Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. 8MINUTENERGY RENEWABLES LLC PAC 150 POST STREET, SUITE 405 ADDRESS (number and street) (Check if address is changed) SAN FRANCISCO 94108 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS CAMPAIGN@CAMPAIGNLAWYERS.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00632588 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. HAUBENSTOCK, ARTHUR, , , Type or Print Name of Treasurer HAUBENSTOCK, ARTHUR, , , [Electronically Filed] 04 17 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FFO	Form 1 (Revised 02/2009)	Page 2
TYPE O	F COMMITTEE	. ugo =
Candid	ate Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Name of Candidat	e	
Candidat Party Aff		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidat	e [
Party C	committee:	(Danasa ::
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politica	I Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	ındraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
C	ommittees Participating in Joint Fundraiser	
1	L L L L L L L L L L L L L L L L L L L	
2	FEC ID number	
3	FEC ID number	
4		

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FEC Form 1 (Rev		Page 3
Write or Type Committee		
8MINUTENE	ERGY RENEWABLES LLC PAC	
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
NONE	<u> </u>	
Mailing Address		
-		
		1 1
	CITY STA	TE ZIP CODE
_		
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
7. Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of	the person in possession of committee
MIN	ITZER, JONATHAN, , ,	
Full Name	,150 POST STREET, SUITE 405	
Mailing Address	1301 001 311221, 30112 403	
	SAN FRANCISCO CA	94108
Title or Position	CITY STAT	E ZIP CODE
	Telephone number	415 732 7700
	me and address (phone number optional) of the treasurer of the comr (e.g., assistant treasurer).	nittee; and the name and address of
Full Name HAU of Treasurer	JBENSTOCK, ARTHUR, , ,	
Mailing Address	150 POST STREET, SUITE 405	
	SAN FRANCISCO CA	A 94108
TH D W	CITY STAT	E ZIP CODE
Title or Position		415 732 7700
_	Telephone number	

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated	MINTZER, JONATHAN, , ,	
Agent		
Mailing Address	150 POST STREET, SUITE 405	
Ü		
	SAN FRANCISCO CA 94108	
		IP CODE
Title or Position ASSISTANT TI		32 - 7700
		accounts rents
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds, holds boxes or maintains funds.	accounts, rents
safety deposit b	popository, etc.	accounts, rents
safety deposit b	poxes or maintains funds.	decounts, rents
safety deposit b Name of Bank,	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET	decounts, rents
safety deposit b	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET	decounts, rents
safety deposit b Name of Bank,	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET	
safety deposit b Name of Bank,	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET SAN FRANCISCO CA 94108	IP CODE
safety deposit b Name of Bank, Mailing Address	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET SAN FRANCISCO CA 94108	
safety deposit b Name of Bank, Mailing Address	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET SAN FRANCISCO CITY STATE Z	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET SAN FRANCISCO CITY STATE Z Depository, etc.	
safety deposit b Name of Bank, Mailing Address	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET SAN FRANCISCO CITY STATE Z Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET SAN FRANCISCO CITY STATE Z Depository, etc.	
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. WELLS FARGO, N.A. 1 MONTGOMERY STREET SAN FRANCISCO CITY STATE Z Depository, etc.	

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Form/Schedule: F1A Transaction ID:

Non-connected PAC sponsored by 8minutenergy Renewables LLC.

Form/Schedule: Transaction ID: