

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per respons	se 0.5			

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person * Tormey Terrence O	2. Date of Event Statement (Mon 04/23/2004		·	3. Issuer Name and Ticker or Trading Symbol QUIGLEY CORP [QGLY]				
(Last) (First) (Middle) 4842 MOUNTAIN TOP ROAD WEST	04/23/2004		4. Relationship of Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) NEW HOPE, PA 18938		(Chec _X_Director _Officer (give to below)			cify Applicable I _X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock, \$.0005 par value per share		0		D				
unless the form dis	nd to the collecti plays a currently	on of info valid OM	ormation contained in t		·			
2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Tit	tle and Amount of rities Underlying Derivativ rity	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Expira Exercisable Date	tion Title	Amount or Number of Shares	Security	(D) or Indirect (I) (Instr. 5)			
Reporting Owners	·							

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Tormey Terrence O 4842 MOUNTAIN TOP ROAD WEST NEW HOPE, PA 18938	X				

Signatures

/s/ Tormey, Terrence O.	04/23/2004
**Signature of Reporting Person	Date

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.