Name: LISA B. FIORE

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Commonwealth of Massachusetts

Form CPF M 102-0: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

City or Town of: Belmont

Please print or type all information, except signatures.

Fill in dates:	Month	Day	Year		Month	Day	Year
Reporting Period Beginning	May	7	2015	Ending	Dec.	30	2015

Type of Report: (Check One)

- ☐ 8th day preceding preliminary/primary
- ☐ 8th day preceding election
- ☐ 30th day following election (Town or Special)
- ☒ 20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
12/30/15	Lisa Fiore	34 VAN NESS RD.	SCHOOL COMMITTEE

11/97