

Form CPF M 102: Campaign Finance Report Municipal Form

RECEIVER

Office of Campaign and Political Finance

of Massachusetts 2021 JAN - 5 AM 7: 56	-	File witl	h: City or Town Clerl	k or Election Commission
	0/2020	Ending Date:	1/19/2021	
Type of Report: (Check one)				
8th day preceding preliminary 8th day preceding election	[] 30 day	after election 🔀	year-end report	dissolution
our day preceding preminiary our day preceding executor		arter electron 🔼	year-end report	
Cyrus Vaghar	Comm	nittee to elect Cyr	rus Karl Vanh	ar
Candidate Full Name (if applicable)			nmittee Name	<u>ui</u>
School Committee, Ward 2 Office Sought and District	Mehrb	anoo Roghani E	sfahani Committee Treasurer	
42 Farifield Street, Newton, MA 02460		irfield Street, Nev		60
Residential Address	1 72 1 41		ee Mailing Address	50
E-mail: cyruskvaghar@gmail.com	E-mail: _	cyrusky	aghar@gmail	.com
Phone # (optional):	Phone # (o	ptional):		
	<u> </u>			
SUMMARY BALANC	CE INFOI	RMATION:		
Line 1: Ending Balance from previous report			32.5	2
Line 2: Total receipts this period (page 3, line 11) [0
Line 3: Subtotal (line 1 plus line 2)			32.5	2
Line 4: Total expenditures this period (page 5, lin	ne 14)			0
Line 5: Ending Balance (line 3 minus line 4)			32.5	2
Line 6: Total in-kind contributions this period (page 1)	age 6)		ı	0
Line 7: Total (all) outstanding liabilities (page 7)			631.3	3
Line 8: Name of bank(s) used: The Village Ba	nk			
Affidavit of Committee Treasurer:				
I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in	contributions a	nd liabilities for this reporti	ing period and represer	
Signed under the penalties of perjury: Merhbanoo Roghani Esfah		(Treasurer's signatu	Data	1/5/2021
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox only)			
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to th activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting	ccordance with			
Candidate without Committee OR Candidate with independent activity filing s I certify that I have examined this report including attached schedules and it is, to th finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	e best of my kn s, in-kind contr	owledge and belief, a true a ibutions and liabilities for the	his reporting period an	nd represents the
Signed under the penalties of perjury: Cyrus Vaghar		(Candidate's signate		1/5/2021

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
		Satura Sana Alamana da		
-				
		:		
ine 9: Total Receip	pts over \$50 (or listed above)			
ine 10: Total Recei	pts \$50 and under* (not listed above)			
ine 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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ine 9: Total Receipt	ts over \$50 (or listed above)		
ine 10: Total Recein	ots \$50 and under* (not listed above)		•
	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2
	Ŀ		d include only those receipts not itemized above

^{*}If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

To Whom Paid Purpose of Expenditure Address Amount (alphabetical listing) Date Paid Line 12: Total Expenditures over \$50 (or listed above) Line 13: Total Expenditures \$50 and under* (not listed above) Enter on page 1, line $4 \rightarrow \left|$ Line 14: TOTAL EXPENDITURES IN THE PERIOD

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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		Lina 12: Evnandituras avan 650	(or listed shows)		
		Line 12: Expenditures over \$50	(or usied above)		
e e		Line 13: Expenditures \$50 and u	nder* (not listed above)		
. •	P.,4.	Tine 14. TOTAL DANDAIDADA	IDEC INTUITE DEDICE		
те і	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDITU	L		

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			·	
				ą.
				·
	·	Line 15: In-Kind Contributions	over \$50 (or listed above)	·
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Por pose	Amount
3/9/2017	Cyrus Katl Vaghar	42 Fairfield Street Newton, Ma	Startup Capitol	\$100
3/21/2017	Cyrus Karl Vaghar	42 Fairfield Street Newton, Ma	Purchase of 5,000 doorhangers	\$232.57
7/6/2017	Cyrus Karl Vaghar	42 Fairfield Street Newton, Ma	Canvassing Software	\$100
9/19/2017	Cyrus Karl Vaghar	42 Fairfield Street Newton, Ma	25 Yard Signs	\$198.77
				Personal Primary
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