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Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. 8MINUTE SOLAR POWER 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 ▲ 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 2022 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. Buttgenbach, Thomas, , , Type or Print Name of Treasurer Buttgenbach, Thomas, , , [Electronically Filed] 07 15 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate 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 information below.)	e. (Complete the candidate
Name of Candidate	
Candidate Party Affiliation Office Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized comm	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) x This committee is a separate segregated fund. (Identify connected organization on line	6.) Its connected 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 september committee. (i.e., nonconnected committee)	arate segregated 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution according to the contribution according to the con	ounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, at least one of which is an authorized committee of a federal	-
(j) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, none of which is an authorized committee of a federal candidate.	-
Committees Participating in Joint Fundraiser	
1. , , , , , , , , , , , , , , , , , ,	
	, , , , , , , ,

	FEC Form 1 (Revised 0	(2/2009)		Page 3						
	Write or Type Committee Name	-		<u> </u>						
	8MINUTE SOL	AR POWER LLC PAC								
6.	Name of Any Connected O	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 8MINUTE SOLAR POWER LLC								
										
	Mailing Address	5455 WILSHIRE BOULEVARD		<u>' </u>						
				<u>' </u>						
		LOS ANGELES	CA 90036	3 -						
		CITY ▲	STATE ▲	ZIP CODE ▲						
	Relationship		_							
	Relationship: X Connected	Organization Affiliated Organization Joint	: Fundraising Representative	Leadership PAC Sponso						
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.									
	SANDERS.	, NICHOLAS, , ,								
	Full Name			<u>- </u>						
	Mailing Address	150 POST STREET, SUITE 405		·						
				<u> </u>						
		SAN FRANCISCO	CA 94108	3 - -						
		CITY ▲	STATE ▲	ZIP CODE ▲						
	Title or Position ▼									
	Custodian of Records		ephone number 415 - [732 7700						
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treas assistant treasurer).	surer of the committee; and the	name and address of						
	Full Name BUTTGENE	BACH, THOMAS, , ,								
	of Treasurer									
	Mailing Address	150 POST STREET, SUITE 405								
				<u>' </u>						
		SAN FRANCISCO	CA 94108	3						
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲						
	Treasurer	Tele	ephone number 415 - [732 - 7700						

FEC Form 1	I (Revised 02/	(2009)									Pag	e 4
Full Name of Designated Agent	None, , , ,	,										
Mailing Address	ا											
									Ĺ			
				CITY ▲				STATE 4	\		ZIP COL	DE 🛦
Title or Position	▼											
						Telepho	ne num	ber _				
Banks or Other safety deposit bo			ks or oth	er deposito	ries in wh	ch the co	ommitte	e deposi	ts func	ls, hold	s account	s, rents
Name of Bank, D	Depository, etc											
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Mailing Address		1 MONTGOM	ERY STR	EET								
Walling Address	L											
	l.	SAN FRANCI	SCO.					, CA		94104		
		JANTIKANOI							L	1		
				CITY ▲				STATE 4	\		ZIP COD	DE ▲
Name of Bank, D	Denository etc											
rumo or bank, b	oppository, cto	•										
Mailing Address			1 1 1			1 1 1	1 1	1 1 1	1 1	1 1	1 1 1	.
	- I											
	ı						1		1		1	
	L			CITY A				STATE 4	L		ZIP COD)F A
				CITY A				SIAIE	•		ZIF COL	,

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Form/Schedule: F1A Transaction ID:

Amendment to mark 5(e) as Corporation for the SSF's connected organization.

Form/Schedule: Transaction ID: