

07/21/2023

Officeholder and Candidate Campaign Statement - Short Form

Date of election if applicable: (Month, Day, Year) n/a

Amendment (Explain Below)

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2023 JUL 24 PM 1:55

CAMPAIGN FINANCE DISCLOSURE SECTION

CALIFORNIA FORM 470

For Official Use Only

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1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Diane V. Grooms

STREET ADDRESS

CITY

Lancaster

AREA CODE/DAYTIME PHONE NUMBER

661-435-9743

STATE ZIP CODE

CA 93534

OPTIONAL: FAX/ E-MAIL ADDRESS

dvgrooms@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Governing Board Member, Trustee Area 4

JURISDICTION (LOCATION)

Lancaster School District

DISTRICT NUMBER (IF APPLICABLE)

S718

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

Table with 3 columns: COMMITTEE NAME AND I.D. NUMBER, COMMITTEE ADDRESS, NAME OF TREASURER. Row 1: n/a, Row 2: THIS IS FINAL REPORT, I resigned from the district July 19, 2023.

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the

Executed on 7-20-23 DATE

By