

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		3. LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF NANCY J. BECKER									
Street Address: 1798 MEADOW GLEN DRIVE									
City: HANSDALE					State: PA		Zip Code: 19446 - 4743		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	YES	NO
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. <input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT	7.	YEAR		FILING METHOD () CHECK ONE	<input checked="" type="checkbox"/>	PAPER		DISKETTE
Name of Office Sought by Candidate: RECORDER OF DEEDS					DATE OF ELECTION			District Number	Office Code
					MO.	DAY	YEAR		OTH
					11	03	2015		REP
									46
(SEE INSTRUCTIONS FOR CODES)									
Summary of Receipts and Expenditures from:			MO.	DAY	YEAR	To	MO.	DAY	YEAR
			10	19	2015		11	23	2015
A. Amount Brought Forward From Last Report					\$	25,208.54			
B. Total Monetary Contributions and Receipts (From Schedule I)					\$	7,150.00			
C. Total Funds Available (Sum of Lines A and B)					\$	32,358.54			
D. Total Expenditures (From Schedule III)					\$	26,496.10			
E. Ending Cash Balance (Subtract Line D from Line C)					\$	5,862.44			
F. Value of In-Kind Contributions Received (From Schedule II)					\$	19,829.40			
G. Unpaid Debts and Obligations (From Schedule IV)					\$	-0-			

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

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 24 day of NOV 2015

Eileen E. Stagliano
Signature

My commission expires 6 3 2019
MO. DAY YR.

Michael J. Becker
Signature of Person Submitting Report

Michael J. Becker
Printed Name

215-896-469
Daytime Telephone Number

NOTARIAL SEAL
EILEEN E. STAGLIANO, Notary Public
My Commission Expires June 3, 2019

PART II - If this is a report of a Candidate's Authorized Committee Member, 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 24th day of NOV 2015

Eileen E. Stagliano
Signature

My commission expires 6 3 2019
MO. DAY YR.

Nancy J. Becker
Signature of Candidate

Nancy J. Becker
Printed Name

610 278-3055
Area Code Daytime Telephone Number

NOTARIAL SEAL
EILEEN E. STAGLIANO, Notary Public
My Commission Expires June 3, 2019

NOTARIAL SEAL
EILEEN E. STAGLIANO, Notary Public
Norristown, Montgomery County, PA
My Commission Expires June 3, 2019

Department of State • Bureau of Commissions, Elections and Legislation
Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>FRIENDS OF NANCY J. BECKER</i>	Reporting Period From <i>10/19/2015</i> To <i>11/23/2015</i>
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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)	\$ <i>250⁰⁰</i>
All Other Contributions (Part B)	\$ <i>- 0 -</i>
TOTAL for the Reporting Period	(2) \$ <i>250⁰⁰</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>2,900⁰⁰</i>
All Other Contributions (Part D)	\$ <i>4,000⁰⁰</i>
TOTAL for the Reporting Period	(3) \$ <i>6,900⁰⁰</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 8.)	\$ <i>7,150⁰⁰</i>
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CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

OVER \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

Name of Filing Committee or Candidate <i>FRIENDS OF NANCY J. BECKER</i>	Reporting Period From <i>10/19/2015</i> To <i>11/23/2015</i>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>MONROE COUNTY COUNCIL REPUBLICAN</i>	<i>10</i>	<i>24</i>	<i>2015</i>	<i>\$ 500⁰⁰</i>
Mailing Address <i>2244 OAK TERRACE</i>	MO.	DAY	YEAR	\$
City <i>LANSDALE</i>	MO.	DAY	YEAR	\$
State <i>PA</i>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <i>19446-</i>	MO.	DAY	YEAR	\$
<i>TOWAMENCW REPUBLICAN COMMITTEE</i>	<i>11</i>	<i>03</i>	<i>2015</i>	<i>\$ 2,000⁰⁰</i>
Mailing Address <i>1798 MEADOW GLEN DR</i>	MO.	DAY	YEAR	\$
City <i>LANSDALE</i>	MO.	DAY	YEAR	\$
State <i>PA</i>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <i>19446-</i>	MO.	DAY	YEAR	\$
<i>REPUBLICAN WOMEN OF THE MAINLINE</i>	<i>11</i>	<i>04</i>	<i>2015</i>	<i>\$ 400⁰⁰</i>
Mailing Address <i>500 PARKVIEW DR</i>	MO.	DAY	YEAR	\$
City <i>WYUNETWOOD</i>	MO.	DAY	YEAR	\$
State <i>PA</i>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <i>19096-</i>	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$

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

PAGE TOTAL
\$ 2,900⁰⁰

**PART D
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 <i>FRIENDS OF NANCY J. BECKER</i>	Reporting Period From <i>10/19/2015</i> To <i>11/23/2015</i>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>J. EDMUND MULLIN</i>	<i>10</i>	<i>24</i>	<i>2015</i>	\$ <i>2,000⁰⁰</i>
Mailing Address <i>375 MORRIS RD</i>	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
City <i>LAUSDALE</i>	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
Employer Name <i>KUBLY, MULLIN, MAXWELL + LUPIN</i>				\$
Employer Mailing Address/Principal Place of Business <i>P.O. BOX 1479, LAUSDALE, PA 19446</i>				
Occupation <i>ATTORNEY</i>				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>HENRY W. HALLOWELL III</i>	<i>10</i>	<i>31</i>	<i>2015</i>	\$ <i>2,000⁰⁰</i>
Mailing Address <i>88 PLYMOUTH CIRCE</i>	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
City <i>HERSTHEY</i>	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
Employer Name <i>HALLOWELL + BRAUNSTETTER</i>				\$
Employer Mailing Address/Principal Place of Business <i>3031 LOGAN ST, CAMP HILL, PA 17011</i>				
Occupation <i>POLITICAL CONSULTANT</i>				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
City	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
Employer Name				\$
Occupation				
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
City	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
Employer Name				\$
Occupation				
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
City	<i>MO.</i>	<i>DAY</i>	<i>YEAR</i>	\$
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
\$ *4,000⁰⁰*

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate <i>FRIBUDS OF NANCY J. BECKER</i>	Reporting Period From <i>10/19/2015</i> To <i>11/23/2015</i>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the Reporting Period	(2)	\$

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the Reporting Period	(3)	\$ <i>19,829.40</i>

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)</i>	\$ <i>19,829.40</i>
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SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate <i>FRIENDS OF NANCY J. BECKER</i>	Reporting Period From <i>10/19/2015</i> To <i>11/23/2015</i>
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				DATE			AMOUNT	
Full Name of Contributor <i>REPUBLICAN PARTY OF PA</i>				MO.	DAY	YEAR	\$ 4,358.20	
Mailing Address <i>112 STATE ST</i>				MO.	DAY	YEAR		
City <i>HARRISBURG</i>		State <i>PA</i>	Zip Code (Plus 4) <i>17101 -</i>		MO.	DAY	YEAR	\$ 15,471.20
Employer of Contributor <i>REPUBLICAN PARTY OF PA</i>				Occupation <i>POLITICAL PARTY</i>				
Employer Mailing Address/Principal Place of Business <i>112 STATE ST, HARRISBURG, PA</i>				Description of Contribution <i>IN-KIND - POLITICAL MAILING</i>				
Full Name of Contributor				MO.	DAY	YEAR	\$	
Mailing Address				MO.	DAY	YEAR	\$	
City		State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation				
Employer Mailing Address/Principal Place of Business				Description of Contribution				
Full Name of Contributor				MO.	DAY	YEAR	\$	
Mailing Address				MO.	DAY	YEAR	\$	
City		State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation				
Employer Mailing Address/Principal Place of Business				Description of Contribution				
Full Name of Contributor				MO.	DAY	YEAR	\$	
Mailing Address				MO.	DAY	YEAR	\$	
City		State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation				
Employer Mailing Address/Principal Place of Business				Description of Contribution				
Full Name of Contributor				MO.	DAY	YEAR	\$	
Mailing Address				MO.	DAY	YEAR	\$	
City		State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation				
Employer Mailing Address/Principal Place of Business				Description of Contribution				

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL
\$ *19,829.40*

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate FRIENDS OF NANCY J. BECKER	Reporting Period From 10/19/2015 To 11/23/2015
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To Whom Paid	MO.	DAY	YEAR	Amount
NORTH WALES ELON SCHOOL	10	29	2015	\$ 18⁰⁰
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
NORTH WALES	PA	19457		
MCCRW	10	20	2015	\$ 30⁰⁰
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
LAUSDAL	PA	19446		
BOY SCOUT TROOP 303	10	20	2015	\$ 157⁰⁰
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
LAUSDAL	PA	19446		
MCCRC	10	25	2015	\$ 18,000⁰⁰
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
LAUSDAL	PA	19446		
WNPV	10	20	2015	\$ 481.⁰⁰
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
LAUSDAL	PA	19444		
WFYL	10	28	2015	\$ 500⁰⁰
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
NORRISTOWN	PA	19403		
USPS	10	29	2015	\$ 980⁰⁰
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
KULPSVILLE	PA	19443		
CORPUS CHRISTI CHURCH SCHOOL	10	29	2015	\$ 950⁰⁰
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
LAUSDAL	PA	19446		
Description of Expenditure				

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

PAGE TOTAL
\$ 21,116.⁰⁰

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate FRINDS OF NANCY J. BECKER	Reporting Period From 10/19/2015 To 11/23/2015
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To Whom Paid FRINDS OF BILL WHITESIDE	MO. 11	DAY 11	YEAR 2015	Amount \$ 204.50
Mailing Address P.O. BOX 95	Description of Expenditure CAMPAIGN			
City HORSHAM	State PA	Zip Code (Plus 4) -		
Description of Expenditure NOVARY MAILING				

To Whom Paid ACCRW	MO. 11	DAY 18	YEAR 2015	Amount \$ 30.00
Mailing Address 2244 OAK TERRACE	Description of Expenditure DINNER MEETING			
City HANSDALE	State PA	Zip Code (Plus 4) 19448		

To Whom Paid HALLOWELL + BRANSLETTER	MO. 11	DAY 23	YEAR 2015	Amount \$ 5100.00
Mailing Address 3031 LOGAN STREET	Description of Expenditure CAMPAIGN			
City CAMP HILL	State PA	Zip Code (Plus 4) 17011-		
Description of Expenditure ROBO CALL				

To Whom Paid LIPPER MERION REPUBLICAN PARTY	MO. 10	DAY 19	YEAR 2015	Amount \$ 45.00
Mailing Address 170 ALLENDALE RD	Description of Expenditure FUNDRAISOR			
City KING OF PRUSSIA	State PA	Zip Code (Plus 4) -		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 5379.50