

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Initial Filing Received
Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 LaGrange Chelsea

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
 Lucerne Valley Unified School District
 Division, Board, Department, District, if applicable Your Position
 District Board Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of San Bernardino
- Other _____

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2018, through December 31, 2018.
- or- The period covered is _____ through December 31, 2018.
- Assuming Office: Date assumed 12 / 13 / 2018
- Leaving Office: Date Left _____ (Check one circle)
- The period covered is January 1, 2018, through the date of leaving office.
- or- The period covered is _____ through the date of leaving office
- Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _____

Schedules attached

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
 8560 Aliento Road Lucerne Valley CA 92356
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
 (760) 248-6108 chelsealagrang@lucernevalleyusd.org

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed April 11, 2019
(month, day, year)

Signature _____
(File the originally signed paper statement with your filing official)