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.
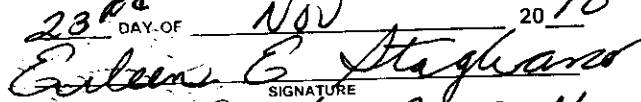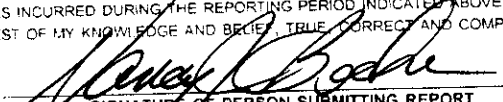
REPORT FILED ON BEHALF OF ►	CANDIDATE	✓	COMMITTEE		LOBBYIST	

FILER IDENTIFICATION NUMBER ►

NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST
Nancy J. Becker

STREET ADDRESS
1798 Meadow Glen Drive

CITY Lansdale   **STATE** PA   **ZIP CODE** 19446 —4743

NAME OF OFFICE SOUGHT BY CANDIDATE Recorder of Deeds

DISTRICT NO.

PARTY Rep

DATE OF ELECTION MO. 11 DAY 02 YEAR 2010

TYPE OF REPORT (CHECK ONE)

6TH TUESDAY PRE-PRIMARY	1.
2ND FRIDAY PRE-PRIMARY	2.
30 DAY POST-PRIMARY	3.
6TH TUESDAY PRE-ELECTION	4.
2ND FRIDAY PRE-ELECTION	5.
30 DAY POST-ELECTION	6.
ANNUAL REPORT	7.

DATES OF REPORTING PERIOD MO. 10 DAY 18 YEAR 2010 TO MO. 11 DAY 22 YEAR 2010

CASH BALANCE AT END OF REPORTING PERIOD: $ -0-

TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: $ -0-

AMENDMENT REPORT?	YES		NO	✓
TERMINATION REPORT?	YES		NO	✓

FOR OFFICE USE ONLY

RECEIVED 2010 NOV 23 P 3:23 OFFICE OF VOTER SERVICES MONTG. CO. PA

AFFIDAVIT SECTION

PART I -
If statement is filed on behalf of a <u>Political Committee or Candidates's Committee</u>, the Treasurer must sign here.
If statement is filed on behalf of a <u>Candidate</u>, the Candidate must sign here.
If statement is filed on behalf of a <u>Contributing Lobbyist</u>, 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

23 DAY OF Nov 20 10

Eileen E. Stagliano
SIGNATURE

MY COMMISSION EXPIRES 6 3 2011
MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT

PRINTED NAME Nancy J Becker

AREA CODE 610 **DAYTIME TELEPHONE NUMBER** 278-3055

PART II -
If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

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

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**