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2014 APR 29 PM 4:16 COMMONWEALTH OF PENNSYLVANIA

OFFICE OF THE GOVERNOR

HARRISBURG

SENATE OF PA  
SECRETARY'S OFFICE

THE GOVERNOR

MEMBER OF THE STATE BOARD OF OPTOMETRY

April 29, 2014

To the Honorable, the Senate  
of the Commonwealth of Pennsylvania:

In conformity with law, I have the honor hereby to nominate for the advice and consent of the Senate, Marla J. Wasson, (Public Member), PO Box 331, Lewisberry 17339, York County, Thirty-first Senatorial District, for appointment as a member of the State Board of Optometry, to serve for a term of four years or until her successor is appointed and qualified, but not longer than six months beyond that period, vice Susan Murray, Glenmoore, whose term expired.

A handwritten signature in black ink that reads "Tom Corbett".

TOM CORBETT  
Governor

# STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
W A S S O N M A R L A J

02 ADDRESS (work or home) City State Zip Code Area Code Phone  
PO Box 331 Lewisberry PA 17339 (717) 943 8530

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)

A  Candidate (including write-in) C  Public Official (Current) D  Public Employee (Current) E  Check this block if you are filing as a solicitor  Check this block if you are amending an original filing

B  Nominee C  Public Official (Former) D  Public Employee (Former)

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.)  seeking  hold  held

A MEMBER  seeking  hold  held

B

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A STATE BOARD OF OPTOMETRY

B

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR The information in blocks 8 through 15 below represents financial interests for the PRIOR calendar year indicated:

Accountant / Business manager 2013

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box.

NONE

09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box.

Name: None Address: Interest Rate

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block.

Name: See attached Address: (OFFICIAL USE ONLY) 2014 MAY 13 PM 4:08

11 GIFTS (See instructions on page 2) If NONE, check this box.

Source of Gift Value of Gift

Address of Source of Gift Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box.

Source (Name and Address) Value

13 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box.

Business Entity (Name and Address) Position Held

1 National Abrasive Sales, Inc Po Box 331, Lewisberry PA 17339 Acct/Business Manager

2 Name: Baughman Memorial United Methodist Church, 228 Bridge St, New Cumberland PA 17370 Treasurer

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box.

Name and Address of Business Interest Held

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box.

Business (Name and Address) Interest Held Relationship Date Transferred

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §4904 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature Mark J Wasson Enter Current Date 05/02/2014

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

Statement of Financial Interests

Year: 2013

Marla J. Wasson

Line 10: Direct or Indirect Sources of Income

National Abrasive Sales, Inc.

PO Box 331

Lewisberry, PA 17339

Baughman Memorial United Methodist Church

228 Bridge Street

New Cumberland, PA 17070

Integrity Bank

3345 Market Street

Camp Hill, PA 17011

Janney Montgomery Scott

1717 Arch Street

Philadelphia, PA 19103-1675

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STATE ETHICS  
COMMISSION

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