Officeholder and Candidate Campaign Statement – Short Form			,		2   3   2 4 ( 1 ) Date Stamp	SALIFORNIA FORM FORM For Official Use Only
		Date of election if applicable: (Month, Day, Year)	□ Amen	dment (Explain Below) L.OS	RECEIVED BY ANGELES COUNTY	
		11/05/2024		· •	FEB -7 PM 2: 48	
1.	Statement Covers Calendar Year 20 24		<u>.</u>		MPAIGN FINANCE	10.20 110
2.	Officeholder or Candidate Information		3.	Office Sought or Held		0++ 02005
	NAME OF OFFICEHOLDER OR CANDIDATE	<del></del>		OFFICE SOUGHT OR HELD	. ,	
	AUDREY TERESA MILLER				E VALLEY EAST KERN WA	
	STREET ADDRESS	1.		JURISDICTION (LOCATION)  Los Angeles, Kern, and V	entura Counties	DISTRICT NUMBER (IF APPLICABLE) 6
	LANCASTER	STATE ZIP CODE  CA 93535				
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS				,
	661-609-1288	audreytmiller@gmail.com	ı		-	
l.	Committee Information List all committees of which you have knowledge to COMMITTEE NAME AND I.D. NUMBER	hat are primarily formed to rec		tions or to make expenditu		acy. E of treasurer
	n/a					
,		-				
j.	Verification	•	. ( '			
	I declare under penalty of perjury that to the best of my all reasonable diligence in preparing this statement. I	knowledge I anticipate that I will certify under penalty of perjury un	receive less the der the laws of	nan \$2,000 and that I will sper f the State of California that th	nd less than \$2,000 during the ne foregoing is true and correct	calendar year and that I have used
	Executed on	2024				<u> </u>