

CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER	REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>			
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Nancy Quinn Marsden</i>							
STREET ADDRESS <i>416 Bannockburn Ave</i>							
CITY <i>Amblerville</i>		STATE <i>PA</i>	ZIP CODE <i>19007</i>				
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/> 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE <i>Prothonotary</i>		DISTRICT NO. <i>46</i>	PARTY <i>Rep</i>	DATE OF ELECTION		
			MO. DAY YEAR <i>01 01 19</i>	TO	MO. DAY YEAR <i>5 6 19</i>	MO.	DAY YEAR
			CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i>		FOR OFFICE USE ONLY RECEIVED 2019 MAY -9 PM 4: 18 OFFICE OF VOTER SERVICES MONTG. CO. PA		
			TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>				
			AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
			TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR COMMONWEALTH OF PENNSYLVANIA AS PRESIDENT OF THE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

James Courtland Saring, Notary Public
 Sworn to and subscribed before me this 1st day of May, 2019
 My Commission Expires 3 27 2021
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Nancy Q. Marsden
 SIGNATURE OF PERSON SUBMITTING REPORT
 PRINTED NAME
Nancy Q. Marsden
 AREA CODE 215 DAYTIME TELEPHONE NUMBER 850-3254

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ 20____

 SIGNATURE OF CANDIDATE
 PRINTED NAME _____
 AREA CODE _____ DAYTIME TELEPHONE NUMBER _____

 SIGNATURE
 MY COMMISSION EXPIRES _____ MO. DAY YR.
 MO. DAY YR.