

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

MECENVED

JUNE CLERK'S OFFICE

Tassachusetts	001044
with: y or Town Clerk or Election Commission Please print or type all info	ormation, except signatures.
Fill in dates: Reporting Period Beginning / / 90/	
Type of report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	n □30 day after election □year-end report □dissolution
PAULA L. FORTEN	N/A
Full Name of Candidate (if applicable) THY COLLECTOR	Committee Name
Office Sought and District 2 LOMBARDI CIR	Name of Committee Treasurer
Residential Address	Committee Mailing Address
Tel. No. (optional)	Tel. No. (optional)
campaign finance activity, including all contributions, loans, receipts, expendi and represents the campaign finance activity of all persons acting under the a M.G.L. c. 55. Signed under the penalties of Treasurer's signature (in ink)	this period (page 4) \$
FOR CANDIDATE FILINGS ONI	LY: (CANDIDATE MUST SIGN BELOW)