

Candidate Intention Statement

Date Stamp RECEIVED	CALIFORNIA FORM	501
AUG 07 2024		For Official Use Only
TEHAMA COUNTY ELECTIONS		

Check One: Initial Amendment (Explain)

COPY

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Savage, Danielle, Alisha DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) NA EMAIL (optional) alishad@savage@gmail.com

STREET ADDRESS [REDACTED] CITY Corning, CA STATE CA ZIP CODE 96021

OFFICE JURISDICTION: State (Complete Part 2.) City County Multi-County: _____ (Name of Multi-County Jurisdiction) _____ (Year of Election)

AGENCY NAME School Board Member Richfield Elementary DISTRICT NUMBER, if applicable. NON-PARTISAN OFFICE

PARTY PREFERENCE: (Check one box, if applicable.) PRIMARY / GENERAL SPECIAL / RLNOFF

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

(Check one box)

- I accept the voluntary expenditure ceiling for the election stated above.
- I do not accept the voluntary expenditure ceiling for the election stated above.

NA

Amendment:

- I did not exceed the expenditure ceiling in the primary or special election held on _____ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

- On _____ I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

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

Executed on 8/7/24 (month, day, year) Signature [REDACTED]