

Commonwealth of Pennsylvania
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.		COMMITTEE 2. <input checked="" type="checkbox"/>		LOBBYIST 3.	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF NANCY J. BECKER							
Street Address: 1798 MEADOW GLEN DRIVE							
City: LAUSDPALE				State: PA		Zip Code: 19446 - 4743	
TYPE OF REPORT (place X to the right of report type)	1. PRE-PRIMARY	2. NO FRIDAY PRE-PRIMARY	3. NO DAY POST-PRIMARY	4. PRE-ELECTION	5. NO FRIDAY PRE-ELECTION	6. NO DAY POST-ELECTION	7. ANNUAL REPORT
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	YEAR			FINING METHOD OF CHECKS		PAPER	
Name of Office Sought by Candidate:				DATE OF ELECTION MO: DAY YEAR 11 05 2013		District Number	Office Code OTH
						Party Code REP	County Code 46
(SEE INSTRUCTIONS FOR CODES)							
Summary of Receipts and Expenditures from:		MO: DAY YEAR 09 16 2013		To		MO: DAY YEAR 10 21 2013	
A. Amount Brought Forward From Last Report		\$		8,704.96		OFFICE OF VOTER SERVICES 1801 N. 22ND ST. HARRISBURG, PA 17104 2013 OCT 22 AM 10:23	
B. Total Monetary Contributions and Receipts (From Schedule I)		\$		- 0 -			
C. Total Funds Available (Sum of Lines A and B)		\$		8,704.96			
D. Total Expenditures (From Schedule III)		\$		150.00			
E. Ending Cash Balance (Subtract Line D from Line C)		\$		8,554.96			
F. Value of In-Kind Contributions Received (From Schedule II)		\$		- 0 -			
G. Unpaid Debts and Obligations (From Schedule IV)		\$		- 0 -			

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 true, correct and complete.

Sworn to and subscribed before me this 22nd day of OCTOBER 2013

Signature: Jeanne M Drake

My commission expires 06 26 17

MO. DAY YR.

NOTARIAL SEAL
 Jeanne M Drake
 NOTARY PUBLIC
 Plymouth Twp, Montgomery County
 My Commission Expires 06/26/2017

Signature of Person Submitting Report: Michael J. Becker

Printed Name: MICHAEL J. BECKER

Area Code: 615 Daytime Telephone Number: 896-4691

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. 1933, No. 320) as amended.

Sworn to and subscribed before me this 22nd day of OCTOBER 2013

Signature: Jeanne M Drake

My commission expires 06 26 17

MO. DAY YR.

NOTARIAL SEAL
 Jeanne M Drake
 NOTARY PUBLIC
 Plymouth Twp, Montgomery County
 My Commission Expires 06/26/2017

Signature of Candidate: Nancy J. Becker

Printed Name: NANCY J. BECKER

Area Code: 610 Daytime Telephone Number: 278-3055

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate FRIENDS OF NANCY J. BECKER	Reporting Period From 09/16/2013 To 10/21/2013
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$ - 0 -

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)	\$ - 0 -

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$
TOTAL for the Reporting Period	(3)	\$ - 0 -

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

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.)	\$ - 0 -
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**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate FRIENDS OF NANCY J. BECKETZ	Reporting Period From 09/16/2013 To 10/21/2013
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				Amount
To Whom Paid MONTGOMERY COUNTY COUNCIL OF REPUBLICAN WOMEN	MO	DAY	YEAR	\$ 30.00
Description of Expenditure				
Mailing Address 2244 OAK TERRACE				
City LANSDALE	State PA	Zip Code (Plus 4) 19446-		
DINNER MEETING				
To Whom Paid MORNINGSTAR MINISTRIES	MO	DAY	YEAR	\$ 75.00
Description of Expenditure				
Mailing Address P.O. BOX 1383				
City LANSDALE	State PA	Zip Code (Plus 4) 19446-		
CONTRIBUTION				
To Whom Paid MONTGOMERY COUNTY YOUNG REPUBLICANS	MO	DAY	YEAR	\$ 45.00
Description of Expenditure				
Mailing Address 1223 NORTH TROOPER ROAD				
City EAGLEVILLE	State PA	Zip Code (Plus 4) 19403		
FUNDRAISER				
To Whom Paid				\$
Description of Expenditure				
Mailing Address				
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Description of Expenditure				
Mailing Address				
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Description of Expenditure				
Mailing Address				
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Description of Expenditure				
Mailing Address				
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 150.00