

CHARTER SCHOOL INTERIM REPORT  
1st Interim as of October 31  
2nd Interim as of January 31

Charter School Name: Elite Academic Academy - Lucerne  
CDS #: 34-75051-0136889  
Charter Approving Entity: Lucerne Valley USD  
County: San Bernardino  
Charter #: 1923

CHARTER SCHOOL CERTIFICATION

To the authorizing/oversight district:

2020-21 CHARTER SCHOOL INTERIM REPORT -- ALTERNATIVE FORM: This report has been approved, and is hereby filed by the charter school pursuant to Education Code Section 47604.33.

Signed: [Signature]  
Charter School Official  
(Original signature required)

Printed Name: Meghan Freeman

Date: 3/12/2021

Title: CEO

CERTIFICATION OF FINANCIAL CONDITION:

( ☒ ) POSITIVE

As the Charter School Official, I certify that this Charter will be able to meet its financial obligations for the current fiscal year and two subsequent fiscal years.

( ☐ ) QUALIFIED

As the Charter School Official, I certify that this Charter may not meet its financial obligations for the current fiscal year or two subsequent fiscal years.

( ☐ ) NEGATIVE

As the Charter School Official, I certify that based upon current projections this charter will be unable to meet its financial obligations for remainder of the fiscal year or for the subsequent fiscal year.

To the County Superintendent of Schools:

2020-21 CHARTER SCHOOL INTERIM REPORT -- ALTERNATIVE FORM: This report has been reviewed pursuant to Education Code Section 47604.33.

Signed: [Signature]  
Authorized Representative of  
Charter Approving Entity  
(Original signature required)

Printed Name: Peter Livingston

Date: 3/12/21

Title: Superintendent

( ☒ ) POSITIVE

I have reviewed the report and concur with the Positive Statement

( ☐ ) NOT POSITIVE

Attached is copy of Letter to Charter Indicating Findings

2020-21 CHARTER SCHOOL INTERIM REPORT -- ALTERNATIVE FORM: This report has been received by the County Superintendent of Schools pursuant to Education Code Section 47604.33(1).

Signed: \_\_\_\_\_  
County Superintendent/Designee  
(Original signature required)

Date: \_\_\_\_\_

For additional information on the budget report, please contact:

For Approving Entity:

Douglas Beaton  
Name

Chief Business Official  
Title

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For Charter School:

Bryan Adams  
Name

Outsource Provider  
Title

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E-mail address