

Officeholder and Candidate
Campaign Statement –
Short Form

8/5/24 ①

GE24

Date of election if applicable: (Month, Day, Year) 11/5/2024	<input type="checkbox"/> Amendment (Explain Below) 	Date Stamp RECEIVED BY LOS ANGELES COUNTY 2024 AUG -6 PM 12: 23 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only 021808
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1. Statement Covers Calendar Year 20 ²⁴ .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Julie A. Eutsler

STREET ADDRESS

CITY

Lancaster

AREA CODE/DAYTIME PHONE NUMBER

661-816-3962

STATE

CA

ZIP CODE

93534

OPTIONAL: FAX / E-MAIL ADDRESS

eutslerjulie@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Lancaster School District Governing Board Member, Trustee Area 4

JURISDICTION (LOCATION)

Lancaster, Los Angeles County

DISTRICT NUMBER
(IF APPLICABLE)

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

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 expend 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 Calif

Executed on August 5, 2024
DATE

By
DATE