

**Officeholder and Candidate
Campaign Statement –
Short Form**

Date Stamp	RECEIVED BY LOS ANGELES COUNTY 2023 JUL 31 PM 1:39 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM	470
		For Official Use Only	

Date of election if applicable: (Month, Day, Year) <u>n/a</u>	<input type="checkbox"/> Amendment (Explain Below) <hr/> <hr/>
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1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Diane V. Grooms

STREET ADDRESS

CITY STATE ZIP CODE
Lancaster CA 93534

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
661-435-9743 dvgrooms@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Governing Board Member, Trustee Area 4

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Lancaster School District 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.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER
n/a		
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 State of California that the foregoing is true and correct.

Executed on 7-20-23
DATE