

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 NANCY J. BECKER						
STREET ADDRESS 1798 MEADOW GLEN DRIVE						
CITY HAUSDALE	STATE PA	ZIP CODE 19446-				
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE STATE COMMITTEE RECORDER OF DEEDS	DISTRICT NO.	PARTY REP	DATE OF ELECTION		
				MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY				05	18	2010
2ND FRIDAY PRE-PRIMARY						
30 DAY POST-PRIMARY						
6TH TUESDAY PRE-ELECTION						
2ND FRIDAY PRE-ELECTION						
30 DAY POST-ELECTION						
ANNUAL REPORT						

DATES OF REPORTING PERIOD	MO.	DAY	YEAR	TO	MO.	DAY	YEAR
	05	03	2010		06	07	2010

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

FOR OFFICE USE ONLY

2010 JUN - 9 P 3:49

RECEIVED

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

9 DAY OF **JUNE** 20**10**

Eileen E. Stagliano SIGNATURE

MY COMMISSION EXPIRES **6 3 2011**

Nancy J. Becker SIGNATURE OF PERSON SUBMITTING REPORT

NANCY J. BECKER PRINTED NAME

610 AREA CODE

278-3055 DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL

EILEEN E. STAGLIANO, Notary Public
 My Commission Expires **June 3, 2011**

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