

COMMONWEALTH OF PENNSYLVANIA
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.

FILE IDENTIFICATION NUMBER	REPORT FILED ON BEHALF OF	CANDIDATE	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>
NAME OF POLITICAL COMMITTEE, CANDIDATE OR LOBBYIST NANCY J. BECKER							
STREET ADDRESS 1798 MEADOW GLEN DRIVE							
CITY LANSDALE		STATE PA		ZIP CODE 19446 - 4743			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY		
	RECORDER OF DEBTS				REP		
DATE OF ELECTION		FOR OFFICE (USE ONLY)					
MO DAY YEAR		11 02 2010					
5TH TUESDAY PRE-PRIMARY	1	DATES OF REPORTING PERIOD		MO DAY YEAR		MO DAY YEAR	
2ND FRIDAY PRE-PRIMARY	2	11 22 2010 TO		12 31 2010			
30 DAY POST-PRIMARY	3	CASH BALANCE AT END OF REPORTING PERIOD: \$ -0- TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ -0-					
5TH TUESDAY PRE-ELECTION	4						
2ND FRIDAY PRE-ELECTION	5						
30 DAY POST-ELECTION	6						
ANNUAL REPORT	7 <input checked="" type="checkbox"/>						
AMENDMENT REPORT?		YES		NO	<input checked="" type="checkbox"/>		
TERMINATION REPORT?		YES		NO	<input checked="" type="checkbox"/>		

RECEIVED
 2011 JAN 12 P 3:19
 NOTARY SERVICES
 MONTG. CO. PA.

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

SWORN TO AND SUBSCRIBED BEFORE ME THIS
12th DAY OF **JAN** 20 **11**

Eileen E. Stagliano SIGNATURE OF FILER SUBMITTING REPORT
Nancy J. Becker PRINTED NAME

MY COMMISSION EXPIRES: **6 3 2011** MO. DAY YR. AREA CODE **215** DAYTIME TELEPHONE NUMBER **278-3055**

NOTARIAL SEAL

PART II -

If statement is filed on behalf of a Candidate, the Candidate must sign here.

EILEEN E. STAGLIANO, Notary Public
 Norristown, Montgomery Co., PA
 My Commission Expires **June 3, 2011**

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE FILER HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1933, No. 329) AS AMENDED.

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

 SIGNATURE

MY COMMISSION EXPIRES _____ MO. DAY YR. AREA CODE _____ DAYTIME TELEPHONE NUMBER _____

 SIGNATURE OF CANDIDATE

 PRINTED NAME