

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST FRIENDS OF NANCY J. BECKER					
STREET ADDRESS 1798 MEADOW GLEN DRIVE					
CITY LANSDALE			STATE PA	ZIP CODE 19446 - 4743	
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT <input checked="" type="checkbox"/>		RECORDER OF DEEDS			REP
		DATE OF ELECTION MO. DAY YEAR 11 03 2009			
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR 11 23 2009 TO 12 31 2009		FOR OFFICE USE ONLY	
		CASH BALANCE AT END OF REPORTING PERIOD: \$ - 0 -		RECEIVED 2010 JAN 20 P 1:41 OFFICE OF VOTER SERVICES MONTG. CO. PA.	
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ - 0 -			
		AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/>			
		TERMINATION REPORT? YES NO <input checked="" type="checkbox"/>			

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
 20th DAY OF Jan 2010
 Eileen E. Stagliano
 SIGNATURE

MY COMMISSION EXPIRES 6 3 - 2011
 MO. DAY YR.

Nancy J. Becker
 SIGNATURE OF PERSON SUBMITTING REPORT

NANCY J. BECKER
 PRINTED NAME

610 278-3055
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate or Authorized Committee, Candidate must 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
 _____ DAY OF _____ 20____

 SIGNATURE

MY COMMISSION EXPIRES _____ MO. DAY YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
 EILEEN E. STAGLIANO, Notary Public
 Notarized in Montgomery Co., PA
 My Commission Expires June 3, 2011