

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 <b>NANCY J. BECKER</b>																				
STREET ADDRESS <b>1798 MEADOW GLEN DRIVE</b>																				
CITY <b>LANSDALE</b>			STATE <b>PA</b>		ZIP CODE <b>19446-4743</b>															
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY <b>REP</b>		DATE OF ELECTION												
6TH TUESDAY PRE-PRIMARY 1. 2ND FRIDAY PRE-PRIMARY 2. 30 DAY POST-PRIMARY 3. 6TH TUESDAY PRE-ELECTION 4. 2ND FRIDAY PRE-ELECTION 5. <input checked="" type="checkbox"/> 30 DAY POST-ELECTION 6. ANNUAL REPORT 7.								MO. DAY YEAR <b>11 03 2015</b>												
		DATES OF REPORTING PERIOD <table border="1"> <tr> <td>MO.</td> <td>DAY</td> <td>YEAR</td> <td>TO</td> <td>MO.</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>09</td> <td>14</td> <td>2015</td> <td></td> <td>10</td> <td>19</td> <td>2015</td> </tr> </table>			MO.	DAY	YEAR	TO	MO.	DAY	YEAR	09	14	2015		10	19	2015	FOR OFFICE USE ONLY	
MO.	DAY	YEAR	TO	MO.	DAY	YEAR														
09	14	2015		10	19	2015														
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <b>- 0 -</b>																		
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <b>- 0 -</b>																		
		<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>			AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>								
AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>																	
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>																	

**AFFIDAVIT SECTION**

**PART I -**

If statement is filed on behalf of a Political Committee or Candidate'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 TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS **20th** DAY OF **OCTOBER** 20**15**

*Jeannie M Drake*  
 SIGNATURE  
 MY COMMISSION EXPIRES **06 26 17**  
 MO. DAY YR.

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

NOTARIAL SEAL  
 Jeannie M Drake  
 NOTARY PUBLIC  
 Plymouth Twp, Montgomery Co, PA  
 My Commission Expires 06/26/2017

**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 **20th** DAY OF **OCTOBER** 20**15**

*Jeannie M Drake*  
 SIGNATURE  
 MY COMMISSION EXPIRES **06 26 17**  
 MO. DAY YR.

\_\_\_\_\_  
 SIGNATURE OF CANDIDATE  
 \_\_\_\_\_  
 PRINTED NAME  
 \_\_\_\_\_  
 AREA CODE DAYTIME TELEPHONE NUMBER