

Officeholder and Candidate  
Campaign Statement –  
Short Form

Date of election if applicable:  
(Month, Day, Year)

11 / 5 / 2024

☐ Amendment (Explain Below)

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JUL 18 2024	For Official Use Only
TEHAMA COUNTY ELECTIONS	

1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Hubert Wendell Lower

STREET ADDRESS

CITY STATE ZIP CODE

Orland CA 95963

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Board of Directors

JURISDICTION (LOCATION)

County of Tehama

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 \$500 in contributions 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 California that the information provided is true and correct.

Executed on 7-18-24 DATE

CANDIDATE

# Candidate Intention Statement

Check One: ☒ Initial ☐ Amendment  
(Explain)

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FORM

501

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TEHAMA COUNTY ELECTIONS

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial)

Hubert Wendell Lower

DAYTIME TELEPHONE NUMBER

FAX NUMBER (optional)

EMAIL (optional)

STREET ADDRESS

CITY

STATE

ZIP CODE

OFF

CY NAME

DISTRICT NUMBER, if applicable.

☐ NON-PARTISAN OFFICE

Board of Director Capay Fire Protection

OFFICE JURISDICTION

District

PARTY PREFERENCE:

(Check one box, if applicable.)

☐ State (Complete Part 2.)

☐ City ☐ County

☒ Multi-County:

Tehama / Glenn

(Name of Multi-County Jurisdiction)

2024

(Year of Election)

☒ PRIMARY / GENERAL

☐ SPECIAL / RUNOFF

## 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.

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 information provided is true and correct.

Executed on 7-18-24  
(month, day, year)

Signature \_\_\_\_\_  
(Candidate)