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### Contact Information

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Smithfield, RI  
02917

### Reported Compensation

Date	Type	Value	Paid By
No Compensation reported.			

### Reported Expenditures

Date	Amount	Beneficiary	Paid To	Reason	On Behalf Of
No Expenditures reported.					

### Reported Contributions

Date	Amount	Paid To	Beneficiary	Office	Contribution Type
Jun 30, 2025	\$250.00		Committee to Elect Val Lawson		Monetary

### Reported Anything of Value

Date	Type	Value	Paid To	Beneficiary	Office	Location
No Anything Of Value reported.						

### Reported Subjects

Health Care Plans/Services,Health Insurance,Insurance,Medical

PETER MARINO on behalf of NEIGHBORHOOD HEALTH PLAN OF RHODE ISLAND

### Reported Bills

No bills reported.

### **Reported Public Bodies**

No public bodies reported.

### **Reported Executive Officials**

No executive officials reported.