CAMPAIGN FINANCE REPORT

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Filer Identification Number:	V 201025	9	Report Filed By		CANDIDATE **	1.	COMMIT	ree 2'v	LOBB	YIST 3.
Name of Filing Committee, Candidate or Lobbyist: 1-RIBUDS OF NANCY J. BECKER										
Street Address: 1798 MEADOW GUEN DRIVE										
City: LAUSO	ALE				State:		Zip Code:	46	_	
TYPE OF REPORT	FIN TESOAY 1.	2NO FRIDA PRE-PRIMA	Sec. 2017 11 17 27 27 2	4.0	DAY ST PRIMARY	3.	AMENDME REPORT?		- E	IV.
	PRE ELECTION	2ND FBID/ PRE-ELECY			DAY ST ELECTION	6.	TERMINAT	ion ye		
(place X to the right of report type)	ANNUAL 7.	YEAR			NG METHOD CHECK ONE		PAPER		DISKE	112
Name of Office Sough	nt by Candidate:				ATE OF ELEC	TION	District	Office	Party	County
RECO	RDER OF D	etd5		<u>*</u>	0. DAY YE	ar O	Number	OTH	Code HEP UCTIONS	FOR CODES)
Summary of Rand Expenditur	eceipts 🛌	OP. BAY.	EAR	То	O. DAY	AR	∌ ∓C	i iii o aa (e)	USE O	
A. Amount Brought	t Forward From Last Rep	port		5 /7	650.	14	50) 1		Ū
B. Total Monetary	Contributions and Receip	ts (From Sch	edule I)	3	3000	0				
C. Total Funds Ava	ailable (Sum of Lines A	and B)		\$ 20	,950.	14)S =	- i	
D. Total Expenditu	res (From Schedule III)		- !	\$ /	7.35	,,	j Šá		>	
E. Ending Cash Bal	ance (Subtract Line D fr	om Line C)	:	\$ / 4	,215.	4		Ç	9 1	
· · · · · · · · · · · · · · · · · · ·	nd Contributions Received			\$	- O -		/	L O		,
G. Unpaid Debts ar	nd Obligations (From Sch	edule IV)	1	\$	-0-		V			
多以至 国际的基	sva Committee report	reasurer sign	AFFIDAVI here. If			ort, e	ndidate si	gn here.	i a produced	Theological
I swear (or affirm) the correct and complete	nat this report, including the	attached sched	dules, on pa	per or co	mputer diskerte,	y e 197	he best of	my knowle	dge and b	elief true,
Sworn to and subset	A last	2(10) _		// _	f Person Su	henitting R	enort.	
Guler	Signature C	glas	20	} ~	MICHAE	<u> </u>	J. Printed Name	3 eck	200	
My commission exp	MO. DAY	3 20 Y YR.	<u>//</u>	<u> </u>	2/5 Area Code	_		16-46 sytime Tele	phone Nun	nber
PARTE E TRANS	Call Carlot, St. 4 - Anne d	eta e Autocai	ed Com	aittea te	ndidate shall a	ign he	e - 1 156-1	eli San Galleria Al grace S		onuncui di Education alu
	hat to the best of my knowle		nigorpory	Go. p BAm	ittee has not vio			ns of the A	of June	3, 1937
Sworn to and subsc	ribed before me this		10)	1/010	را ماد	14	2		
8	CAFE	Alia-	~ <u>~</u>	! ≠	16 Jan	Sign	ndie 65 Car	ndidate		
Jullo	Signature _	y cour,	211	\ /	MNG	7 .	Printed Nar		>	
My commission exp	MO. DA	<i>ک</i> - د ۲ YR.	011	<u> </u>	Area Code		کن 0	ytime Tele	<u>ンクら</u> aphone Nur	5 mber
NOTARIAL SEAL EILEEN E. STAGLIANO, Notary Public Norristown, Montgoniery Compating State Bureau of Commissions, Elections and Legislation My Commission Expires Julie 3, 20 tipe Building Harrisburg, PA 17120-0029 (717) 787-5280										

PAGE 2 OF 5

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period	//			
FRIONDS OF NAVEY J BECKOR	From <u>09/13/2010</u> To <u>10/18/2016</u>				
	DATE	AMOUNT			
Full Name of Contributer DIAUE (MESSNER	09 79 XEAR 2010	\$ 50000			
Mailing Address	MO. DAY YEAR	<u> </u>			
380 MOYER KOAD		\$			
Soul Source Stage Zip Code (Plus 4)	MO. DAY YEAR	\$			
Employer Name	Occupation	1			
Employer Mailing Address/Principal Place of Business	ITEE 1054	RANCE AGONT			
Employer Maring Address/Frincipal Flace of Dusiness					
Full Nerge of Contributor DI DOMENICO	MO. DAY YEAR 09 17 200	\$ 1,000 00			
Mailing Address	MO. DAY YEAR	\$			
1231 TURNBURY LANE		3			
NORTH // A 155 PA 19454-	MO. DAY YEAR	\$			
Employer Name	Occupation	1.			
Employer Mailing Address/Principal Place of Business	117LE 12031	IRANCE 46OUT			
Employer warming Address/Frimcipal Frace of Business					
Full Name of Contributor	MO. DAY YEAR	\$ 300 N			
TEDMUND MULLIN	09 17 2010 MO. DAY YEAR				
375 MORRIS KD 12.0. BOX 1479		\$			
City LANSDALE Stare Zip Code (Plus 4)	MO. DAY YEAR	\$			
Employer Name	Occupation				
HAMBURG, KUBIN JULLIN + LIPKIN Employer Mailing Address Principal Place of Business,	HYTORNE	<u>Y</u>			
375 MORRIS KD; LANSOHT, A	19446				
Full Name of Contributor	MD. DAY YEAR	\$ 570000			
Meiling Address	09 17 200 MO. DAY YEAR	900			
874 1-ULTON AN		\$			
LANSDALE State Zip Code (Plus 4)	MO. DAY YEAR	\$			
Employer Name	Occupation /	1			
	TIME NUSC	IRANES AGONT			
Employer Mailing Address/Principal Place of Business	,				
Full Name of Contributor	MO DAY YEAR	e ~791 07			
JANINE KUSKI HUGAN	09 17 2010	\$ 5000			
735 GREGORY DR.	MO DAY YEAR	\$			
City HORSHAM PA 19044-	MO. YEAR	s			
Employer Name	Occupation //	101 10- 110-			
Employer Mailing Address/Principal Place of Business	TITLE NSI	ICANCE MECAS			
Cimpleyer Maring Address/Fitherpor Frace of Costness					
		PAGE TOTAL			

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

\$ 2,800 P

ALL OTHER CONTRIBUTIONS

PAGE 3 OF 5

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate		Reporting Period	
FRIOUSS OF MANCY	TBECKOR		2010 to 10/18/2010
/		DATE	AMOUNT
Full Name of Contributor TAM 65 Pull M	A	MO DAY YEAR	\$ 5000
Mailing Address	AU	109 /1 2010	* 500°
2 KRYSTA COURT		MO. DAY YEAR	\$
City / /	State Zip Code (Plus 4)	MO. DAY YEAR	
MOUNT LAURIST	NJ 02054-	AND THE CONTRACT OF THE CONTRA	\$
Employer Name	1 2 2 2 2 7	Occupation	3
Employer Mailing Address/Principal Place of Business	:		
Full Name of Contributor		MO. DAY YEAR	
Mailing Address			\$
		MO. DAY YEAR	\$
City			*
	State Zip Code (Plus 4)	MO. DAY YEAR	
Employer Name			\$
		Occupation	
Employer Mailing Address/Principal Place of Business		<u></u>	
Full Name of Contributor		MO. DAY YEAR	
		MO. DAY YEAR	\$
Mailing Address		MO. DAY YEAR	
			\$
City	State Zip Code (Plus 4)	MO. DAY YEAR	
	_		\$
Employer Name		Occupation	
Emolovo Milian Advance			
Employer Mailing Address/Principal Place of Business			
5.11 No. 10 No.			
Full Name of Contributor		MO. DAY YEAR	\$
Mailing Address			4
		MO. DAY YEAR	\$
City	State Zip Code (Plus 4)	MO DAY YEAR	
	_	TEAR W	\$
Employer Name	. t	Occupation	· · · · · · · · · · · · · · · · · · ·
Employer Mailing Address/Principal Place of Business		<u> </u>	
Full Name of Contributor		MO. DAY YEAR	
Mailing Address			\$
Mairing Address		MO DAY YEAR	\$
City	State Zip Code (Plus 4)		3
	- Lip Code (Fids 4)	MO. DAY YEAR	\$
Employer Name		Occupation	
Employer Mailing Address/Principal Place of Business		<u> </u>	
Enter Crand Tatal of Burn Burn			PAGE TOTAL (D
Enter Grand Total of Part D on Sche	dute I, Detailed Summan	/ Page, Section 3	PAGE TOTAL ID

DSEB-502 (7-99)

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pariod
FRIQUES OF MANCY J. BECKON	Reporting Period From 09/13/2010 To 19/18/2010
NORRISTOWN REPUBLICAN COMMITTEE	MO. DAY YEAR Amount 30, 10
205 W. WOODS 5F	Description of Expenditure
NORRISTOWN PA 19401-	FUNDRAISER
To Whom Paid UPPER MONT CO REPUBLICAN CLUB Mailing Address	MO. DAY YEAR Amount 50 10
1604 LLOYD LANE	Description of Expenditure
PENNSBURG State Zip Code (Plus 4)	FUNDRAISON
Mailing Address O REPUBLICAN WOMON'S LEADERSHIP	
1798 MEADOW GLEN DR	Description of Expenditure
LANSDALE State Zip Code (Plus 4) To Whord Paid	MOMBORSHIP JOBS + FUNDRALS
10 Wholly Paid	09 32 2010 \$ 1,000,000
314 E JOHNSON HIGHWAY "200	Description of Expenditure
MORRISTOWN PAID (Plus 4)	CHAIRMAN'S CUB DUES
TOM CORBETT FOR GOVERNOR Mailing Address	09 26 2010 \$ 50, W
1/2 SVATE STREET	Description of Expenditure
HARRISBURG PA 17/01 -	FUNDRAISON
COURT HOUSE HILL COUNCILOF ROP.WO.	MO. DAY YEAR Amount / 0.
City /) SANDY HILL KOAD	Description of Expenditure
PLYMONTH MOETING PA 19964-	DINNER MOETTNG
NEW MATURAY COUNCIL	MO. DAY YEAR Amount 5 00 \$ 35 00
314 E. JOHNSON ATGHWAY City 42 19 Code (Plus 4)	Description of Expenditure
NORRISTOWN PA 1940 -	DINNER MOETING
WHITPHIN TOWNSHIP RED. Com	MO. DAY YEAR Amount 500 00
City DE FLAUIS CIRCLE State Zip Code (Plus 4)	Description of Expenditure
BLUE BELL PA 19422	FUNDRA15CR
Enter Grand Total of Expenditures on Page 1, Report Cover Page	sge, Item D. \$ 1525.

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Re	porting	Period	/ /		
FRICKUS OF NANCY J. BECKER				From 09/13/2010 TO 10/18/2010				
	**		•					
To Whom Paid HATFIELD TOWNSHIP KEI Mailing Address	0 1	Post	Mo.	DAY	2010	Amount (O, TO		
Wailing Address	<i>P</i> , (217	Description	on of Expe		\$ 70'		
2/39 MILLER PLACE								
HATFIELD	State	Zip Code (Plus 4) 19440-	Fux	DORI	4158K	,)		
TO WHOM Paid MERIUN REP. C	ON	7	Мо. / U	12	2010	Amount 50 FO		
Mailing Address BOX 60932			Description	on of Exp	enditure -			
LING OF PRUSSIA	State	Zip Code (Plus 4) 9406-	FU	NDRA	715eTd	2		
HMORICANS OF TALIAN HER	RIT	165 Couver	мо. 70	01	2010	\$ 100 °7		
3769 MILL ROAD			Descripti	on of Exp	enditure			
COLLEGEVILLE	SIGN	zip Code (Plus 4) 19426-1324	60	OLF (Dun	UG SPONSOR		
To Whom Paid			MO. 3	DAY		Amount 700		
VERNFIELD ELEM. SCH.	1001		/ () Descripti	on of Exp	2000 enditure	\$ 30		
ČĺA.	5 4 - • -	7:- 0-d- (0) 41	ļ					
City TEZFORA	State	Zip Code (Pius 4) 8901 -						
To Whom Paid			MO.	DAY	YEAR	Amount \$		
Mailing Address			Descript	on of Exp	enditure			
City	State	Zip Code (Plus 4)						
To Whom Paid			MO.	DAY	YEAR	Amount		
Mailing Address			Descript	ion of Exp	enditure	\$		
City	State	Zip Code (Plus 4)	_					
,	31010	-						
To Whom Paid]	MO.	DAY	YEAR	Amount		
						\$		
Mailing Address			Descript	ion of Exp	o end iture			
City	State	Zip Code (Plus 4)						
To Whom Paid		1	MO.	DAY	YE AR	Amount \$		
Mailing Address	·		Descript	ion of Ex	penditure	.		
City	State	Zip Code (Plus 4)	1					
		-				_		
Enter Grand Total of Expenditures on Page	ge 1,	Report Cover F	Page, It	em D.		PAGE TOTAL 60 \$ 2/0		