

Officeholder and Candidate
Campaign Statement –
Short Form

CEM GE24

Date of election if applicable: (Month, Day, Year) <u>11/05/24</u>	<input type="checkbox"/> Amendment (Explain Below) _____ _____	Date Stamp RECEIVED BY LOS ANGELES COUNTY 2024 JUL 29 AM 10:03 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only 021437
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1. Statement Covers Calendar Year 20 24

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Stephanie Lewis
STREET ADDRESS

CITY

Lake Hughes
AREA CODE/DAYTIME PHONE NUMBER

STATE

CA

ZIP CODE

93532

OPTIONAL: FAX / E-MAIL ADDRESS

910-773-10331

srlewis317@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Hughes-Elizabeth Lakes Union School District, Governing Board
JURISDICTION (LOCATION)

DISTRICT NUMBER
(IF APPLICABLE)

Trustee Area 4

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
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

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 07/29/24
DATE

By

OR CANDIDATE