

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 <input type="checkbox"/>		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>NANCY J. BECKER</i>							
STREET ADDRESS <i>1798 MEADOW GLEN DRIVE</i>							
CITY <i>LANSDALE</i>		STATE <i>PA</i>	ZIP CODE <i>19446 - 4743</i>				
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION <input checked="" type="checkbox"/> 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY <i>REP</i>	DATE OF ELECTION		
					MO. <i>11</i>	DAY <i>03</i>	YEAR <i>2015</i>
	DATES OF REPORTING PERIOD				FOR OFFICE USE ONLY		
	MO. <i>06</i>	DAY <i>08</i>	YEAR <i>2015</i>	TO	MO. <i>09</i>	DAY <i>14</i>	YEAR <i>2015</i>
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>-0-</i>						
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>-0-</i>						
	AMENDMENT REPORT?	YES	NO	YES	NO	YES	
	TERMINATION REPORT?	YES	NO	YES	NO	YES	

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 *18th* DAY OF *September* *2015*

Jeanne M Drake
 SIGNATURE
 MY COMMISSION EXPIRES *06 26* MO. DAY YR.

NOTARIAL SEAL
 Jeanne M Drake
 NOTARY PUBLIC
 Plymouth Twp, Montgomery County
 My Commission Expires 06/26/2017

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 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
 MY COMMISSION EXPIRES _____ MO. DAY YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE _____ DAYTIME TELEPHONE NUMBER _____