

1.) CORPORATION NAME:

Becton, Dickinson and Company

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1429937**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	640,000,000
PREFER	5,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NJ

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 BECTON DR

CITY/ST/ZIP: FRANKLIN LAKES, NJ 07417

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	GARY M DEFAZIO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/CORP SEC		
ADDRESS:	1 BECTON DR		
CITY/ST/ZIP/CO:	FRANKLIN LAKES, NJ 07417		
NAME:	JOHN E. GALLAGHER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1 BECTON DR.		
CITY/ST/ZIP/CO:	FRANKLIN LAKES, NJ 07417		
NAME:	VINCENT A FORLENZA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	1 BECTON DR		
CITY/ST/ZIP/CO:	FRANKLIN LAKES, NJ 07417		
NAME:	Patricia A. Walesiewicz	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1 BECTON DRIVE, MC 110		
CITY/ST/ZIP/CO:	FRANKLIN LAKES, NJ 07417		
NAME:	Basil L. Anderson	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1 Becton Dr., MC 110		
CITY/ST/ZIP/CO:	Franklin Lakes, NJ 07417		
NAME:	Henry P. Becton, Jr.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1 Becton Dr., MC 110		
CITY/ST/ZIP/CO:	Franklin Lakes, NJ 07417		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Catherine M. Burzik DIRECTOR 1 Becton Dr., MC 110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Edward F. DeGraan DIRECTOR 1 Becton Dr., MC110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Claire M. Fraser DIRECTOR 1 Becton Dr., MC110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Christopher Jones DIRECTOR 1 Becton Dr., MC 110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Marshall O. Larsen DIRECTOR 1 Becton Dr., MC 110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Gary A. Mecklenberg DIRECTOR 1 Becton Dr., MC 110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	James F. Orr DIRECTOR 1 Becton Dr., MC 110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Willard J. Overlock, Jr. DIRECTOR 1 Becton Dr., MC 110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Claire Pomeroy DIRECTOR 1 Becton Dr., MC 110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Rebecca W. Rimmel DIRECTOR 1 Becton Dr., MC110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Bertram L. Scott DIRECTOR 1 Becton Dr., MC110 Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Alfred Sommer TITLE: DIRECTOR ADDRESS: 1 Becton Dr., MC110 CITY/ST/ZIP/CO: Franklin Lakes, NJ 07417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Gary M. Cohen TITLE: Exec VP ADDRESS: 1 Becton Dr., MC 110 CITY/ST/ZIP/CO: Franklin Lakes, NJ 07417	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: William A. Kozy TITLE: EVP and COO ADDRESS: 1 Becton Dr., MC 110 CITY/ST/ZIP/CO: Franklin Lakes, NJ 07417	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Christopher R. Reidy TITLE: CFO and EVP Adm ADDRESS: 1 Becton Dr., MC 110 CITY/ST/ZIP/CO: Franklin Lakes, NJ 07417	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ GARY M DEFAZIO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GARY M DEFAZIO, VP/CORP SEC PRINTED NAME AND CORPORATE TITLE	5/14/2014 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		