

**Officeholder and Candidate
Campaign Statement –
Short Form**

Date of election if applicable: (Month, Day, Year) <u>11/8/22</u>	<input type="checkbox"/> Amendment (Explain Below) _____ _____	Date Stamp FILED SENDRY PEREZ, COUNTY CLERK JAN 31 2023 BY [REDACTED] DEPUTY	CALIFORNIA FORM 470 For Official Use Only

1. Statement Covers Calendar Year 20 23.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Douglas McCain Harris

STREET ADDRESS
[REDACTED]

CITY STATE ZIP CODE
Clearlake CA 95422

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
707 350 0656

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Member
Yuba Community College District Board of Trustees

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Yuba City, CA Trustee Area 7

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
<u>Committee to Elect Douglas M. Harris</u> [REDACTED]	<u>Clearlake, CA 95422</u>	<u>Douglas M. Harris</u>

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 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 foregoing is true and correct.

Executed on 1/30/23
DATE

By [REDACTED]