

CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: 2010259	Report Filed By: CANDIDATE	1. CANDIDATE	2. COMMITTEE <input checked="" type="checkbox"/>	3. LOBBYIST
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF NANCY J. BECKER				
Street Address: 1798 MEADOW GLEN DRIVE				
City: LAUSDALD	State: PA	Zip Code: 19446 - 4743		
TYPE OF REPORT (place X to the right of report type)	1. <input type="checkbox"/> NO FRIDAY SUBSEQUENT	2. <input type="checkbox"/> 30 DAY POST PRIMARY	3. <input type="checkbox"/> ABANDONMENT REPORT?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	4. <input checked="" type="checkbox"/> NO FRIDAY PRE-ELECTION	5. <input type="checkbox"/> 30 DAY POST ELECTION	6. <input type="checkbox"/> TERMINATION REPORT?	YES <input type="checkbox"/> NO <input type="checkbox"/>
	7. <input type="checkbox"/> YEAR	FILING METHOD <input checked="" type="checkbox"/> CHECK ONE		<input type="checkbox"/> PAPER <input type="checkbox"/> DISKETTE
Name of Office Sought by Candidate: RECORDER OF DEEDS		DATE OF ELECTION		District Number
		MO. DAY YEAR		Office Code
		11 05 2013		074 REP
				Party Code
				County Code
				46
(SEE INSTRUCTIONS FOR CODES)				

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR
	06 10 2013		09 16 2013
A. Amount Brought Forward From Last Report	\$ 85 84.91		
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 5 00.00		
C. Total Funds Available (Sum of Lines A and B)	\$ 90 84.91		
D. Total Expenditures (From Schedule III)	\$ 3 79.95		
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 87 04.96		
F. Value of In-Kind Contributions Received (From Schedule II)	\$ - 0 -		
G. Unpaid Debts and Obligations (From Schedule IV)	\$ - 0 -		

FOR OFFICE USE ONLY

2013 SEP 19 PM 3:00

OFFICE OF VOTER SERVICES

MONTGOMERY CO. PA

AFFIDAVIT SECTION

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief correct and complete.

Sworn to and subscribed before me this 19 day of Sept 2013

Eileen E. Stagliano
Signature

My commission expires 6 3 2015
MO. DAY YR.

Michael J. Becker
Signature of Person Submitting Report

Michael J. Becker
Printed Name

896-4691
Daytime Telephone Number

NOTARIAL Seal Code
EILEEN E. STAGLIANO, Notary Public
Norristown, Montgomery Co., PA

My Commission Expires June 3, 2015
 EILEEN E. STAGLIANO, Notary Public
 Norristown, Montgomery Co., PA

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 19 day of Sept 2013

Eileen E. Stagliano
Signature

My commission expires 6 3 2015
MO. DAY YR.

Nancy J. Becker
Signature of Candidate

NANCY J. BECKER
Printed Name

610 278-3053
Area Code Daytime Telephone Number

NOTARIAL SEAL
EILEEN E. STAGLIANO, Notary Public
Norristown, Montgomery Co., PA
My Commission Expires June 3, 2015

State • Bureau of Commissions, Elections and Legislation
Building • Harrisburg, PA 17120-0029

NOTARIAL SEAL
EILEEN E. STAGLIANO, Notary Public
Norristown, Montgomery Co., PA
My Commission Expires June 3, 2015

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>FRIENDS OF NANCY J. BECKER</i>	Reporting Period From <i>06/10/2013</i> To <i>09/16/2013</i>
--	---

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	TOTAL for the Reporting Period	(1) \$ <i>- 0 -</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		\$
	TOTAL for the Reporting Period	(2) \$ <i>- 0 -</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$ <i>500⁰⁰</i>
	TOTAL for the Reporting Period	(3) \$ <i>500⁰⁰</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	TOTAL for the Reporting Period	(4) \$ <i>- 0 -</i>

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ <i>500⁰⁰</i>
--	----------------------------

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 FRIENDS OF NANCY J. BECKER	Reporting Period From 06/10/2013 To 09/16/2013
--	---

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
VILLAGE ABSTRACT MIKE GIAMARONE	06	27	2013	\$ 500 ⁰⁰
Mailing Address 2960 W. GERMAINTOWN PIKE	MO.	DAY	YEAR	\$
City NORRISTOWN	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19403-				
Employer Name VILLAGE ABSTRACT	Occupation TITLE COMPANY			
Employer Mailing Address/Principal Place of Business 2960 W. GERMAINTOWN PK., NORRISTOWN, PA 19403				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

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

PAGE TOTAL
\$ 500 ⁰⁰

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate: FRIENDS OF NANCY J. BECKER
Reporting Period: From 06/10/2013 To 09/16/2013

To Whom Paid	MO.	DAY	YEAR	Amount
MONTGOMERY COUNTY REP. WOMEN'S LEAGUE	06	20	2013	\$ 50.00
Mailing Address: 1798 MEADOW GLEN DRIVE	Description of Expenditure			
City: LAUSDAL	State: PA	Zip Code (Plus 4): 19446-		MEMBERSHIP DUES
To Whom Paid: MONT. CO. COUNCIL OF REPUBLICAN WOMEN	06	20	2013	\$ 30.00
Mailing Address: 2244 OAK TERRACE	Description of Expenditure			
City: LAUSDAL	State: PA	Zip Code (Plus 4): 19446-		DINNER MEETING
To Whom Paid: U.S. POST OFFICE	06	26	2013	\$ 46.00
Mailing Address: SUMNER TOWN PIKE	Description of Expenditure			
City: KULPSVILLE	State: PA	Zip Code (Plus 4): 19443		POSTAGE
To Whom Paid: JIM SAKING	08	01	2013	\$ 83.95
Mailing Address:	Description of Expenditure			
City: PLYMOUTH MEETING	State: PA	Zip Code (Plus 4): 19442-		WEBSITE
To Whom Paid: PAL	08	23	2013	\$ 50.00
Mailing Address: HARDING BLVD	Description of Expenditure			
City: NORRISTOWN	State: PA	Zip Code (Plus 4): 19401-		CONTRIBUTION
To Whom Paid: WORCESTER REPUBLICAN COM	09	04	2013	\$ 35.00
Mailing Address: BUSTARD RD	Description of Expenditure			
City: CEDARS	State: PA	Zip Code (Plus 4): -		FUNDRAISOR
To Whom Paid: COURT HOUSE HILL COUNCIL REP. WOMEN	09	11	2013	\$ 30.00
Mailing Address: 1033 GREENS WAY CIRCLE	Description of Expenditure			
City: COLLEGEVILLE	State: PA	Zip Code (Plus 4): 19426-		DINNER MEETING
To Whom Paid: UPPER MONT CO REP. COMMITTEE	09	15	2013	\$ 55.00
Mailing Address: P.O. BOX 24	Description of Expenditure			
City: RED HILL	State: PA	Zip Code (Plus 4): 18076-0024		FUNDRAISOR

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$ 379.95