

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. <input type="checkbox"/> COMMITTEE 2. <input checked="" type="checkbox"/> LOBBYIST 3. <input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF NANCY J. BECKOR	
Street Address: 1798 MEADOW GLEN DRIVE	
City: LAUSDAL E	State: PA Zip Code: 19446 - 4743

TYPE OF REPORT (place X to the right of report type)	1. 2ND TUESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY	3. 30 DAY POST-PRIMARY	AMENDMENT REPORT?	YES	NO
	4. 1ST TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION <input checked="" type="checkbox"/>	6. 30 DAY POST-ELECTION	TERMINATION REPORT?	YES	NO
	7. ANNUAL REPORT	YEAR: 2015	FILING METHOD (CHECK ONE)	PAPER	DISKETTE	

Name of Office Sought by Candidate: RECORDER OF DEEDS	DATE OF ELECTION MO. DAY YEAR 11 03 2015	District Number	Office Code OTH	Party Code REP	County Code 46
(SEE INSTRUCTIONS FOR CODES)					

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY
	09 14 2015		10 19 2015	
A. Amount Brought Forward From Last Report	\$ 25,332.34			
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 9,110.00			
C. Total Funds Available (Sum of Lines A and B)	\$ 34,442.34			
D. Total Expenditures (From Schedule III)	\$ 9,233.80			
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 25,208.54			
F. Value of In-Kind Contributions Received (From Schedule II)	\$ 1017.60			
G. Unpaid Debts and Obligations (From Schedule IV)	\$ -0-			

AFFIDAVIT SECTION

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 **OCTOBER** 20 **15**

Signature: **Jeanne M Drake** Signature of Person Submitting Report: **Michael J. Beckor**

My commission expires **06 26 17** MO. DAY YR. Area Code: **215** Daytime Telephone Number: **896-4691**

NOTARIAL SEAL: Jeanne M Drake, Notary Public, My Commission Expires 06/26/2017

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 **20th** day of **OCTOBER**

Signature: **Jeanne M Drake** Signature of Candidate: **Nancy J. Beckor**

My commission expires **06 26 17** MO. DAY YR. Area Code: **610** Daytime Telephone Number: **278-3055**

NOTARIAL SEAL: Jeanne M Drake, Notary Public, My Commission Expires 06/26/2017

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

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>FRIENDS OF NAVY J. BECKER</i>	Reporting Period From <i>09/14/2015</i> To <i>10/19/2015</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <i>550.00</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <i>-0-</i>
All Other Contributions (Part B)	\$ <i>2,660.00</i>
TOTAL for the Reporting Period (2)	\$ <i>2,660.00</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>4,500.00</i>
All Other Contributions (Part D)	\$ <i>1,400.00</i>
TOTAL for the Reporting Period (3)	\$ <i>5,900.00</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 B.)	\$ <i>9,110.00</i>
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ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate				Reporting Period			
FRIENDS OF NANCY J. BECKER				From 09/14/2015 To 10/19/2015			
				DATE			AMOUNT
Full Name of Contributor JOANN + TODD JONES				MO	DAY	YEAR	\$ 100 ⁰⁰
Mailing Address 989 SWATHMORE DRIVE NW				MO	DAY	YEAR	\$
City ATLANTA		State GA	Zip Code (Plus 4) 30327	MO	DAY	YEAR	\$
Full Name of Contributor JOAN HINDIN				MO	DAY	YEAR	\$ 100 ⁰⁰
Mailing Address 500 PARKVIEW DR				MO	DAY	YEAR	\$
City WYNNEWOOD		State PA	Zip Code (Plus 4) 19098-	MO	DAY	YEAR	\$
Full Name of Contributor PAUL + DORIS DECKER				MO	DAY	YEAR	\$ 60 ⁰⁰
Mailing Address 245 WASHINGTON ST				MO	DAY	YEAR	\$
City RED HILL		State PA	Zip Code (Plus 4) 18078-	MO	DAY	YEAR	\$
Full Name of Contributor ROBERT RAU				MO	DAY	YEAR	\$ 100 ⁰⁰
Mailing Address P.O. BOX 212				MO	DAY	YEAR	\$
City KULPSVILLE		State PA	Zip Code (Plus 4) 19443-0212	MO	DAY	YEAR	\$
Full Name of Contributor MARY BETH McDERMOTT				MO	DAY	YEAR	\$ 100 ⁰⁰
Mailing Address 1124 HARROGATE WAY				MO	DAY	YEAR	\$
City AMBLER		State PA	Zip Code (Plus 4) 19002	MO	DAY	YEAR	\$
Full Name of Contributor ANDREW GULOTTA				MO	DAY	YEAR	\$ 100 ⁰⁰
Mailing Address 1609 N. GRAVEL PIKE				MO	DAY	YEAR	\$
City PERKIOMENVILLE		State PA	Zip Code (Plus 4) 18074-	MO	DAY	YEAR	\$
Full Name of Contributor JACOB + MARY ANN DAILEY				MO	DAY	YEAR	\$ 150 ⁰⁰
Mailing Address 397 NESTER DR				MO	DAY	YEAR	\$
City POTTSTOWN		State PA	Zip Code (Plus 4) 19464-2326	MO	DAY	YEAR	\$
Full Name of Contributor RANDY KRENSON				MO	DAY	YEAR	\$ 100 ⁰⁰
Mailing Address 618 SEMINOLE AV				MO	DAY	YEAR	\$ 100 ⁰⁰
City JENKINTOWN		State PA	Zip Code (Plus 4) 19048-	MO	DAY	YEAR	\$
PAGE TOTAL							\$ 910 ⁰⁰

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

**PART B
ALL OTHER CONTRIBUTIONS**

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate FRIENDS OF NANCY J. BECKER	Reporting Period From 09/14/2015 To 10/19/2015
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
STEVEN ENGLISH 224 KING ST POTTSTOWN PA 19464	09	29	2015	\$ 100 ⁰⁰
JUSTICE SANDRA SCHULTZ NEWMAN 1120 GINXGO LANE GLADWYNNE PA 19035-	09	29	2015	\$ 250 ⁰⁰
MARCY TOEPEL 307 HAMPTON CIR GILBERTSVILLE PA 19525-	09	29	2015	\$ 100 ⁰⁰
VINCENT PAONE 988 SUMNOYTOWN PIKE LANSDALE PA 19446-	09	30	2015	\$ 100 ⁰⁰
MARINA KATS 1 BASTLETON PIKE FEASTERVILLE PA 19053-	10	04	2015	\$ 100 ⁰⁰
RUDY WIDMANN 1138 YOUNGSFORD RD GLADWYNNE PA 19035/1325	10	06	2015	\$ 150 ⁰⁰
ROBERT ROSEN 2031 N. BROAD ST., SUITE 101 LANSDALE PA 19446-	10	16	2015	\$ 150 ⁰⁰
LINDA + ROBERT GALLAGHER 555 WILLIAM PENN WAY LANSDALE PA 19446-	10	13	2015	\$ 100 ⁰⁰

PAGE TOTAL
\$ 1,050⁰⁰

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate				Reporting Period			
FRIENDS OF NANCY J. BECKER				From 09/14/2015 To 10/19/2015			
				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	
GREGORY + MARY GIFFORD				10	16	2015	\$ 250 ⁰⁰
Mailing Address				MO.	DAY	YEAR	\$
832 CROVER DR							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
NORTH WALES,		PA	19454-				\$
Full Name of Contributor				MO.	DAY	YEAR	
NORTH PENN GOLF				10	16	2015	\$ 200 ⁰⁰
Mailing Address				MO.	DAY	YEAR	\$
1605 S. SUNNYSIDE VALLEY FORGE DR SUNNYSIDE							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
LANSDALE		PA	19446-				\$
Full Name of Contributor				MO.	DAY	YEAR	
JOY KALAJAINEN - JOHNSON				10	16	2015	\$ 150 ⁰⁰
Mailing Address				MO.	DAY	YEAR	\$
314 LAMONT DR							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
GOGAN STATION		PA	17728-				\$
Full Name of Contributor				MO.	DAY	YEAR	
MARK CAPPUCIO				10	16	2015	\$ 100 ⁰⁰
Mailing Address				MO.	DAY	YEAR	\$
86 BRINKER DR							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
DOYLESTOWN		PA	18901 -				\$
Full Name of Contributor				MO.	DAY	YEAR	\$
							\$
Mailing Address				MO.	DAY	YEAR	\$
							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			-				\$
Full Name of Contributor				MO.	DAY	YEAR	\$
							\$
Mailing Address				MO.	DAY	YEAR	\$
							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			-				\$
Full Name of Contributor				MO.	DAY	YEAR	\$
							\$
Mailing Address				MO.	DAY	YEAR	\$
							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			-				\$

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 700⁰⁰

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				Reporting Period				
FRIENDS OF NANCY J. BECKER				From 09/14/2015 To 10/19/2015				
				DATE			AMOUNT	
Full Name of Contributing Committee				MO.	DAY	YEAR	\$	
MONTGOMERY COUNTY REP. WOMEN'S LEADERSHIP				09	17	2015		3,000. ⁰⁰
Mailing Address				MO.	DAY	YEAR		\$
1798 MEADOW GLEN DR							\$	
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
LANSDALE		PA	19446 -					\$
Full Name of Contributing Committee				MO.	DAY	YEAR		\$
CITIZENS FOR PROSPERITY				10	15	2015	1,000. ⁰⁰	
Mailing Address				MO.	DAY	YEAR	\$	
228 S. WASHINGTON ST. SUITE 115							\$	
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
ALEXANDRIA		VA	22314 -					\$
Full Name of Contributing Committee				MO.	DAY	YEAR		\$
AMERICANS OF ITALIAN HERITAGE COUN				10	16	2015	500. ⁰⁰	
Mailing Address				MO.	DAY	YEAR	\$	
2650 AUDUBON RD							\$	
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
AUDUBON		PA	19403 -					\$
Full Name of Contributing Committee				MO.	DAY	YEAR		\$
							\$	
Mailing Address				MO.	DAY	YEAR	\$	
							\$	
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
			-					\$
Full Name of Contributing Committee				MO.	DAY	YEAR		\$
							\$	
Mailing Address				MO.	DAY	YEAR	\$	
							\$	
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
			-					\$
Full Name of Contributing Committee				MO.	DAY	YEAR		\$
							\$	
Mailing Address				MO.	DAY	YEAR	\$	
							\$	
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
			-					\$
Full Name of Contributing Committee				MO.	DAY	YEAR		\$
							\$	
Mailing Address				MO.	DAY	YEAR	\$	
							\$	
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
			-					\$
Full Name of Contributing Committee				MO.	DAY	YEAR		\$
							\$	
Mailing Address				MO.	DAY	YEAR	\$	
							\$	
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
			-					\$

PAGE TOTAL

\$ 4,500.⁰⁰

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

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 FRIENDS OF NANCY J. BECKER	Reporting Period From 09/14/2015 To 10/19/2015
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor PAT MOSESSO				09	22	2015	\$ 500 ⁰⁰
Mailing Address 140 AVONDALE RD				MO.	DAY	YEAR	\$
City NORRISTOWN		State PA	Zip Code (Plus 4) 19403-	MO.	DAY	YEAR	\$
Employer Name MORGAN WENTWORTH				Occupation ATTORNEY RECRUITER			
Employer Mailing Address/Principal Place of Business DEKALB PIKE, NORRISTOWN, PA							
Full Name of Contributor CHRIS MULLANEY				09	22	2015	\$ 250 ⁰⁰
Mailing Address P.O. BOX 250				MO.	DAY	YEAR	\$
City RED HILL		State PA	Zip Code (Plus 4) 18076-1310	MO.	DAY	YEAR	\$
Employer Name MULLANEY LAW OFFICES				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 598 MAIN ST, P.O. BOX 24, RED HILL, PA 18076							
Full Name of Contributor JACOB PARRIN				10	16	2015	\$ 500.00
Mailing Address 527 HUNSPCKER RD				MO.	DAY	YEAR	\$
City TELFORD		State PA	Zip Code (Plus 4) 18969-	MO.	DAY	YEAR	\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
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
\$ **1,400⁰⁰**

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>FRIENDS OF NANCY J. BECKER</i>	Reporting Period From <i>09/4/2015</i> To <i>10/9/2015</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) \$ <i>-0-</i>

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period	(2) \$ <i>-0-</i>

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period	(3) \$ <i>1,017.60</i>

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	\$ <i>1017.60</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>09/14/2015</i> To <i>10/19/2015</i>
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor <i>MARK NICOLETTI</i>	<i>10</i>	<i>13</i>	<i>2015</i>	<i>\$ 1017.60</i>
Mailing Address <i>100 ROSS RD</i>	MO.	DAY	YEAR	\$
City <i>KING OF PRUSSIA</i> State <i>PA</i> Zip Code (Plus 4) <i>19406</i>	MO.	DAY	YEAR	\$
Employer of Contributor <i>PAULA SUBURBAN DEVELOPMENT CORP</i>	Occupation <i>DEVELOPER</i>			
Employer Mailing Address/Principal Place of Business <i>1100 ROSS RD, KING OF PRUSSIA, PA 19406</i>	Description of Contribution <i>KUNDRASSETZ AT MARRIOTT</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
\$ 1017.60

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <i>FRIENDS OF NANCY J. BECKER</i>	Reporting Period From <i>09/14/2015</i> To <i>10/19/2015</i>
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To Whom Paid	MO.	DAY	YEAR	Amount	Description of Expenditure
<i>MONTGOMERY COUNTY COUNCIL OF REPUBLICAN WOMEN</i>	<i>09</i>	<i>16</i>	<i>2015</i>	<i>\$ 30.⁰⁰</i>	
Mailing Address <i>2244 OAK TERRACE</i>					
City <i>LANSDALE</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19446-</i>			
<i>LOWER PROVIDENCE REPUBLICAN COMMITTEE</i>	<i>09</i>	<i>19</i>	<i>2015</i>	<i>\$ 30.⁰⁰</i>	
Mailing Address					
City	State	Zip Code (Plus 4)			
<i>MORNING STAR MINISTRY</i>	<i>09</i>	<i>19</i>	<i>2015</i>	<i>\$ 75.⁰⁰</i>	
Mailing Address <i>P.O. BOX 1343</i>					
City <i>LANSDALE</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19446-</i>			
<i>EAST NORRITON REPUBLICAN COMMITTEE</i>	<i>09</i>	<i>20</i>	<i>2015</i>	<i>\$ 45.⁰⁰</i>	
Mailing Address <i>807 IRENIC COURT</i>					
City <i>EAST NORRITON</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19403-</i>			
<i>COURT HOUSE HILL COUNCIL REP. WOMEN</i>	<i>09</i>	<i>23</i>	<i>2015</i>	<i>\$ 30.⁰⁰</i>	
Mailing Address <i>2244 OAK TERRACE</i>					
City <i>LANSDALE</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19446-</i>			
<i>HATFIELD REPUBLICAN PARTY</i>	<i>10</i>	<i>07</i>	<i>2015</i>	<i>\$ 40.⁰⁰</i>	
Mailing Address <i>2139 MILLER PLACE</i>					
City <i>HATFIELD</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19440-</i>			
<i>AREA 5 REPUBLICAN COMMITTEE</i>	<i>10</i>	<i>08</i>	<i>2015</i>	<i>\$ 45.⁰⁰</i>	
Mailing Address <i>579 POWDERHORN RD</i>					
City <i>KING OF PRUSSIA</i>	State <i>PA</i>	Zip Code (Plus 4) <i>-</i>			
<i>CEDARS ADVERTISING</i>	<i>10</i>	<i>08</i>	<i>2015</i>	<i>\$ 2363.⁸⁰</i>	
Mailing Address <i>P.O. BOX 85</i>					
City <i>CEDARS</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19423-</i>			

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

PAGE TOTAL
\$ 2658.⁸⁰

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate FRIENDS OF NANCY J. BECKER	Reporting Period From 09/14/2015 To 10/19/2015
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To Whom Paid	MO.	DAY	YEAR	Amount
MONTGOMERY COUNTY REPUBLICAN COM	10	09	2015	\$ 1200. ⁽¹⁾
Mailing Address 860 PENNINA BLUE BELL PIKE, SUITE 240	Description of Expenditure			
City BLUE BELL	State PA	Zip Code (Plus 4) 19422		GREEN BALLOT EXP.
INTERNATIONAL SPRING FESTIVAL	10	10	2015	\$ 250 ⁽²⁾
Mailing Address 301 VINE ST	Description of Expenditure			
City LANSDALE	State PA	Zip Code (Plus 4) 19446		FUNDRAISER
AMERICAN OF ITALIAN HERITAGE COUNCIL	10	18	2015	\$ 125 ⁽³⁾
Mailing Address 2650 AUDUBON RD	Description of Expenditure			
City AUDUBON	State PA	Zip Code (Plus 4) 19403		FUNDRAISER
MCRC	10	19	2015	\$ 5,000 ⁽⁴⁾
Mailing Address 860 PENNINA BLUE BELL PIKE	Description of Expenditure			
City BLUE BELL	State PA	Zip Code (Plus 4) 19422		CAMPAIGN MAILER
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
\$ 6575 ⁽⁵⁾