON MCGOURN Campbell Plaza Camden New Jersey 08101	Name of Employer	Date (month, day, year) 12/21/92	Amount of Each Receipt This Period \$ 200.00
	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 600.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		

SUBTOTAL of Receipts This Page (optional) ..... \$550.00

TOTAL This Period (last page this line number only) ..... \$550.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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)  
Michael Marino for U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code <u>Republican State Committee of Pennsylvania</u>	Name of Employer  Occupation	Date (month, day, year) <u>12/3/82</u>	Amount of Each Receipt This Period <u>\$2500.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>\$2500.00</u>		

B. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

C. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

D. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

E. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

F. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

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

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)  
 Mich. Lari Morino for U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code Bell of Pennsylvania 22 E. Baltimore Ave. Lansdowne, PA 19050	Purpose of Disbursement Telephone service	Date (month, day, year) 12/3/82	Amount of Each Disbursement This Period \$ 938.56
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		

B. Full Name, Mailing Address and ZIP Code Postmaster of Philadelphia 304 Street Station Phila, PA	Purpose of Disbursement Stamps	Date (month, day, year) 12/17/82	Amount of Each Disbursement This Period \$ 210.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		

C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional) .....			
TOTAL This Period (last page this line number only) .....			\$ 1148.56

3304043156

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)  
 Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code Republican County Committee of Montgomery County 625 Swede Street Norristown, PA 19401	Purpose of Disbursement Refund of Contributions	Date (month, day, year) 12/3/82	Amount of Each Disbursement This Period \$ 2500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		

B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

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

TOTAL This Period (last page this line number only) ..... \$ 2500.00

83040431567

Name of Committee (in Full) <b>Michael MARINO For U.S. Congress Committee</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>ROBERT GOODMAN Agency See Schedule D</b>	Original Amount of Loan <i>Extension of credit in the ordinary course of business</i>	Cumulative Payment To Date <b>-0-</b>	Balance Outstanding at Close of This Period <b>\$10,000.00</b>
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <b>8/20/82</b> Date Due <b>1/1/83</b> Interest Rate <b>15%</b> (apr) <i>after 1/1/83</i> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code <b>Michael Marino 1420 Snyder Ave Philadelphia, PA 19145</b>	Name of Employer <b>CANDIDATE</b>	Occupation <b>CANDIDATE</b>	Amount Guaranteed Outstanding: <b>\$10,000.00</b>
2. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
3. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
2. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
3. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding: \$
SUBTOTALS This Period This Page (optional) .....			<b>\$10,000.00</b>
TOTALS This Period (last page in this line only) .....			<b>\$10,000.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

83040431568

Name of Committee (in Full) <b>Michael Marino For U.S. Congress Committee</b>				
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>Herbert Hahn 55 E. 86th Street N.Y., N.Y. 10028</b>	Original Amount of Loan <b>\$1000.00</b>	Cumulative Payment To Date <b>- 0 -</b>	Balance Outstanding at Close of This Period <b>\$1000.00</b>	
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):				
Terms: Date Incurred <u>10/26/82</u> Date Due <u>Demand</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
2. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
3. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
B. Full Name, Mailing Address and ZIP Code of Loan Source <b>MARINA HAHN</b>				
		Original Amount of Loan <b>\$750.00</b>	Cumulative Payment To Date <b>- 0 -</b>	Balance Outstanding at Close of This Period <b>\$750.00</b>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):				
Terms: Date Incurred <u>10/26/82</u> Date Due <u>Demand</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
2. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
3. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
SUBTOTALS This Period This Page (optional) . . . . .			<b>\$1750.00</b>	
TOTALS This Period (last page in this line only) . . . . .				
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

83040431569

Name of Committee (in Full) <b>Michael Marino For U.S. Congress Committee</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>Shawin Specter 2400 Chestnut Street Philadelphia, PA</b>	Original Amount of Loan <b>\$800.00</b>	Cumulative Payment To Date <b>- 0 -</b>	Balance Outstanding at Close of This Period <b>\$800.00</b>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>10/25/82</u> Date Due <u>Demand</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) .....			<b>\$800.00</b>
TOTALS This Period (last page in this line only) .....			<b>\$2550.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

3040431570

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Michael Marino For U.S. Congress Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Robert Gouman Agency Box 512 Brooklandville, Md 21022	\$15,603.26	-0-	-0-	\$15,603.26
Nature of Debt (Purpose): Advertising				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor PACARD PRESS Tenth & Spring Garden Streets Philadelphia, PA 19123	\$2916.54	-0-	-0-	\$2916.54
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Printers Place 1315 Walnut Street Philadelphia, PA 19107	\$2178.00	-0-	-0-	\$2178.00
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Dupli-FAX PO Box 680 Camden N.J. 08101	\$235.95	-0-	-0-	\$235.95
Nature of Debt (Purpose): Printing & Supplies				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor IBM c/o Furst & Furst 225 W. 34th N.Y., New York	\$531.38	-0-	-0-	\$531.38
Nature of Debt (Purpose): office equipment				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor MCI Telecommunications c/o Marvin Shapiro P.O. Box F Levittown N.Y. 11756	\$330.64	-0-	-0-	\$330.64
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional) .....				\$21,795.77
2) TOTAL This Period (last page this line only) .....				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....				

83040431571

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Michael Marino For U.S. Congress Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Federal Express Corporation P.O. Box 727, Dept. A Memphis, TN 38194	\$401.50	-0-	-0-	\$401.50
Nature of Debt (Purpose): Messenger / Delivery Service				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor CDI Temporary Services, Inc. S Penn Center Plaza, Suite 1001 Phila, PA 19103	\$136.00	-0-	-0-	\$136.00
Nature of Debt (Purpose): Secretarial Service				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Whitteman Press 6917 Ludlow St. Upper Darby, PA 19082	\$3359.52	-0-	-0-	\$3359.52
Nature of Debt (Purpose): PRINTING				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor CBS Reproductions Old York Rd. Jenkintown, PA	\$256.50	-0-	-0-	\$256.50
Nature of Debt (Purpose): Graphic				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Dollar Rent A Car P.O. Box 287 Drexel Hill, PA 19026	\$81.47	-0-	-0-	\$81.47
Nature of Debt (Purpose): CAR RENTAL				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional) . . . . .				\$4234.79
2) TOTAL This Period (last page this line only) . . . . .				\$90,030.76
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) * Excludes Debt Guarantee . . . . .				\$12550.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) . . . . .				\$102580.76

8304043157

# Michael Marino / U.S. Congress

1420 Snyder Avenue

Philadelphia, PA 19145

(215) 334-1982

83 MAY 5

11: 03

RECEIVED AT THE FEC

40

COPY

Attachment 2

May 4, 1983

FEDERAL EXPRESS

Federal Election Commission  
Washington, D.C. 20463

Re: MUR 1539

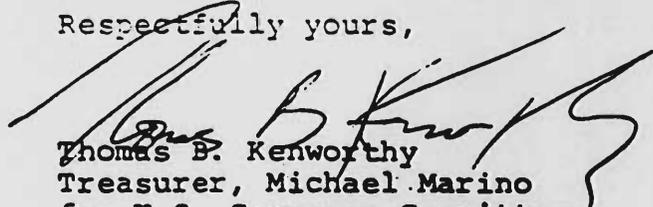
Gentlemen:

In response to the notification of Complaint received on April 21, 1983, I have determined that due to a communications breakdown between the Committee Treasurer and Assistant Treasurer as to post-election reporting responsibilities, the Committee has not heretofore filed either its Thirtieth Day Report following the General Election or its Year End Report.

Both of those reports are being filed and copies are included herewith. I am also sending copies of both reports to the Complainant. The Committee regrets that these reports were not filed in a timely fashion and we are certainly desirous of entering into conciliation.

For purposes of further communications with the Committee, my address and phone number are set forth below.

Respectfully yours,



Thomas B. Kenworthy  
Treasurer, Michael Marino  
for U.S. Congress Committee

2100 The Fidelity Building  
123 South Broad Street  
Philadelphia, PA 19109  
(215) 875-5702

33040431573

U.S. HOUSE OF REPRESENTATIVES  
OFFICE OF THE CLERK  
1983 MAY -6 AM 10:53



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

Attachment 4

Thomas B. Kenworthy, Treasurer  
Michael Marino for U.S. Congress Committee  
c/o Morgan, Lewis & Bockius  
2100 The Fidelity Building  
123 South Broad Street  
Philadelphia, Pennsylvania 19109

Re: MUR 1539

Dear Mr. Kenworthy:

On May , -1983, the Commission found reason to believe that your committee violated 2 U.S.C. § 434(a)(2)(A) by failing to timely file the 30 Day Post General Election and 1982 Year End Reports. At your request, the Commission also determined to enter into negotiations directed towards reaching a conciliation agreement in settlement of this matter prior to a finding of probable cause to believe.

Enclosed is a conciliation agreement that the Commission has approved in settlement of this matter. If you agree with the provisions of the enclosed agreement, please sign and return it, along with the civil penalty, to the Commission. Please make your check for the civil penalty payable to the U.S. Treasurer. In light of the fact that conciliaion negotiations, prior to a finding of probable cause to believe, are limited to a maximum of 30 days, you should respond to this notification as soon as possible. If you have any questions or suggestions for changes in the agreement, or if you wish to arrange a meeting in connection with a mutually satisfactory conciliation agreement, please contact Marybeth Tarrant, the staff member assigned to this matter, at 202-523-4529.

Sincerely,

Charles N. Steele  
General Counsel

By: Kenneth A. Gross  
Associate General Counsel

Enclosure

33040431574

Benjamin J. Guthrie  
Clerk

6cc# 21  
Patricia A. Bias, Director  
Office of Records and Registration

Office of the Clerk  
U.S. House of Representatives  
Washington, D.C. 20515

May 12, 1983

MAY 12 P 2:16

TO: Charles N. Steele, General Counsel  
Federal Election Commission

FROM: Patricia A. Bias, Director *deb*  
Office of Records and Registration

RE: MJR 1539

Enclosed please find a letter and copies of two reports (30-Day Post Election Report and the January 31 Year End Report) which were forwarded to this office by the Federal Election Commission.

Since the letter concerns a response to a complaint filed against Michael Marino for U.S. Congress Committee, I am forwarding it to your office to be handled in a manner consistent with Commission procedures.

The letter has not been microfilmed or included in our computer index; however, the reports have been made part of the public record, as appropriate. If it is determined that this information should not be made a part of the public record, please so advise.

If I can be of further assistance, please do not hesitate to contact me.

Enclosures

cc: Doug Patton  
Steve Duffy

83040461575

# Michael Marino / U.S. Congress

1420 Snyder Avenue

Philadelphia, PA 19145

(215) 334-1982

RECEIVED AT THE FEC

83 MAY 5

AM: 10:53

*COPY*

May 4, 1983

FEDERAL EXPRESS

Federal Election Commission  
Washington, D.C. 20463

Re: MUR 1539

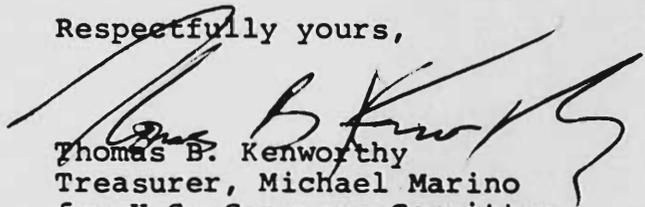
Gentlemen:

In response to the notification of Complaint received on April 21, 1983, I have determined that due to a communications breakdown between the Committee Treasurer and Assistant Treasurer as to post-election reporting responsibilities, the Committee has not heretofore filed either its Thirtieth Day Report following the General Election or its Year End Report.

Both of those reports are being filed and copies are included herewith. I am also sending copies of both reports to the Complainant. The Committee regrets that these reports were not filed in a timely fashion and we are certainly desirous of entering into conciliation.

For purposes of further communications with the Committee, my address and phone number are set forth below.

Respectfully yours,



Thomas B. Kenworthy  
Treasurer, Michael Marino  
for U.S. Congress Committee

2100 The Fidelity Building  
123 South Broad Street  
Philadelphia, PA 19109  
(215) 875-5702

83040431576

U.S. HOUSE OF REPRESENTATIVES  
OFFICE OF THE CLERK  
1983 MAY -6 AM 10:53

Office of the Clerk  
U.S. House of Representatives  
Washington, D.C. 20515

May 12, 1983

3 MAY 12 P 2: 20

TO: Charles N. Steele, General Counsel  
Federal Election Commission

FROM: Patricia A. Bias, Director *Pat*  
Office of Records and Registration

RE: MUR 1539

Enclosed please find a letter and copies of two reports (30-Day Post Election Report and the January 31 Year End Report) which were forwarded to this office by the Federal Election Commission.

Since the letter concerns a response to a complaint filed against Michael Marino for U.S. Congress Committee, I am forwarding it to your office to be handled in a manner consistent with Commission procedures.

The letter has not been microfilmed or included in our computer index; however, the reports have been made part of the public record, as appropriate. If it is determined that this information should not be made a part of the public record, please so advise.

If I can be of further assistance, please do not hesitate to contact me.

Enclosures

cc: Doug Patton  
Steve Duffy

bcc: Peter Kell

33040431577

# Michael Marino / U.S. Congress

1420 Snyder Avenue

Philadelphia, PA 19145

(215) 334-1982

RECEIVED AT THE FEC  
83 MAY 5  
ALL: 83

copy

May 4, 1983

FEDERAL EXPRESS

Federal Election Commission  
Washington, D.C. 20463

Re: MUR 1539

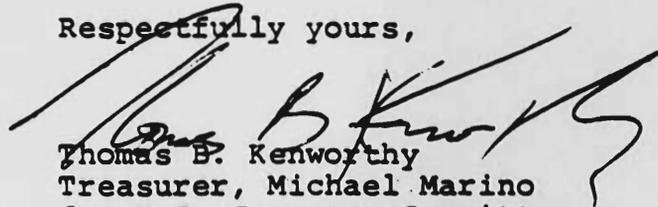
Gentlemen:

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Both of those reports are being filed and copies are included herewith. I am also sending copies of both reports to the Complainant. The Committee regrets that these reports were not filed in a timely fashion and we are certainly desirous of entering into conciliation.

For purposes of further communications with the Committee, my address and phone number are set forth below.

Respectfully yours,



Thomas B. Kenworthy  
Treasurer, Michael Marino  
for U.S. Congress Committee

2100 The Fidelity Building  
123 South Broad Street  
Philadelphia, PA 19109  
(215) 875-5702

83040461578

U.S. HOUSE OF REPRESENTATIVES  
OFFICE OF THE CLERK  
MAY 5 1983

**REPORTS OF RECEIPTS AND DISBURSEMENTS**  
For Authorized Committee

(Summary Page)

83 MAY 5 4:11 PM

<small>ALIGN AREA</small>	<b>1. Name of Committee (in Full)</b> Michael Marino For U.S. Congress Committee	<b>2. FEC Identification Number</b> 098515
<b>Address (Number and Street)</b> 1420 Snyder Avenue		<b>3. Is this Report an Amendment?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<b>City, State and Zip Code</b> Philadelphia, PA 19145		<input type="checkbox"/> Check if address is different than previously reported.

**4. TYPE OF REPORT**

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
<input type="checkbox"/> July 15 Quarterly Report	
<input type="checkbox"/> October 15 Quarterly Report	<input checked="" type="checkbox"/> Thirtieth day report following the General Election on <u>November 2</u> in the State of <u>Pennsylvania</u>
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for -  Primary Election  General Election  Special Election  Runoff Election

<b>SUMMARY</b>	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
<b>5. Covering Period</b> <u>10/14/82</u> through <u>11/22/82</u>		
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (From Line 11 (a))	\$49,609.16	\$262,715.91
(b) Total Contribution Refunds (from Line 20 (d))	- 0 -	\$ 100.00
(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	\$49,609.16	\$262,615.91
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17)	\$53,279.65	\$264,559.14
(b) Total Offsets to Operating Expenditures (from Line 14)	- 0 -	\$ 360.50
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))	\$53,279.65	\$264,198.64
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)</b>	\$ 1,356.88	
<b>9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D)</b>	- 0 -	
<b>10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D)</b>	\$28,580.76	

**\*Does not include \$10,000 debt guarantee by candidate**

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

For further information, contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-523-4068

Thomas B. Kenworthy

Type or Print Name of Treasurer

**SIGNATURE OF TREASURER**

**Date**

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

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

83040431579

**DETAILED SUMMARY PAGE  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)**

Name of Committee (in Full)		Report Covering the Period:	
Michael Marino For U.S. Congress Committee		From: 10/14/82	To: 11/22/82
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees (Memo Entry Unitized \$ <u>15,309.16</u> )		\$31,384.16	\$209,540.91
(b) Political Party Committees		\$ 1,025.00	\$ 27,025.00
(c) Other Political Committees		\$17,200.00	\$ 26,150.00
(d) The Candidates		- 0 -	- 0 -
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)).		\$49,609.16	\$262,715.91
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>		- 0 -	- 0 -
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate		- 0 -	\$ 10,000.00
(b) All Other Loans		\$ 2,550.00	\$ 2,550.00
(c) TOTAL LOANS (add 13 (a) and 13 (b)).		\$ 2,550.00	\$ 12,550.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>		- 0 -	\$ 360.50
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>		- 0 -	\$ 389.61
<b>16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)</b>		\$52,159.16	\$276,016.02
<b>II. DISBURSEMENTS</b>			
<b>17. OPERATING EXPENDITURES</b>		\$53,279.65	\$264,559.14
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		- 0 -	- 0 -
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate		- 0 -	- 0 -
(b) Of All Other Loans		- 0 -	- 0 -
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)).		- 0 -	- 0 -
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees		- 0 -	\$ 100.00
(b) Political Party Committees		- 0 -	- 0 -
(c) Other Political Committees		- 0 -	- 0 -
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))		- 0 -	\$ 100.00
<b>21. OTHER DISBURSEMENTS</b>		- 0 -	- 0 -
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)</b>		\$53,279.65	\$264,659.14

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 12,477.37	23
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$ 52,159.16	24
25. SUBTOTAL (Add Line 23 and Line 24)	\$ 64,636.53	25
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$ 53,279.65	26
26a. Guaranteed repayment of debt treated as loan (from Line 13(a) Column B)	\$ 10,000.00	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$ 1,356.88	27

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAY SWIDER 111 Bainbridge Street Philadelphia, PA 19147 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	SpectaGuard The Spectrum Philadelphia, PA Occupation President Aggregate Year-to-Date-\$ 500.00	10/15/82	\$ 500.00
B. Full Name, Mailing Address and ZIP Code A. H. Gordon Kidder, Peabody & Co. 10 Hanover Square New York, New York Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Kidder, Peabody & Co. 10 Hanover Square New York, New York Occupation Investment Broker, Chairman Aggregate Year-to-Date-\$ 200.00	10/15/82	\$ 200.00
C. Full Name, Mailing Address and ZIP Code George M. Ross 1116 Byberry Road Bryn Mawr, PA 19010 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Goldman Sachs & Co 3 GIZARD PLAZA Philadelphia, PA Occupation Investment Banker Aggregate Year-to-Date-\$ 300.00	10/15/82	\$ 300.00
D. Full Name, Mailing Address and ZIP Code Elsie H. Hillman Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date-\$ 750.00	10/15/82	\$ 750.00
E. Full Name, Mailing Address and ZIP Code H. J. Heinz, II Goodwood P.O. Box 57 Sewickley, PA 15143 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer H. J. Heinz & Co. P. H. Sburgh, PA Occupation Homemaker President Aggregate Year-to-Date-\$ 500.00	10/15/82	\$ 500.00
F. Full Name, Mailing Address and ZIP Code Alexandre Ewing Orchard Lane Wallingford, PA 19086 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date-\$ 500.00	10/19/82	\$ 500.00
G. Full Name, Mailing Address and ZIP Code Teresa M. Marino 3774 KRATZ ROAD Collegeville, PA 19426 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Housewife Aggregate Year-to-Date-\$ 250.00	10/20/82	\$ 250.00
SUBTOTAL of Receipts This Page (optional)			\$ 3000.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code

Lewis KATZ  
 705 N Kings Highway  
 Cherry Hill, N.J.

Name of Employer

Self-employed

Date (month, day, year)

10/30/82

Amount of Each Receipt this Period

\$ 200.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Attorney

Aggregate Year-to-Date-\$ 300.00

B. Full Name, Mailing Address and ZIP Code

FRANK G. Warburton  
 31 Morningside Drive  
 Yardley, PA

Name of Employer

MAIC Hurdman  
 Suite 1600  
 3 Penn Center Plaza  
 Philadelphia, PA 19102

Date (month, day, year)

10/22/82

Amount of Each Receipt This Period

\$ 200.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Accountant

Aggregate Year-to-Date-\$ 400.00

C. Full Name, Mailing Address and ZIP Code

Peter Matoun  
 107 Rock Rose Lane  
 Radnor, PA

Name of Employer

BALLOON, Spahr, Andrews & Jipoll  
 30 S. 17th Street  
 Philadelphia, PA 19103

Date (month, day, year)

10/20/82

Amount of Each Receipt This Period

\$ 250.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Attorney

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Ella Warren Miller  
 115 Maple Hill Road  
 Glenside, PA 19035

Name of Employer

Date (month, day, year)

10/14/82

Amount of Each Receipt This Period

\$ 500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Housewife

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Edward Lipkin  
 1804 Rittenhouse Square  
 Philadelphia, PA 19103

Name of Employer

NATIONAL PROPERTY ANALYSTS  
 1804 Rittenhouse Square  
 Philadelphia, PA 19103

Date (month, day, year)

10/14/82

Amount of Each Receipt This Period

\$ 250.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Real Estate Investment Executive

Aggregate Year-to-Date-\$ 450.00

F. Full Name, Mailing Address and ZIP Code

John A. Philbrick, III  
 320 Walnut Street  
 Philadelphia, PA 19106

Name of Employer

H.C. Knight & Co.  
 320 Walnut Street  
 Philadelphia, PA 19106

Date (month, day, year)

10/14/82

Amount of Each Receipt This Period

\$ 500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Insurance Broker

Aggregate Year-to-Date-\$ 525.00

G. Full Name, Mailing Address and ZIP Code

Harold G. Schaeffer  
 160 W Gulph Rd.  
 King of Prussia, PA 19406

Name of Employer

Date (month, day, year)

10/15/82

Amount of Each Receipt This Period

\$ 500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date-\$ 500.00

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

\$2400.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)			
Michael Marzino for U. S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code Louis J. Esposito 1600 N. 72d Street Philadelphia, PA 19151		Name of Employer Esposito's 1001 S. 9th Street Philadelphia, PA 19147	Date (month, day, year) 10/15/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Restaurateur	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Olga Piszek Pennsylvania Ave. Box 305 Ft. Washington, PA 19034		Name of Employer (blank)	Date (month, day, year) 10/15/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Housewife	Amount of Each Receipt This Period \$500.00
C. Full Name, Mailing Address and ZIP Code Winifred S. Cheston 229 Spruce Street Philadelphia, PA 19106		Name of Employer (blank)	Date (month, day, year) 10/15/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Housewife	Amount of Each Receipt This Period \$250.00
D. Full Name, Mailing Address and ZIP Code George M. Cheston 229 Spruce Street Philadelphia, PA 19106		Name of Employer Self-employed	Date (month, day, year) 10/15/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Business Exec	Amount of Each Receipt This Period \$250.00
E. Full Name, Mailing Address and ZIP Code Dr. Stanley G. Glanville 630 Richards Road Wayne, PA		Name of Employer Jefferson Hospital Philadelphia, PA	Date (month, day, year) 10/15/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Physician	Amount of Each Receipt This Period \$500.00
F. Full Name, Mailing Address and ZIP Code David C. Anten 120 Delancey Street Philadelphia, PA 19106		Name of Employer Reed, Smith, Townd & Muns 1600 Walnut Street Philadelphia, PA 19102	Date (month, day, year) 10/15/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Amount of Each Receipt This Period \$500.00
G. Full Name, Mailing Address and ZIP Code Dorothy Cassano 8134 Seminole Ave. Philadelphia, PA 19118		Name of Employer (blank)	Date (month, day, year) 10/26/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Housewife	Amount of Each Receipt This Period \$200.00
SUBTOTAL of Receipts This Page (optional) . . . . .			\$2700.00
TOTAL This Period (last page this line number only) . . . . .			(blank)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full) <u>Michael L. Mariani For U.S. Congress Committee</u>			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>David W. Tuomey</u> <u>100 Matsonford Road</u> <u>RADNOR PA 19087</u>	<u>Sun Oil Company</u> <u>100 Matsonford</u> <u>RADNOR PA 19087</u>	<u>10/20/82</u>	<u>\$200.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Business Executive</u> Aggregate Year-to-Date—\$ <u>200.00</u>		
<b>B. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<u>Joseph Healy</u> <u>250 414 Presidential Drive</u> <u>Lafayette Hill, PA 19444</u>	<u>Deloitte Haskins &amp; Sells</u> <u>2500 Third-Civil Plaza</u> <u>Philadelphia, PA 19102</u>	<u>10/26/82</u>	<u>\$250.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>CPA</u> Aggregate Year-to-Date—\$ <u>250.00</u>		
<b>C. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<u>Michael W. Lloyd</u> <u>Janney Montgomery Scott</u> <u>5 Penn Center Plaza</u> <u>Philadelphia PA 19102</u>	<u>Janney Montgomery Scott</u> <u>5 Penn Center Plaza</u> <u>Philadelphia, PA 19102</u>	<u>10/26/82</u>	<u>\$200.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Securities Trader</u> Aggregate Year-to-Date—\$ <u>200.00</u>		
<b>D. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<u>Nelson G. Harris</u> <u>Presidential Drive</u> <u>Lafayette Hill, Pa 19441</u>	<u>Trusty Baking Company</u> <u>2801 Hunting Park Ave.</u> <u>Philadelphia, PA 19129</u>	<u>10/26/82</u>	<u>\$500.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>President</u> Aggregate Year-to-Date—\$ <u>500.00</u>		
<b>E. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<u>Sonia Griffin</u> <u>624 Dorset Road</u> <u>Devon PA 19333</u>	<u>Campbell Soup Company</u> <u>Campbell Place</u> <u>Camden, NJ 08104</u>	<u>10/26/82</u>	<u>\$500.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Housewife</u> Aggregate Year-to-Date—\$ <u>500.00</u>		
<b>F. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<u>Zoe Coulson</u> <u>220 Locust Street</u> <u>Philadelphia PA 19106</u>	<u>Campbell Soup Company</u> <u>Campbell Place</u> <u>Camden, N.J. 08101</u>	<u>10/26/82</u>	<u>\$500.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ <u>500.00</u>		
<b>G. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<u>Harry P. Begier</u> <u>1900 Market Street</u> <u>Philadelphia, PA 19103</u>	<u>Atium Leasing Co.</u> <u>1900 Market Street</u> <u>Philadelphia Pa 19103</u>	<u>10/27/82</u>	<u>\$450.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Attorney</u> Aggregate Year-to-Date—\$ <u>450.00</u>		
SUBTOTAL of Receipts This Page (optional) . . . . .			<u>\$12600.00</u>
TOTAL This Period (last page this line number only) . . . . .			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code

W. A. Lee Davis, III  
 Office 2600 The Fidelity Building  
 Philadelphia, PA 19107

Name of Employer  
 Dilworth, Paxon, Enlich & Kaufman  
 2600 The Fidelity Bldg.  
 Philadelphia, PA 19107

Date (month, day, year)

10/27/82

Amount of Each Receipt this Period

\$250.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Attorney

Aggregate Year-to-Date-\$ 250.00

B. Full Name, Mailing Address and ZIP Code

Scott M. Delman  
 Lehman Brothers Kuhn Loeb  
 55 Water Street  
 New York, NY 10048

Name of Employer  
 Lehman Brothers Kuhn Loeb  
 55 Water Street  
 New York, NY 10048

Date (month, day, year)

10/27/82

Amount of Each Receipt This Period

\$500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Investment Banker

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

J. Morris Evans  
 408 Abington Road  
 Gwynedd Valley, PA 19437

Name of Employer  
 P.R. Corp  
 P.O. Box 840  
 Valley Forge, PA 19482

Date (month, day, year)

10/27/82

Amount of Each Receipt This Period

\$200.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Chairman

Aggregate Year-to-Date-\$ 200.00

D. Full Name, Mailing Address and ZIP Code

Newbold Strongy  
 Center Square West  
 1500 Market Street  
 Philadelphia, PA

Name of Employer  
 Center Square West  
 1500 Market Street  
 Philadelphia, PA

Date (month, day, year)

10/27/82

Amount of Each Receipt This Period

\$250.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Business Executive

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Arthur J. Kania  
 Two Bala Cynwyd Plaza  
 Bala Cynwyd, PA 19004

Name of Employer  
 Kania, Lindner, Insaks & Feery  
 Two Bala Cynwyd Plaza  
 Bala Cynwyd, PA 19004

Date (month, day, year)

10/28/82

Amount of Each Receipt This Period

\$250.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Attorney

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Frank Piasecki  
 Turnbridge Road  
 Havertown, PA 19041

Name of Employer  
 Piasecki Aircraft Co.  
 Sharon Hill, PA

Date (month, day, year)

10/28/82

Amount of Each Receipt This Period

\$500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

President

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Francis J. Baguella  
 2 Bala Cynwyd Plaza  
 Bala Cynwyd, PA 19004

Name of Employer  
 Fisherstock & Co.  
 2 Bala Cynwyd Plaza  
 Bala Cynwyd, PA 19004

Date (month, day, year)

10/29/82

Amount of Each Receipt This Period

\$250.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Resident Manager

Aggregate Year-to-Date-\$ 250.00

SUBTOTAL of Receipts This Page (optional) ..... \$2200.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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)			
Michael Marino For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Samuel MARINO 3774 Kentz Road Colbaceville, PA 19426		Subaru of America Norristown, PA	11/15/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		CAR DEALER	\$200.00
		Aggregate Year-to-Date-\$ 200.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
William A. Graham III 828 Ponthoeken SHD Road Gladwyne, PA 19035		The Graham Co. 2124 Race Street Philadelphia, PA	11/15/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Insurance Broker	\$200.00
		Aggregate Year-to-Date-\$ 450.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Raymond S. Page, Jr. Campbell Place Camden, N.J. 08101		Campbell Soap Co. Campbell Place Camden, N.J. 08101	11/19/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		V P - Corporate Relations	\$300.00
		Aggregate Year-to-Date-\$ 300.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Robert L. Treschke 710 Mill Creek Road Gladwyne, PA 19085		Montgomery, McMan, Walker & Rhoads Three Parkway Philadelphia, PA 19102	10/30/82
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Attorney	\$50.00
		Aggregate Year-to-Date-\$ 350.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Richard P. Brown, Jr. 8800 Towanda St. Philadelphia, PA 19118		Megan, Lewis & Beckius 2100 The Fidelity Bldg Philadelphia, PA 19107	11/19/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Attorney	\$100.00
		Aggregate Year-to-Date-\$ 600.00	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Carmen C. Nasuti 1717 Portee Street Philadelphia, PA 19115		Nasuti & Miller 1325 Spruce Street Philadelphia, PA 19107	10/18/82
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Attorney	\$50.00
		Aggregate Year-to-Date-\$ 750.00	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Joseph Procacci 3655 S. Lawrence St. Philadelphia, PA 19148		Procacci Bus. Sales Corp. 3655 S. Lawrence St. Philadelphia, PA 19148	10/26/82
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Treasurer	\$50.00
		Aggregate Year-to-Date-\$ 256.00	
SUBTOTAL of Receipts This Page (optional) .....			\$ 850.00
TOTAL This Period (last page this line number only) .....			

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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) Michael Marino for U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anna H. Watts 219 Spruce Street Philadelphia PA 19106	Occupation Housewife	10/22/82	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 900.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edwin E. Tuttle 514 Pine Street Philadelphia PA 19106	Pennwalt Corp. Three Parkway Philadelphia PA 19102	10/26/82	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manufacturing Rep. (Chem)	Aggregate Year-to-Date-\$ 900.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
F. Stanton Meyer 37 Evans Lane Haverford, PA 19041	Kidder Peabody & Co. Three Grand Plaza Philadelphia, PA	10/14/82	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Broker	Aggregate Year-to-Date-\$ 350.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
H. Thomas Hollowell, Jr. 916 The Benson - East Jenkintown, PA 19046	SPS Technologies Inc. 916 The Benson - East Jenkintown, PA 19046	10/14/82	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Executive	Aggregate Year-to-Date-\$ 550.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
T. Edward O'Neill 412-J Bainbridge Street Philadelphia, PA 19147	Butcher & Singer 211 S Broad St. Philadelphia PA	10/27/82	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Counselor	Aggregate Year-to-Date-\$ 400.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Y. Giles 1755 Cedar Lane North Villanova, PA 19085	Philadelphia Phillies Veterans Stadium Philadelphia, PA	10/14/82	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Proslat. Profession. Basketball Team	Aggregate Year-to-Date-\$ 300	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
J. Welles Henderson Public Ledger Building Philadelphia, PA 19106	Pounce Biecup & Henderson Public Ledger Building Philadelphia, PA 19106	10/22/82	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date-\$ 250.00	
SUBTOTAL of Receipts This Page (optional) .....			\$ 700.00
TOTAL This Period (last page this line number only) .....			

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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) <u>Michael Marino For U.S. Congress Committee</u>			
A. Full Name, Mailing Address and ZIP Code <u>Hannah L. Henderson</u> <u>316 Williams Alley</u> <u>Philadelphia, PA 19106</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>250.00</u>		
B. Full Name, Mailing Address and ZIP Code <u>Daniel P. O'Connell</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>230.00</u>		
C. Full Name, Mailing Address and ZIP Code <u>George P. Steele</u> <u>112 Pine Street</u> <u>Philadelphia, PA</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>250.00</u>		
D. Full Name, Mailing Address and ZIP Code <u>Joseph Mirabile, Jr.</u> <u>735 Palmer Place</u> <u>Blue Bell, PA 19422</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>250.00</u>		
E. Full Name, Mailing Address and ZIP Code <u>HAC L. Bemis</u> <u>P.O. Box 243</u> <u>Bryn Mawr, PA 19010</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>350.00</u>		
F. Full Name, Mailing Address and ZIP Code <u>Edward H. Rosen</u> <u>941 Bryn Mawr Ave</u> <u>Lancaster PA 19072</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>300.00</u>		
G. Full Name, Mailing Address and ZIP Code <u>Samuel A. Breeze</u> <u>22 National Transit Bldg</u> <u>Oil City, PA 16301</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>300.00</u>		
SUBTOTAL of Receipts This Page (optional) .....			<u>\$775.00</u>
TOTAL This Period (last page this line number only) .....			

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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 committees.

Name of Committee (in Full)  
 Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Brewan Spahr, Andrews & Ingersoll 30 South 17th Street Philadelphia, PA 19103		10/22/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date—\$300.00
B. Full Name, Mailing Address and ZIP Code Constance Corrado 827 Lindale Ave. Oradel Hill, PA	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		10/18/82	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife		Aggregate Year-to-Date—\$845.00
C. Full Name, Mailing Address and ZIP Code Robert L. McNeil, Jr. 601 East Euclid Ave Wyndmoor, PA 19118	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		10/24/82	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date—\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date—\$
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date—\$
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date—\$
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-to-Date—\$
SUBTOTAL of Receipts This Page (optional) . . . . .			\$850.00
TOTAL This Period (last page this line number only) . . . . .			\$16,075.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Page 1 of 1 for  
 LINE NUMBER 116  
 (Use separate schedule for each  
 category of the Detailed  
 Summary Page)

Any information copied from such Reports or 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)			
Michael Marino For U.S. Congress Committee			
<b>A. Full Name, Mailing Address and ZIP Code</b> Republican 55th Women Committee 2714 Harbison Ave Philadelphia, PA 19131	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/15/82	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 25.00		
<b>B. Full Name, Mailing Address and ZIP Code</b> Michel For Congress Committee Robert H. Michel 1029 N. Glenwood Ave. Peoria, Ill. 61606	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	10/29/82	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 1000.00		
<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		
<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		
<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		
<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		
<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$		
<b>SUBTOTAL</b> of Receipts This Page (optional) . . . . .			\$1025.00
<b>TOTAL</b> This Period (last page this line number only) . . . . .			\$1025.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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)			
Michael MARINO For U.S. Congress Committee			
<b>A. Full Name, Mailing Address and ZIP Code</b> UEOC Employers Fed. Credit Union 30 South 17 <sup>th</sup> Street Philadelphia, PA 19103	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 10/27/92	<b>Amount of Each Receipt this Period</b> \$50.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date—\$ 50.00</b>	
<b>B. Full Name, Mailing Address and ZIP Code</b> BuH PAC of the Nat'l Ass'n of Home Builders National Housing Center 15th & M Streets, NW WASHINGTON, D.C. 20005	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 10/27/92	<b>Amount of Each Receipt This Period</b> \$1000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date—\$ 1000.00</b>	
<b>C. Full Name, Mailing Address and ZIP Code</b> Arthur Young & Co PAC 277 PARK Ave New York, NY 10017	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 10/27/92	<b>Amount of Each Receipt This Period</b> \$ 100.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date—\$ 100.00</b>	
<b>D. Full Name, Mailing Address and ZIP Code</b> Fueling by Industries Good Government Committee P.O. Box 21207 Greensboro, NC 27420	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 10/26/92	<b>Amount of Each Receipt This Period</b> \$1000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date—\$ 1000.00</b>	
<b>E. Full Name, Mailing Address and ZIP Code</b> SEARS PAC 233 S. Wacker Drive Chicago, Illinois 60606	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 10/24/92	<b>Amount of Each Receipt This Period</b> \$500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date—\$ 500.00</b>	
<b>F. Full Name, Mailing Address and ZIP Code</b> SUN PAC 100 MATSONFORD ROAD RADNOR, PA 19087	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 10/24/92	<b>Amount of Each Receipt This Period</b> \$500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date—\$ 1500.00</b>	
<b>G. Full Name, Mailing Address and ZIP Code</b> SAMPAC American Collectors Ass'n 4040 W. 70 <sup>th</sup> Street MIDWESTPOTS, Minn 55435	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 10/21/92	<b>Amount of Each Receipt This Period</b> \$500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date—\$ 500.00</b>	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			\$3650.00
<b>TOTAL This Period (last page this line number only)</b> .....			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)			
Michael Marino For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code			
Fluor Public Affairs Committee 3333 Michelson Drive Irvine, California 92730		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt this Period
		Aggregate Year-to-Date—\$1000.00	\$1000.00
B. Full Name, Mailing Address and ZIP Code			
Employers of Minority Political Action Committee 1100 First National Center Bldg Oklahoma City, OK 73102		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date—\$ 500.00	\$500.00
C. Full Name, Mailing Address and ZIP Code			
DALLAS Energy PAC 911 Prater Bank Building 911 Prater Road DALLAS TX 75225		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date—\$ 2000.00	\$2000.00
D. Full Name, Mailing Address and ZIP Code			
SCOTT PAC Scott Paper Company Scott Plaza Philadelphia, PA 19113		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date—\$ 250.00	\$250.00
E. Full Name, Mailing Address and ZIP Code			
PNB PAC Philadelphia National Bank Broad & Chestnut Streets Philadelphia PA 19107		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date—\$ 250.00	\$250.00
F. Full Name, Mailing Address and ZIP Code			
Smith Klive PAC One Franklin Plaza P.O. Box 7929 Philadelphia, PA 19101		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date—\$ 300.00	\$150.00
G. Full Name, Mailing Address and ZIP Code			
American Family PAC P.O. Box 1480 Columbus, GA 31902		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Amount of Each Receipt This Period
		Aggregate Year-to-Date—\$ 500.00	\$500.00
SUBTOTAL of Receipts This Page (optional) . . . . .			\$4650.00
TOTAL This Period (last page this line number only) . . . . .			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full) Michael Mario For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Oil Political Awareness Fund Room M-01 461 South Boylston St. Los Angeles, CA 90017		10/18/82	\$950.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 750.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BROY PAC P.O. Box 700 Lenoir, NC 28645		10/18/82	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Central Penn Good Government Committee Central Penn National Bank 1700 Arch Street Philadelphia, PA 17103		10/18/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
COLPAC Colonial Life & Accident Insurance Co. 200 Colonial Life Boulevard West Columbia, SC 29210		10/18/82	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
FED PAC Federation of American Hospitals P.O. Box 28359 Washington D.C. 20005		10/24/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LUPAC National Assoc of Life Underwriters PAC 1922 F Street Washington, D.C. 20006		10/20/82	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BUSD Citizenship PAC 3155 W. Big Beaver Road Troy, Michigan		10/21/82	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 1000.00	
SUBTOTAL of Receipts This Page (optional) . . . . .			\$ 3200.00
TOTAL This Period (last page this line number only) . . . . .			

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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)

Michael Maciavo For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STERL PAC Madison Ave at 3 <sup>rd</sup> Street New York, N.Y.		10/21/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PACOSA Pennsylvania Savings League P.O. Box 797 Harrisburg, PA 17108		10/22/82	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ 300.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wholesaler-Distributor PAC 1725 K Street NW Washington, DC 20006		10/22/82	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ 100.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Globe Employees Political Action Committee Globe Life & Accident Insurance Co. Globe Life Center Oklahoma City, OK 73184		10/22/82	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ 200.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
97th Club Campaign Committee 200 A Justice Court NE Washington, D.C. 20002		10/26/82	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Continental Bank Govs Government Committee Continental Bank PAC 1500 Market Street Philadelphia PA 19102		10/26/82	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ 250.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rouse Group Govs Government Fund 500 Virginia Drive Fort Washington, PA 19034		10/26/82	\$400
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ 400.00		
SUBTOTAL of Receipts This Page (optional) . . . . .			\$2000.00
TOTAL This Period (last page this line number only) . . . . .			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)  
Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FIRST PA PAC First Pennsylvania Bank Philadelphia, PA 19101 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date—\$ <u>000.00</u>	10/26/82	\$200.00
B. Full Name, Mailing Address and ZIP Code ALCO PAC P.O. Box 22479 Cleveland, Ohio 44122 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date—\$ <u>250.00</u>	10/26/82	\$250.00
C. Full Name, Mailing Address and ZIP Code DART & KRAFT, Inc. PAC 8480 Beverly Boulevard Los Angeles, Ca. 90048 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date—\$ <u>500.00</u>	10/26/82	\$500.00
D. Full Name, Mailing Address and ZIP Code HARSCO PAC 350 Poplar Church Road Camp Hill, PA 17011 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date—\$ <u>250.00</u>	10/26/82	\$250.00
E. Full Name, Mailing Address and ZIP Code SEAPAC Shell Employers PAC One Shell Plaza P.O. Box 2946 Houston, TX 77001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date—\$ <u>250.00</u>	11/1/82	\$250.00
F. Full Name, Mailing Address and ZIP Code Hoffman LaRoche Goos Government Committee 340 Kingsland Road Nutley, N.J. 07110 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date—\$ <u>200.00</u>	11/1/82	\$200.00
G. Full Name, Mailing Address and ZIP Code Tooling & Machine PAC Nat'l Tool Die & Machine Ass'n P.O. Box 55162 Washington, DC 20022 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date—\$ <u>1000.00</u>	11/1/82	\$1000.00
SUBTOTAL of Receipts This Page (optional) . . . . .			\$2650.00
TOTAL This Period (last page this line number only) . . . . .			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)  
Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code <u>Merrill Lynch PAC</u> <u>Merrill Lynch, Pierce, Fenner &amp; Smith</u> <u>One Liberty Plaza</u> <u>New York, NY 10005</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period <u>\$250.00</u>
	Occupation	<u>11/1/82</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>250.00</u>		

B. Full Name, Mailing Address and ZIP Code <u>TRW Govt Gov't Fund</u> <u>23555 Euclid Ave.</u> <u>Cleveland, Ohio 44117</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period <u>\$250.00</u>
	Occupation	<u>11/1/82</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>250.00</u>		

C. Full Name, Mailing Address and ZIP Code <u>REN Lobster</u> <u>Employee's Govt Gov't Fund</u> <u>P.O. Box 13147</u> <u>Orlando, FL 32859</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period <u>\$250.00</u>
	Occupation	<u>11/5/82</u>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>250.00</u>		

D. Full Name, Mailing Address and ZIP Code <u>Natl. Society of Public Accountants PAC</u> <u>47 Armistice Blvd</u> <u>Pawtucket, R.I. 02862</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period <u>\$100.00</u>
	Occupation	<u>10/25/82</u>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>100.00</u>		

E. Full Name, Mailing Address and ZIP Code <u>IU PAC</u> <u>The PAC of IU International</u> <u>1500 Walnut Street</u> <u>Philadelphia PA 19102</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period <u>\$200.00</u>
	Occupation	<u>11/17/82</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>400.00</u>		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		

SUBTOTAL of Receipts This Page (optional) ..... \$1050.00

TOTAL This Period (last page this line number only) ..... \$17,200.00

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (In Full) <u>Michael Marino For U.S. Congress Committee</u>			
A. Full Name, Mailing Address and ZIP Code <u>Shawin Specter</u> <u>2400 Chestnut street</u> <u>Philadelphia, PA</u>	Name of Employer	Date (month, day, year) <u>10/26/92</u>	Amount of Each Receipt This Period <u>\$500.00</u>
	Occupation <u>STUDENT</u>		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>410.00</u>		
B. Full Name, Mailing Address and ZIP Code <u>Herbert Hahn</u> <u>55 E. 86th Street</u> <u>N.Y. N.Y. 10025</u>	Name of Employer	Date (month, day, year) <u>10/26/92</u>	Amount of Each Receipt This Period <u>\$1000.00</u>
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>1000.00</u>		
C. Full Name, Mailing Address and ZIP Code <u>MARION HAHN</u>	Name of Employer	Date (month, day, year) <u>10/26/92</u>	Amount of Each Receipt This Period <u>\$ 750.00</u>
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ <u>750.00</u>		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
SUBTOTAL of Receipts This Page (optional) . . . . .			<u>\$ 2550.00</u>
TOTAL This Period (last page this line number only) . . . . .			<u>\$ 2550.00</u>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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)  
**Michael Marino For U.S. Congress Committee**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cobarr German Agency Box 512 Brocklambville, Md 21022	Advertising - TV	10/14/82	\$ 3500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/5/82	\$ 3500.00
Postmaster of Philadelphia 300 Street Philadelphia PA	Stamps - postage	10/14/82	\$ 15.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/14/82 11/23/82 11/27/82	\$ 100.00 \$ 3400.00 \$ 100.00
"	Stamps - postage	10/24/82	\$ 150.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Green Village Printing Studio 500 S 4th Street Philadelphia, PA	Advertising - radio	10/14/82	\$ 362.50
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Alling & Cory Co. 1300 W. Locust Ave. Philadelphia, PA	Stationery	10/14/82	\$ 345.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Printer's Place 1315 Locust Street Philadelphia, PA 19107	Printing	10/15/82	\$ 92.50
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/14/82	\$ 36.00
Lou Pasamunick 313 S 11th St. Philadelphia PA	Campaign consultation services & reimbursement	10/15/82	\$ 50.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/13/82 10/22/82 10/25/82	\$ 140.00 (stamps) \$ 75.00 \$ 35.00 (stamps)
Loretta D'Antonio 900 E. Passyunk Ave. Philadelphia, PA 19147	Campaign consultation services & reimbursement	10/15/82	\$ 100.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/82 10/28/82 11/16/82	\$ 100.00 \$ 512.00 (stamps) \$ 25.40 (stamps)
Chris French 416 S 10th Street Philadelphia, PA	Campaign consultation services	10/15/82	\$ 50.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/82 11/16/82	\$ 50.00 \$ 1230.00 (stamps)
SUBTOTAL of Disbursements This Page (optional)			\$ 7,200.00
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement (Campaign consultation services + reimbursement)	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Dowdell 416 S 41st St. Philadelphia, PA	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/82 10/22/82 10/25/82 10/27/82	\$70.00 570.00 \$36.49 (base stamps) 720.00
B. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement "	Date (month, day, year) 11/16/82	Amount of Each Disbursement This Period \$112.26 (relating)
C. Full Name, Mailing Address and ZIP Code Licia Hahn 1818 Shunk Street Philadelphia, PA	Purpose of Disbursement (Campaign consultation services + reimbursement)	Date (month, day, year) 10/15/82 10/16/82 10/22/82 11/5/82	Amount of Each Disbursement This Period \$100.00 \$100.00 (stamps) 350.00 \$912.32 (car rentals)
D. Full Name, Mailing Address and ZIP Code Bell of PA. Box 8585 Philadelphia, PA 19173	Purpose of Disbursement Telephones	Date (month, day, year) 10/15/82 10/21/82 11/10/82	Amount of Each Disbursement This Period \$489.77 \$201.13 \$737.60
E. Full Name, Mailing Address and ZIP Code WDRS - RADIO Blount & Edgely Rd. Philadelphia, PA	Purpose of Disbursement Advertising - Radio	Date (month, day, year) 10/15/82 10/25/82	Amount of Each Disbursement This Period \$744.60 \$994.00
F. Full Name, Mailing Address and ZIP Code WHNT - RADIO 3130 Conshohocken Ave. Philadelphia, PA	Purpose of Disbursement Advertising - Radio	Date (month, day, year) 10/14/82 10/25/82	Amount of Each Disbursement This Period \$750.00 \$850.00
G. Full Name, Mailing Address and ZIP Code MinuteMan Press 8917 Ludlow St. Upper Darby, PA 19087	Purpose of Disbursement Printing	Date (month, day, year) 10/15/82 10/17/82 10/27/82 10/27/82	Amount of Each Disbursement This Period \$161.26 \$55.80 \$312.70 \$730.00
H. Full Name, Mailing Address and ZIP Code WICAC - TV City Line & Monument Aves Bala Cynwyd, PA 19131	Purpose of Disbursement Advertising - TV	Date (month, day, year) 10/18/82 10/19/82 10/25/82 10/27/82	Amount of Each Disbursement This Period \$1491.75 \$510.75 \$2150.00 \$5163.75
I. Full Name, Mailing Address and ZIP Code KYW - TV 5th & Market Streets Philadelphia, PA 19106	Purpose of Disbursement Advertising - TV	Date (month, day, year) 10/19/82	Amount of Each Disbursement This Period \$4037.50
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

Michael Marino For U.S. Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PALUMBO'S CAFE - Restaurant 824 Catherine St. Philadelphia, PA	Rental of facility For Fund Raising Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/82	\$ 2187.50
B. Full Name, Mailing Address and ZIP Code WCHU - TV City Line 3 Monument Aves Bryn Mawr, PA 19131	Purpose of Disbursement Advertising - TV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/82	\$ 1572.50
C. Full Name, Mailing Address and ZIP Code Philadelphia Tribune 522 S 16th St. Philadelphia, PA	Purpose of Disbursement Advertising - Newspaper Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/82	\$ 1000.00
D. Full Name, Mailing Address and ZIP Code CARMEN MARINO 1420 Snyder Ave Phila. PA 19145	Purpose of Disbursement Campaign Consultation services & reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/82 11/5/82	500.00 3238.00
E. Full Name, Mailing Address and ZIP Code WPVI - TV 6 4100 City Line Ave. Phila. PA 19131	Purpose of Disbursement Advertising - TV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/82 10/22/82 10/27/82	855.00 8848.75 14720.00
F. Full Name, Mailing Address and ZIP Code City of Philadelphia Phila. PA	Purpose of Disbursement News for Posters Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/82	\$ 40.00
G. Full Name, Mailing Address and ZIP Code EASTON IV 220 S 40th St. Phila PA	Purpose of Disbursement Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/82 10/25/82 10/27/82 10/27/82	573.28 523.44 62.00 523.44
H. Full Name, Mailing Address and ZIP Code Phila PA	Purpose of Disbursement Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/82	\$ 22.71
I. Full Name, Mailing Address and ZIP Code WVRS - TV 3000 S 22nd St Phila. PA 19145	Purpose of Disbursement Advertising - TV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/28/82	\$ 1041.25

SUBTOTAL of Disbursements This Page (optional) ..... \$ 22,270.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Page 1 of 1 for  
**LINE NUMBER** 1  
 (Use separate schedule(s) for each  
 category of the Detailed  
 Summary Page)

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Name of Committee (in Full)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
WVPTL-TV 500 W. Wyomark Ave. Philadelphia PA 19131	Advertising-TV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/92	\$ 3196.00
Minuteman Press 6417 Ludlow St. Upper Darby PA 19082	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/92	\$ 750.00
Abanteo Graphics	Campaign buttons Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/24/92	\$ 476.84
Se Spedy 701 S.F.C. Blvd Phila. PA	Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/1/92	\$ 516.3
Frank Dillon	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/5/92	\$ 750.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
<b>SUBTOTAL</b> of Disbursements This Page (optional)			\$ 6,228.84
<b>TOTAL</b> This Period (last page this line number only)			\$ 6,228.84

109151070000

Name of Committee (in Full) <b>Michael Marino For U.S. Congress Committee</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>Robert Goodman Agency See Schedule D</b>	Original Amount of Loan <b>Extension of credit in the ordinary course of business</b>	Cumulative Payment To Date <b>- 0 -</b>	Balance Outstanding at Close of This Period <b>\$10,000.00</b>
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>8/20/82</u> Date Due <u>1/1/83</u> Interest Rate <u>15</u> % (apr) <u>to 1/1/83</u> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code <b>Michael Marino 1420 Snyder Ave Philadelphia, PA 19145</b>	Name of Employer		
	Occupation <b>CANDIDATE</b>		
	Amount Guaranteed Outstanding: <b>\$10,000.00</b>		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
		Original Amount of Loan	Cumulative Payment To Date
			Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) . . . . .			<b>\$10,000.00</b>
TOTALS This Period (last page in this line only) . . . . .			<b>\$10,000.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

83040431602

Name of Committee (in Full) <u>Michael Marino For U.S. Congress Committee</u>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <u>Herbert Hahn</u> <u>55 E. 86th Street</u> <u>N.Y., N.Y. 10028</u>	Original Amount of Loan <u>\$1000.00</u>	Cumulative Payment To Date <u>- 0 -</u>	Balance Outstanding at Close of This Period <u>\$1000.00</u>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>10/26/82</u> Date Due <u>Demand</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source <u>MARINA HAHN</u>			
		Original Amount of Loan <u>\$750.00</u>	Cumulative Payment To Date <u>- 0 -</u>
			Balance Outstanding at Close of This Period <u>\$750.00</u>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>10/26/82</u> Date Due <u>Demand</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) . . . . .			<u>\$1750.00</u>
TOTALS This Period (last page in this line only) . . . . .			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

83040431600

Name of Committee (in Full) <u>Michael Marino For U.S. Congress Committee</u>				
A. Full Name, Mailing Address and ZIP Code of Loan Source <u>Shawin Specter</u> <u>2400 Chestnut Street</u> <u>Philadelphia, PA</u> Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Original Amount of Loan <u>\$800.00</u>	Cumulative Payment To Date <u>- 0 -</u>	Balance Outstanding at Close of This Period <u>\$800.00</u>	
Terms: Date Incurred <u>10/25/82</u> Date Due <u>Demanded</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
2. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
3. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
B. Full Name, Mailing Address and ZIP Code of Loan Source				
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
2. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
3. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
SUBTOTALS This Period This Page (optional) . . . . .			<u>\$800.00</u>	
TOTALS This Period (last page in this line only) . . . . .			<u>\$2550.00</u>	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

35040431604

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Michael Mann For U.S. Congress Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Robert Goodman Agency Box 512 Brooklandville, Md 21022	\$15,603.26	\$7,000.00	\$7,000.00	\$15,603.26
Nature of Debt (Purpose): Advertising				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Packard Press Tenth & Spring Garden Streets Philadelphia, PA 19123	\$2916.54	-0-	-0-	\$2916.54
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Printers Place 1315 Walnut Street Philadelphia, PA 19107	\$2178.00	\$128.50	\$128.50	\$2178.00
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Duplifax P.O. Box 650 Camden, N.J. 08101	-0-	\$235.95	-0-	\$235.95
Nature of Debt (Purpose): Printing & Supplies				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor IBM c/o Furst & Furst 225 W. 34th N.Y., New York	-0-	\$531.38	-0-	\$531.38
Nature of Debt (Purpose): Office Equipment				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor MCI Telecommunications c/o Marvin Shapiro P.O. Box F Levittown, N.Y. 11756	-0-	\$330.84	-0-	\$330.84
Nature of Debt (Purpose): Telephone long distance service				
1) SUBTOTALS This Period This Page (optional) . . . . .				21,795.97
2) TOTAL This Period (last page this line only) . . . . .				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only). . . . .				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) . . . . .				

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Michael MARINO For U.S. Congress Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Federal Express Corporation P.O. Box 727 Dept. A. Memphis, TN 38194	- 0 -	\$ 401.50	- 0 -	\$ 401.50
Nature of Debt (Purpose): messenger/delivery service				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor C D I Temporary Services Inc. 5 Penn Center Plaza, Suite 1001 Phila. Pa. 19103	- 0 -	\$ 136.00	- 0 -	\$ 136.00
Nature of Debt (Purpose): Secretarial Services				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Minteman Press 6917 Ludlow street Upper Darby, PA 19082	- 0 -	\$ 4109.32	\$ 750.00	\$ 3359.32
Nature of Debt (Purpose): PRINTING				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor CBS Reproductions Old York Road Jenkintown PA	\$ 183.13	\$ 73.37	- 0 -	\$ 256.50
Nature of Debt (Purpose): Graphics				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Dollar Rent A Car P.O. Box 287 Drexel Hill, PA 19026	- 0 -	\$ 81.47	- 0 -	\$ 81.47
Nature of Debt (Purpose): Car Rental				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional) . . . . .				\$ 4234.79
2) TOTAL This Period (last page this line only) . . . . .				\$ 2630.76
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) * Excludes Debt Guaranteed . . . . .				\$ 2550.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) . . . . .				\$ 2880.76

100  
60  
43  
1  
3  
0  
4  
0  
3  
3  
0

**REPORTS OF RECEIPTS AND DISBURSMENTS**  
For Authorized Committee

RECEIVED AT THE FEC

83 MAY 5, 11:05

(Summary Page)

<b>ALIGN AREA</b>		<b>ALIGN AREA</b>	
1. Name of Committee (in Full) <b>Michael Marino For U.S. Congress Committee</b>		2. FEC Identification Number <b>098515</b>	
Address (Number and Street) <b>1420 Snyder Avenue</b>		3. Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
City, State and Zip Code <b>Philadelphia, PA 19145</b>		<input type="checkbox"/> Check if address is different than previously reported.	

4. **TYPE OF REPORT**

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input checked="" type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for -  Primary Election  General Election  Special Election  Runoff Election

83040431607

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/23/82</u> through <u>12/31/82</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (From Line 11 (e))	\$3,050.00	\$265,765.91
(b) Total Contribution Refunds (from Line 20 (d))	\$2,500.00	\$ 2,600.00
(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	\$ 550.00	\$263,165.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$1,148.56	\$265,707.70
(b) Total Offsets to Operating Expenditures (from Line 14)	- 0 -	\$ 360.50
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))	\$1,148.56	\$265,347.20
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$ 758.32	
9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D)	- 0 -	
10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D) *	\$28,580.76	

\* Does not include \$10,000 debt guarantee by candidate  
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-523-4088

**Thomas B. Kenworthy**  
Type or Print Name of Treasurer

*Thomas B. Kenworthy*  
SIGNATURE OF TREASURER

*May 4, 1983*  
Date

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

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

**DETAILED SUMMARY PAGE  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)**

Name of Committee (in Full)  
**Michael Marino For U.S. Congress Committee**

Report Covering the Period:  
From: **11/23/82** To: **12/31/82**

**I. RECEIPTS**

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees (Memo Entry Unitized \$ _____ )	\$ 550.00	\$210,090.91	11 (a)
(b) Political Party Committees	\$2,500.00	\$ 29,525.00	11 (b)
(c) Other Political Committees	- 0 -	\$ 26,150.00	11 (c)
(d) The Candidate	- 0 -	- 0 -	11 (d)
(e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d))	\$3,050.00	\$265,765.91	11 (e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	- 0 -	- 0 -	12
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate	- 0 -	\$ 10,000.00	13 (a)
(b) All Other Loans	- 0 -	\$ 2,550.00	13 (b)
(c) TOTAL LOANS (add 13 (a) and 13 (b))	- 0 -	\$ 12,550.00	13 (c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	- 0 -	\$ 360.50	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	- 0 -	\$ 389.61	15
<b>16. TOTAL RECEIPTS (add 11 (a), 12, 13 (c), 14 and 15)</b>	\$3,050.00	\$279,066.02	16

**II. DISBURSEMENTS**

<b>17. OPERATING EXPENDITURES</b>	\$1,148.56	\$265,707.70	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	- 0 -	- 0 -	18
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate	- 0 -	- 0 -	19 (a)
(b) Of All Other Loans	- 0 -	- 0 -	19 (b)
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b))	- 0 -	- 0 -	19 (c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees	- 0 -	\$ 100.00	20 (a)
(b) Political Party Committees	\$2,500.00	\$ 2,500.00	20 (b)
(c) Other Political Committees	- 0 -	- 0 -	20 (c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))	\$2,500.00	\$ 2,600.00	20 (d)
<b>21. OTHER DISBURSEMENTS</b>	- 0 -	- 0 -	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)</b>	\$3,648.56	\$268,307.70	22

**III. CASH SUMMARY**

<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$ 1,356.88	23
<b>24. TOTAL RECEIPTS THIS PERIOD (From Line 16)</b>	\$ 3,050.00	24
<b>25. SUBTOTAL (Add Line 23 and Line 24)</b>	\$ 4,406.88	25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)</b>	\$ 3,648.56	26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)</b>	\$ 758.32	27

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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) Michael Marino For U.S. Congress Committee			
A. Full Name, Mailing Address and ZIP Code ROBERTA Bell 1226 Rock Creek Rd Gladwyne, PA 19035	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period \$ 250.00
	Occupation Homemaker	11/25/92	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 250.00		
B. Full Name, Mailing Address and ZIP Code W. James MacIntosh 641 Black Rock Road Bryn Mawr, PA 19010	Name of Employer Morgan, Lewis & Bockius 2100 The Fidelity Building Philadelphia, PA 19109	Date (month, day, year)	Amount of Each Receipt This Period \$ 200.00
	Occupation Attorney	11/23/92	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 200.00		
C. Full Name, Mailing Address and ZIP Code GORDON MCGOURN Candell Plaza Camden New Jersey 08101	Name of Employer Campbell's Soup Co. Campbell Plaza Camden, N.J. 08101	Date (month, day, year)	Amount of Each Receipt This Period \$ 200.00
	Occupation Chief Executive Officer	12/28/92	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$ 600.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
SUBTOTAL of Receipts This Page (optional) .....			\$ 550.00
TOTAL This Period (last page this line number only) .....			\$ 550.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Any information copied from such Reports or 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 committees.

Name of Committee (in Full)  
Michael Marini for U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code <u>Republican State Committee of Pennsylvania</u>		Name of Employer  Occupation  Aggregate Year-to-Date—\$ <u>\$2500.00</u>	Date (month, day, year) <u>12/13/82</u>	Amount of Each Receipt This Period <u>\$2500.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):				
B. Full Name, Mailing Address and ZIP Code		Name of Employer  Occupation  Aggregate Year-to-Date—\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
C. Full Name, Mailing Address and ZIP Code		Name of Employer  Occupation  Aggregate Year-to-Date—\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
D. Full Name, Mailing Address and ZIP Code		Name of Employer  Occupation  Aggregate Year-to-Date—\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
E. Full Name, Mailing Address and ZIP Code		Name of Employer  Occupation  Aggregate Year-to-Date—\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
F. Full Name, Mailing Address and ZIP Code		Name of Employer  Occupation  Aggregate Year-to-Date—\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
G. Full Name, Mailing Address and ZIP Code		Name of Employer  Occupation  Aggregate Year-to-Date—\$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
SUBTOTAL of Receipts This Page (optional)				
TOTAL This Period (last page this line number only)				

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

Michael Morino for U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
Bell of Pennsylvania 22 E. Baltimore Ave. Lansdowne, PA 19050	Telephone service	12/3/82	\$ 938.56
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster of Philadelphia 304 Strat Station Phila, PA	Stamps	12/17/82	\$ 210.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) ..... \$ 1148.56

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

Michael Marino For U.S. Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Republican County Committee of Montgomery County 625 Seward Street Norristown, PA 19401	Refund of Contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/3/82	\$2500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional) .....			
TOTAL This Period (last page this line number only) .....			\$2500.00

230404316

Name of Committee (in Full) <u>Michael Marino For U.S. Congress Committee</u>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <u>Robert Goodman Agency</u> <u>See Schedule D</u>	Original Amount of Loan <u>Election of credit in the ordinary course of business</u>	Cumulative Payment To Date <u>-0-</u>	Balance Outstanding at Close of This Period <u>\$10,000.00</u>
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>8/20/82</u> Date Due <u>1/1/83</u> Interest Rate <u>15</u> % (apr) <u>1/1/83</u> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code <u>Michael Marino</u> <u>1420 Snyder Ave</u> <u>Philadelphia, PA 19145</u>	Name of Employer		
	Occupation <u>Candidate</u>		
	Amount Guaranteed Outstanding: <u>\$10,000.00</u>		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: <u>\$</u>		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: <u>\$</u>		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
		Original Amount of Loan	Cumulative Payment To Date
			Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: <u>\$</u>		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: <u>\$</u>		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: <u>\$</u>		
SUBTOTALS This Period This Page (optional) .....			<u>\$10,000.00</u>
TOTALS This Period (last page in this line only) .....			<u>\$10,000.00</u>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

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Name of Committee (in Full) <u>Michael Marina For U.S. Congress Committee</u>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <u>Herbert Hahn 55 E. 86th Street N.Y., N.Y. 10028</u>	Original Amount of Loan <u>\$1000.00</u>	Cumulative Payment To Date <u>- 0 -</u>	Balance Outstanding at Close of This Period <u>\$1000.00</u>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>10/26/82</u> Date Due <u>Demanded</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source <u>MARINA HAHN</u>			
	Original Amount of Loan <u>\$750.00</u>	Cumulative Payment To Date <u>- 0 -</u>	Balance Outstanding at Close of This Period <u>\$750.00</u>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>10/26/82</u> Date Due <u>Demanded</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) .....			<u>\$1750.00</u>
TOTALS This Period (last page in this line only) .....			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

83040431614

Name of Committee (in Full) <u>Michael Marino For U.S. Congress Committee</u>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <u>Shawin Specter</u> <u>2400 Chestnut Street</u> <u>Philadelphia, PA</u>	Original Amount of Loan <u>\$800.00</u>	Cumulative Payment To Date <u>- 0 -</u>	Balance Outstanding at Close of This Period <u>\$800.00</u>
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>10/25/82</u> Date Due <u>December</u> Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
		Original Amount of Loan	Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) . . . . .			<u>\$800.00</u>
TOTALS This Period (last page in this line only) . . . . .			<u>\$2550.00</u>
Carry outstanding balances only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

63040431613

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Michael Macino For U.S. Congress Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Robert Goussman Agency Box 512 Brooklandville, Md 21022	\$15,603.26	-0-	-0-	\$15,603.26
Nature of Debt (Purpose): Advertising				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Packard Press Tenth & Spring Garden Streets Philadelphia, PA 19123	\$2916.54	-0-	-0-	\$2916.54
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Printers Place 1315 Walnut Street Philadelphia, PA 19107	\$2178.00	-0-	-0-	\$2178.00
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Dupli-Fax P.O. Box 680 Camden, N.J. 08101	\$235.95	-0-	-0-	\$235.95
Nature of Debt (Purpose): Printing & Supplies				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor IBM c/o Furst & Furst 225 W. 34th N.Y., New York	\$531.38	-0-	-0-	\$531.38
Nature of Debt (Purpose): Office Equipment				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor MCI Telecommunications c/o Marvin Shapiro P.O. Box F Lewittown, N.Y. 11756	\$330.84	-0-	-0-	\$330.84
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional) . . . . .				\$ 21,795.97
2) TOTAL This Period (last page this line only) . . . . .				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) . . . . .				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) . . . . .				

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Michael Marino For U.S. Congress Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Federal Express Corporation P.O. Box 727, Dept. A Memphis, TN 38194	\$401.50	-0-	-0-	\$401.50
Nature of Debt (Purpose): Messenger / Delivery service				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor CDI Temporary Services, Inc. S Penn Center Plaza, Suite 1001 Phila, PA 19103	\$136.00	-0-	-0-	\$136.00
Nature of Debt (Purpose): Secretarial Services				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Minuteman Press 6917 Ludlow St. Upper Darby, PA 19082	\$3359.52	-0-	-0-	\$3359.52
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor CBS Reproductions Old York Rd. Jenkintown, PA	\$256.50	-0-	-0-	\$256.50
Nature of Debt (Purpose): Graphics				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Dollar Rent A Car P.O. Box 287 Drexel Hill, PA 19026	\$81.47	-0-	-0-	\$81.47
Nature of Debt (Purpose): Car rental				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional) . . . . .				\$4234.79
2) TOTAL This Period (last page this line only) . . . . .				\$20,030.76
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) * Excludes Debt Guarantee . . . . .				\$12,550.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) . . . . .				\$129,580.76

Office of Records and Registration

Office of the Clerk

U.S. House of Representatives

Washington, D.C. 20515

Official Business

GENERAL COUNSEL

13 MAY 12 P 2: 26

*Benjamin F. Guthrie*  
CLERK, U.S. HOUSE OF REPRESENTATIVES

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Office of the Clerk  
House of Representatives  
U.S.A.  
Washington, D.C. 20515

Official Business

*Benjamin F. Guthrie*  
CLERK, U.S. HOUSE OF REPRESENTATIVES

Charles N. Steele, General Counsel  
Federal Election Commission

Office of Records and Registration

Office of the Clerk

U.S. House of Representatives

Washington, D.C. 20515

Official Business

*Benjamin J. Guthrie*  
CLERK, U.S. HOUSE OF REPRESENTATIVES

Office of the Clerk  
House of Representatives  
U.S.A.  
Washington, D.C. 20515

Official Business

*Benjamin J. Guthrie*  
CLERK, U.S. HOUSE OF REPRESENTATIVES

Peter Kell, Jr.  
Federal Election Commission

830404319

BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 ) MUR 1539  
Michael Marino for )  
U.S. Congress Committee )

CERTIFICATION

I, Marjorie W. Emmons, Secretary of the Federal Election Commission, do hereby certify that on May 12, 1983, the Commission approved by a vote of 5-0 the First General Counsel's Report dated May 9, 1983 in the above-captioned matter.

Commissioners Elliott, Harris, McDonald, McGarry and Reiche voted affirmatively in this matter; Commissioner Aikens did not cast a vote.

Attest:

5/17/83

Date

Marjorie W. Emmons

Marjorie W. Emmons  
Secretary of the Commission

Received in Office of the Commission Secretary:  
Circulated on 48 hour tally basis:

5- 9-83, 4:40  
5-10-83, 11:00

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FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

MEMORANDUM

TO: Office of the Commission Secretary

FROM: Office of General Counsel

DATE: May 9, 1983

SUBJECT: MUR 1539 - First GC Report

The attached is submitted as an Agenda document for the Commission Meeting of Open Session Closed Session

Table with 2 columns: CIRCULATIONS and DISTRIBUTION. Rows include 48 Hour Tally Vote, 24 Hour No Objection, Information, and Other, with checkboxes for Sensitive/Non-Sensitive and various distribution items like Compliance, Audit Matters, etc.

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**SENSITIVE**

**FEDERAL ELECTION COMMISSION**  
1325 K Street, N.W.  
Washington, D.C. 20463

RECEIVED  
OFFICE OF THE  
GENERAL SECRETARY

83 MAY 9 P 4: 40

**FIRST GENERAL COUNSEL'S REPORT**

**DATE AND TIME OF TRANSMITTAL**  
**BY OGC TO THE COMMISSION** MAY 9, 1983

**MUR #** 1539  
**DATE COMPLAINT RECEIVED**  
**BY OGC** 3/21/83  
**DATE OF NOTIFICATION TO**  
**RESPONDENT** 3/25/83 4/18/83  
**STAFF MEMBER** Marybeth Tarrant

**COMPLAINANT'S NAME:** Uriah Fields, Agent of the Active Bond and Collection Agency

**RESPONDENT'S NAME:** Michael Marino for U.S. Congress Committee

**RELEVANT STATUTE:** 2 U.S.C. § 434(a)(2)(A)

**INTERNAL REPORTS CHECKED:** Reports filed by Respondent

**FEDERAL AGENCIES CHECKED:** None

**SUMMARY OF ALLEGATIONS**

Complainant has alleged that the Respondent has failed to file the 30 Day Post General Election Report for 1982. In addition, he states that the Respondent has outstanding debts and, therefore, is not in a position to terminate. The complainant asks that the Respondent be required to report all debts and/or disclose the circumstances under which such debts have been extinguished. It is apparent from the complaint that the Active Bond and Collection Agency has been hired to collect a debt owed to Minute Man Press, however, reports filed by the Respondent do not show an outstanding debt to this company.

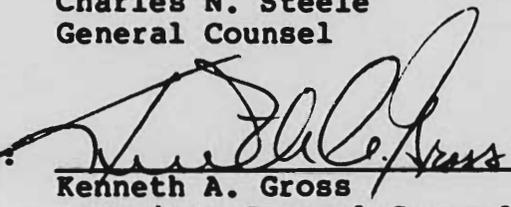
On March 25, 1983, a letter, enclosing a copy of the complaint, was sent to Thomas B. Kenworthy, treasurer of the

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committee. The letter was returned to this office on April 15, 1983. On April 18, 1983, the letter was resent to a new address. Accordingly, the committee has until May 9, 1983, to respond. Therefore, upon receipt of a response or expiration of the response period, the General Counsel will make a recommendation to the Commission.

May 6, 1983  
Date

Charles N. Steele  
General Counsel

By:   
Kenneth A. Gross  
Associate General Counsel

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FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

Official Business

Penalty for Private Use \$300



RECEIVED  
FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463  
To send after in state  
to my home to this service  
ICE

*[Handwritten signature]*

POSTAGE AND FEES PAID

~~UNCERTIFIED~~



Mr. Thomas B. Kenworthy, Treasurer  
Michael Marino for Congress Cate.  
1420 Snyder Avenue  
Philadelphia, PA 19145

~~UNCERTIFIED~~ CERTIFIED

993050

4404043

33040431625

1534

3/25

PS Form 3811, Dec. 1980

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● **SENDER:** Complete items 1, 2, 3, and 4.  
Add your address in the "RETURN TO" space on reverse.

**(CONSULT POSTMASTER FOR FEES)**

1. The following service is requested (check one).

Show to whom and date delivered .....

Show to whom, date, and address of delivery..

2.  **RESTRICTED DELIVERY**  
(The restricted delivery fee is charged in addition to the return receipt fee.)

**TOTAL \$** \_\_\_\_\_

3. **ARTICLE ADDRESSED TO:**  
Thomas Kenworthy  
Philadelphia, PA

4. **TYPE OF SERVICE:**  REGISTERED  INSURED  CERTIFIED  COD  EXPRESS MAIL

**ARTICLE NUMBER**  
943050

(Always obtain signature of addressee or agent)

I have received the article described above.

**SIGNATURE**  Addressee  Authorized agent

5. **DATE OF DELIVERY**

6. **ADDRESSEE'S ADDRESS** (Only if requested)

7. **UNABLE TO DELIVER BECAUSE:**  
UNCLAIMED

7. **DISPOSER'S INITIALS**  
MKL



FEDERAL ELECTION COMMISSION  
WASHINGTON, DC 20463

TO: *File*

DATE: *4/18/83*

FROM: *MP*

- |                                                                   |                                                     |                                           |
|-------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> APPROVAL                                 | <input type="checkbox"/> IMMEDIATE ACTION           | <input type="checkbox"/> RECOMMENDATION   |
| <input type="checkbox"/> AS REQUESTED                             | <input type="checkbox"/> INITIALS                   | <input type="checkbox"/> SEE ME           |
| <input type="checkbox"/> CONCURRENCE                              | <input type="checkbox"/> NECESSARY ACTION           | <input type="checkbox"/> SIGNATURE        |
| <input type="checkbox"/> CORRECTION                               | <input type="checkbox"/> NOTE AND RETURN            | <input type="checkbox"/> YOUR COMMENT     |
| <input type="checkbox"/> FILING                                   | <input type="checkbox"/> PER OUR CONVERSATION       | <input type="checkbox"/> YOUR INFORMATION |
| <input type="checkbox"/> FULL REPORT                              | <input type="checkbox"/> PER TELEPHONE CONVERSATION | <input type="checkbox"/>                  |
| <input type="checkbox"/> HANDLE DIRECT                            |                                                     |                                           |
| <input type="checkbox"/> ANSWER OR ACKNOWLEDGE ON OR BEFORE _____ |                                                     |                                           |
| <input type="checkbox"/> PREPARE REPLY FOR THE SIGNATURE OF _____ |                                                     |                                           |

REMARKS:

*Remailed 4/18/83 to -  
123 South Broad Street  
Philadelphia, PA 19109*

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MUR #

1539

DATE

3/23/63

PLEASE PROVIDE THE NAMES AND ADDRESSES OF ALL RESPONDENTS WHICH ARE TO BE SENT A COPY OF THE COMPLAINT. IF A PRINCIPAL CAMPAIGN COMMITTEE IS A RESPONDENT, A CARBON COPY IS TO BE SENT TO THE CANDIDATE. PLEASE PROVIDE THE NAME AND ADDRESS OF THE CANDIDATE AND PUT A "CC" BESIDE THE CANDIDATE'S NAME. IF A CANDIDATE IS A RESPONDENT, A CARBON COPY IS TO BE SENT TO THE CANDIDATE'S PRINCIPAL CAMPAIGN COMMITTEE. PLEASE PROVIDE THE NAME AND ADDRESS OF THE PRINCIPAL CAMPAIGN COMMITTEE AND PUT A "CC" BESIDE THE COMMITTEE'S NAME. PLEASE PROVIDE THIS INFORMATION, ON THIS SHEET, WITHIN 24 HOURS OF RECEIPT OF THIS NOTICE. THANK YOU.

304043167  
Thomas B. Kenworthy, Treasurer  
1420 Snyder Avenue  
Philadelphia, PA 19145  
Michael Marino for U.S. Congress Committee

CC

Michael Marino  
1420 Snyder Avenue  
Philadelphia, PA 19145



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

March 25, 1983

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Mr. Thomas B. Kenworthy, Treasurer  
Michael Marino for U.S. Congress Committee  
1420 Snyder Avenue  
Philadelphia, PA 19145

Re: MUR 1539

Dear Mr. Kenworthy:

This letter is to notify you that on March 21, 1983, the Federal Election Commission received a complaint which alleges that your committee may have violated certain sections of the Federal Election Campaign Act of 1971, as amended ("the Act"). A copy of the complaint is enclosed. We have numbered this matter MUR 1539. Please refer to this number in all future correspondence.

Under the Act, you have the opportunity to demonstrate, in writing, that no action should be taken against your committee in connection with this matter. Your response must be submitted within 15 days of receipt of this letter. If no response is received within 15 days, the Commission may take further action based on the available information.

Please submit any factual or legal materials which you believe are relevant to the Commission's analysis of this matter. Where appropriate, statements should be submitted under oath.

This matter will remain confidential in accordance with 2 U.S.C. § 437g(a)(4)(B) and § 437g(a)(12)(A) unless you notify the Commission in writing that you wish the matter to be made public.

If you intend to be represented by counsel in this matter please advise the Commission by completing the enclosed form stating the name, address and telephone number of such counsel, and a statement authorizing such counsel to receive any notifications and other communications from the Commission.

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If you have any questions, please contact Marybeth Tarrant, the staff member assigned to this matter at (202) 523-4529. For your information, we have attached a brief description of the Commission's procedure for handling complaints.

Sincerely,

Charles N. Steele  
General Counsel



By Kenneth A. Gross  
Associate General Counsel

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Enclosures

- 1. Complaint
- 2. Procedures
- 3. Designation of Counsel Statement

cc: Michael Marino

159

1983

GENERAL COUNSEL'S OFFICE

ARTICLE ADDRESS TO  
Thomas H. Tarrant  
Philadelphia, PA 19109

DATE OF RECEIPT  
APRIL 20, 1983

ARTICLE NUMBER  
E01Ehb

7. UNABLE TO DELIVER REASON:



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

March 25, 1983

Mr. Uriah Fields  
Active Bond and Collection Agency  
P.O. Box 304  
Darby, PA 19023

Dear Mr. Fields:

This letter is to acknowledge receipt of your complaint which we received on March 21, 1983, against Michael Marino for U.S. Congress Committee which alleges violations of the Federal Election Campaign laws. A staff member has been assigned to analyze your allegations. The respondents will be notified of this complaint within five days.

You will be notified as soon as the Commission takes final action on your complaint. Should you have or receive any additional information in this matter, please forward it to this office. We suggest that this information be sworn to in the same manner as your original complaint. For your information, we have attached a brief description of the Commission's procedure for handling complaints. If you have any questions, please contact Steven Barndollar at (202) 523-4073.

Sincerely,

Charles N. Steele  
General Counsel

By Kenneth A. Gross  
Associate General Counsel

Enclosure

83040431630

COMPLAINANT

Uriah Fields/Agent - Active Bond and Collection Agency  
P.O. Box 304, Darby, PA 19023

RESPONDENTS

Michael Marino for U.S. Congress Committee ("Michael Marino/U.S. Congress Committee") is an unincorporated non-profit association organized as a political committee within the meaning of the Federal Election Campaign Act of 1971, as amended. 2 U.S.C. §431(4). The Michael Marino/U.S. Congress Committee is the principal campaign committee of Michael Marino as a candidate for the Republican nomination for U.S. Congress. The committee registered with the Federal Election Commission on October 25, 1982. At all times pertinent to this complaint, the committee maintained its headquarters at 1420 Snyder Ave., Philadelphia, Pennsylvania 19145.

Thomas B Kenworthy assumed the duties of treasurer of the committee in October of 1982 and still serves in that capacity. To the best of my knowledge he is an attorney with the law firm of Morgan, Lewis and Bockius, 123 South Broad Street, Philadelphia, Pennsylvania. In written correspondence dated December 13, 1982, Louis E. Pasamanick, 313 South 41st Street, an avared agent for Michael Marino, U.S. Congress Committee, has stated that Mr. Kenworthy is an employee of this firm.

COMPLAINT

The respondent Thomas B. Kenworthy, Treasurer, Michael Marino/U.S. Congress Committee failed to file a 30 day post general election report either with the Federal Election Commission in Washington D.C. or with the Office of the Clerk of

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the House of Representatives. Phone calls to both government agencies confirmed the above averment on February 8, 1983. Failure to file a 30 day post general election report is not in keeping with the Federal Elections Campaign Act of 1971, as amended. 2 U.S.C. 434(a)(2) §104.5(a)(1)(ii). It is a further averment that the Marino for Congress Committee has outstanding obligations and as such cannot terminate. 2 U.S.C. 433(d)(1). 2 U.S.C. 433(b),(c) §102.3(a). (see attached, overdue bills from Minuteman Press)

Therefore, Complainant asks that the Federal Elections Commission act to compel the Michael Marino/U.S. Congress Committee to comply with the law as set forth. Further it is asked that the said committee be compelled to disclose outstanding debts and obligations continuously until extinguished. Additionally, Complainant asks that the Michael Marino/U.S. Congress Committee be compelled to disclose the circumstances and conditions under which the debts or obligations were extinguished and the amounts paid. 11 CFR 104.3(d), 11 CFR 104.11(a)

83040431632

*Elizabeth Ann Ricks*  
 ELIZABETH ANN RICKS  
 833 Springfield Road, Darby, Pa. 19023

FEB 10 1983

*Uriah Fields*  
 \_\_\_\_\_  
 Uriah Fields  
 pro se

Notary Public, Darby Borough, Delaware Co.  
 My Commission Expires January 24th, 1987

I, Uriah Fields, do swear that the contents of this complaint are true to the best of my knowledge.

Uriah Fields

Uriah Fields

Elizabeth A. Ricks

Witness

ELIZABETH ANN RICKS  
933 Springfield Road, Darby, Pa. 19023

MAR 14 1983

Notary Public, Darby Borough, Delaware Co.  
My Commission Expires January 24th, 1987

33040431610

I, Uriah Fields, do swear that the contents of this complaint are true to the best of my knowledge.

Uriah Fields

Uriah Fields

Elizabeth Ann Ricks

Witness

ELIZABETH ANN RICKS  
933 Springfield Road, Darby, Pa. 19023

MAR 14 1993

Notary Public, Darby Borough, Delaware Co.  
My Commission Expires January 24th, 1987

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RECORDED & INDEXED

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FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

February 22, 1983

Uriah Fields  
Active Bond and Collection Agency  
P.O. BOX 304  
Darby, PA 19023

Dear Mr. Fields:

This is to acknowledge receipt of your letter of February 10, 1983. Your letter contained a notarization of your signature but was not properly sworn to.

You must swear before the notary that the contents of your complaint are true to the best of your knowledge and the notary must represent as part of the jurat that such swearing occurred. A statement by the notary that the complaint was sworn to and subscribed before him will be sufficient. We are sorry for the inconvenience that these requirements may cause you, but we are not statutorily empowered to proceed with the handling of a compliance action unless all the statutory requirements are fulfilled. See 2 U.S.C. §437g.

If you have any questions concerning this matter, please feel free to contact me at (202) 523-4175 or Steven Barndollar at (202) 523-4073.

Sincerely,

Charles N. Steele  
General Counsel

A handwritten signature in cursive script, appearing to read "Kenneth A. Gross", is written over the typed name of the Associate General Counsel.

By Kenneth A. Gross  
Associate General Counsel

6304043155



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

February 22, 1983

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Active Bond and Collection Agency  
P.O. BOX 304  
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Sincerely,

Charles N. Steele  
General Counsel

A handwritten signature in cursive script, appearing to read "Kenneth A. Gross", is written over the typed name of the Associate General Counsel.

By Kenneth A. Gross  
Associate General Counsel

83040431635

304  
A 19023

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Federal Election Commission  
Washington DC. 20463  
ATTN: Charles D. Steele  
General Counsel



83 MAR 21 9:19

POST OFFICE



FEDERAL ELECTION COMMISSION

1325 K STREET N.W.  
WASHINGTON, D.C. 20463

THIS IS THE BEGINNING OF MUR # 1539

Date Filmed 8/24/83 Camera No. --- 7

Cameraman JRL

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