		(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)				
iler Identification 2010259 Report Filed	t	CANDEDATE	COMMU	2.	/IST 3.	
arme of Filing Committee, Candidate or Lobbyist RIENDS OF NANCY J.	BECK	BR	E			
1798 MEDOW GLEN DRY	VE	State:	Zip Cod		711.7	
LANSDALE	2.	PH-	3. AMENDA	446 - 47		
TYPE OF PREPRIMARY PRE-PRIMARY REPORT STH THEORY (place X to PRE-ELECTION	5.	POST FRIMARY IO DAY POST ELECTION	REPORT	ATTON VED	ND NG	
the right of ANNLIAL 7. YEAR 20	13	Ling Method () Check One (PAP	BR DISKE	31E	
Name of Office Sought by Candidate: RECORDEN OF DEEDS		DATE OF ELECT	13 Number	Office Party Code Code DTH REF (SEE INSTRUCTIONS		
Summary of Receipts and Expenditures from:	То	05 06 201	/3	OR OFFICE USE D	RIE Y	
A. Amount Brought Forward From Last Report	\$	4530.	91			
B. Total Monetary Contributions and Receipts (From Schedule 1		-0-				
C. Total Funds Available (Sum of Lines A and B)	\$	4530.		\sim		
D. Total Expenditures (From Schedule III)	\$	415	20			
E. Ending Cash Balance (Subtract Line D from Line C)	\$	4115.9		ב ס		
F. Value of In-Kind Contributions Received (From Schedule II))\$	-0-		₩ <u> </u>		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	-0-	V	$\frac{\omega}{\omega}$		
	ANIT SEC			ste hare		
I swear (or affirm) that this report, including the sherthetorchy with the sherthetorchy wi	0, 110411) 0111219°C&!	computer diskerne, a	are to the best	of my knowledge and i	belief	
Sworn to and subscribed before me this 110^{10} the st 100^{10} AV $20/3$	רו	L /4				
E A E At alian	- -	All ali	-T	Submitting Report		
Cillen C Staguano	}-		Printed	Name		
My commission expires 4 3 2013	5	215		896-464		
MO. DAY YR.	<u> </u>	Area Code		Daytime Telephone N	umber	
PART II	ORIGINA	. candidate shall s	agy/here			
I swear (or affirm) that to the best of my knowledge and belief this	political c	ommittee has not vis	lated any profi	sions of the Act of Ju	ine 3, 1	
(P.L. 1333, No. 320) as amended. Sworn to and subscribed before me this		// h	1. H	Snald		
1 M day of MAY 20/	3]	///lin	CY FE	Jula		
El & Manhand	-1	' NAN	Signature of	BECK	Ere	
Signature	- ſ		Printed	Name 278-21	5-6-	
My commission expires $G = \frac{3}{2010}$		610		Z / J JUC Daytime Telephone	Number	
	•	Area Code				
MO. DAY YR.	J					
	EAL Notery Pu		s and Legisla ● (717) 78	ation		

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SCHEDULE I

PAGE 2 OF

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate, LOIENING OF WANCY J. BECKER

Reporting Perjod From 4/1/2013 To 5/6/2013

L 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 & AND PART B)	
Contributions Received from Political Committees (Part A)	\$
All Other Contributions (Part B)	\$
TOTAL for the Reporting Period (2)	s -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 PAR	ПE
TOTAL for the Reporting Period (4)	\$ -0-	

THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report	\$ -O ⁻
Cover Page, Item B.)	

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		~	Rep	orting Pe	riod /	1 /
P-RIEUDS OF NANCY	y J.	BECKE	R F	rom <u>04</u>	4/01/2	03 TO US 10/201
		00,10				
TO WHOM POORTH PENN YMC	?A		мо. 04		013	\$ 250.00
Wailing Address N. BROAD ST			Description	of Expension	liture KI	DS CAMPAIGN
LANSDALE	State	Zip Code (Plus 4) 1944-			·	
To Whom Pais CCRW			04	18 18	2013	Armount 30 00 \$
Abiling Address 2244 OAK TERRAL	<u>15</u>		Description)/ <i>D</i> X	ture 1 <u>FR</u>	MEETING
LANSDALE	State	Zip Code (Plus 4) /944-				
To Whom Pair AREA 9			Description			Amount 00 \$ 50.
Mailing Address PENLLYN PIA	KP-	Zip Code (Plus 4)	Description	HOOL	BO	ARD
BLUE BELL	State	19422-		UDR		
TO WHOM Paid SILOAM BAPTIST (HURC	PA	04	DAY 22 n of Exper	2013	\$ 2000
Mailing Address 1329 WILLOW ST		Zin Code (Plus 4)	Descriptio			
City NORRISTOWN	State A	Zip Code (Plus 4) /940/-		NDR		
WEST NORRITON RCI	РИВЦ	CHN COM.	05	CIAY O/	2013	Amount 500 \$ 65.
Mailing Address O. Box 383	State	Zip Code (Plus 4)				
NORRISTOWN	PA	19404		UDR.		
To Whom Paid				on of Expe		\$
Mailing Address						·····
City	State	Zip Code (Plus 4) —				
To Whom Paid			860.	đay	VEAR	Amount \$
Mailing Address				on of Exp	enditure	
City	State	Zip Code (Plus 4) —				
To Whom Paid				CAY	1	Amount \$
Mailing Address				ion of Exp		
City	State	Zip Code (Plus 4 —				
Enter Grand Total of Expenditures on	Page 1	Report Cover	Page It	em D.		PAGE TOTAL \$ 4/5.00
Enter Grand Total of Expenditures on	raye I,	neput cover	. age, 10			- 710