

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: <input type="checkbox"/> | | Report Filed By: <input type="checkbox"/> | | 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: LANSDALE | | | | 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. | TERMINATION REPORT? | YES | NO |
| | ANNUAL REPORT | 7. | YEAR 2009 | | FILING METHOD () CHECK ONE <input type="checkbox"/> | | PAPER | DISKETTE | |

| | | | | | | | | | |
|-------------------------------------|-----------|-------------|------------------|-----|------|-----------------|-------------|------------|-------------|
| Name of Office Sought by Candidate: | | | DATE OF ELECTION | | | District Number | Office Code | Party Code | County Code |
| MO. | DAY | YEAR | MO. | DAY | YEAR | | OTH | REP | 46 |
| 11 | 03 | 2009 | | | | | | | |

(SEE INSTRUCTIONS FOR CODES)

| | | | | | | | |
|--|---------------------|-----------|-------------|----|-----------|-----------|-------------|
| Summary of Receipts and Expenditures from: | MO. | DAY | YEAR | To | MO. | DAY | YEAR |
| | 11 | 23 | 2009 | | 12 | 31 | 2009 |
| A. Amount Brought Forward From Last Report | \$ 10,024.38 | | | | | | |
| B. Total Monetary Contributions and Receipts (From Schedule I) | \$ - 0 - | | | | | | |
| C. Total Funds Available (Sum of Lines A and B) | \$ 10,024.38 | | | | | | |
| D. Total Expenditures (From Schedule III) | \$ 342.70 | | | | | | |
| E. Ending Cash Balance (Subtract Line D from Line C) | \$ 9,681.68 | | | | | | |
| F. Value of In-Kind Contributions Received (From Schedule II) | \$ - 0 - | | | | | | |
| G. Unpaid Debts and Obligations (From Schedule IV) | \$ - 0 - | | | | | | |

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 2010 JAN 20 P 1:41
 OFFICE OF
 VOTER SERVICES
 MONTG. CO. PA.

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 20th day of Jan 20 10

Eileen E. Stagliano } Signature of Person Submitting Report
 Signature
 Printed Name MICHAEL J. BECKER
 My commission expires 6 3 2011 }
 MO. DAY YR. Area Code 215 Daytime Telephone Number 368-5940

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

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 report complies with the provisions of the Act of June 3, 1937 (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this 20th day of Jan 20 10

Eileen E. Stagliano } Signature of Candidate
 Signature
 Printed Name Nancy J. BECKER
 My commission expires 6 3 2011 }
 MO. DAY YR. Area Code 610 Daytime Telephone Number 278-3055

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

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| | |
|--|---|
| Name of Filing Committee or Candidate <i>FRIENDS OF NAUCY J. BECKER</i> | Reporting Period From <i>11/23/2009</i> To <i>12/31/2009</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) | | \$ |
| | TOTAL for the Reporting Period | (3) \$ <i>- 0 -</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 <i>(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> | \$ <i>- 0 -</i> |
|---|-----------------|

STATEMENT OF EXPENDITURES

| | |
|--|---|
| Name of Filing Committee or Candidate FRIENDS OF NANCY J. BECKER | Reporting Period From 11/23/2009 To 12/31/2009 |
|--|---|

| | | | | |
|--|--------------------|--|---------------------|---------------------------|
| To Whom Paid MONTGOMERY COUNTY COUNCIL OF REP. WOMEN | MO. 12 | DAY 03 | YEAR 2009 | Amount \$ 30.00 |
| Mailing Address 1798 MEADOW GLEN DRIVE | | | | |
| Description of Expenditure DINNER MEETING | | | | |
| City LANSDALE | State PA | Zip Code (Plus 4) 19446-4743 | | |

| | | | | |
|---|--------------------|------------------------------------|---------------------|----------------------------|
| To Whom Paid MONTGOMERY COUNTY REPUBLICAN COM. | MO. 12 | DAY 15 | YEAR 2009 | Amount \$ 100.00 |
| Mailing Address 314 E. JOHNSON HIGHWAY, SUITE 200 | | | | |
| Description of Expenditure BREAKFAST FOR JUDGES | | | | |
| City NORRISTOWN | State PA | Zip Code (Plus 4) 19401- | | |

| | | | | |
|---|--------------------|------------------------------------|---------------------|----------------------------|
| To Whom Paid ZONE'S CATERING | MO. 12 | DAY 16 | YEAR 2009 | Amount \$ 162.70 |
| Mailing Address 2400 WEST MAIN STREET | | | | |
| Description of Expenditure HOLIDAY DINNER FOR STAFF | | | | |
| City JEFFERSONVILLE | State PA | Zip Code (Plus 4) 19403- | | |

| | | | | |
|---|--------------------|------------------------------------|---------------------|---------------------------|
| To Whom Paid MONTGOMERY COUNTY YOUNG REPUBLICANS | MO. 12 | DAY 17 | YEAR 2009 | Amount \$ 50.00 |
| Mailing Address 314 E. JOHNSON HIGHWAY, SUITE 200 | | | | |
| Description of Expenditure FUNDRAISER | | | | |
| City NORRISTOWN | State PA | Zip Code (Plus 4) 19401- | | |

| | | | | |
|----------------------------|-------|-------------------|------|--------------|
| 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
\$ **342.70**