

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.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE	<input checked="" type="checkbox"/> COMMITTEE	<input type="checkbox"/> LOBBYIST	
NAME OF FILING 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 RECORDER OF DEEDS		DISTRICT NO.	PARTY	DATE OF ELECTION	
					MO.	DAY YEAR
6TH TUESDAY PRE-PRIMARY	1.				05	21 2013
2ND FRIDAY PRE-PRIMARY	2.					
30 DAY POST-PRIMARY	3. <input checked="" type="checkbox"/>					
6TH TUESDAY PRE-ELECTION	4.					
2ND FRIDAY PRE-ELECTION	5.					
30 DAY POST-ELECTION	6.					
ANNUAL REPORT	7.					

DATES OF REPORTING PERIOD		MO. DAY YEAR		MO. DAY YEAR	
		05 06 2013		06 10 2013	

CASH BALANCE AT END OF REPORTING PERIOD:		\$	- 0 -
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$	- 0 -

AMENDMENT REPORT?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
TERMINATION REPORT?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>

FOR OFFICE USE ONLY	
RECEIVED	2013 JUN 18 P 2:21
OFFICE OF VOTER 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
18 DAY OF **June**, **2013**
Ernest E. Staglione SIGNATURE
 MY COMMISSION EXPIRES **6 3 2015**
 MO. DAY YR.

Nancy J. Becker SIGNATURE OF PERSON SUBMITTING REPORT
NANCY J. BECKER PRINTED NAME
610 AREA CODE **278-3055** DAYTIME TELEPHONE NUMBER

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 I HAVE 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
 MY COMMISSION EXPIRES _____ MO. DAY YR.

NOTARIAL SEAL
ERNEST E. STAGLIONE, Notary Public
Norristown, Montgomery Co., PA
My Commission Expires June 3, 2015

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE DAYTIME TELEPHONE NUMBER