Image# 11953280972 PAGE 1/5

STATEMENT OF

FEC FORM 1		ORGANIZA			Mica Llas Only
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	Iffice Use Only
CLEAN EN	NERG'	Y PAC OF IBEI	RDROLA RENE	WABLES	, INC.
		4425 NIW Cough Street			
ADDRESS (number a	nd street)	1125 NW Couch Street			
(Check if address is changed)		Suite 700 Portland	<u> </u>	OR 97	209
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only one e- laine.lambarth@iberdrolare	-mail address)		
COMMITTEE'S WEB	PAGE ADD	RESS (URL)			
(Check if is change					
2. DATE 12		2011			
3. FEC IDENTIFIC	CATION NU	MBER C CC	00422352		
4. IS THIS STATE!	MENT	NEW (N) OR	X AMENDED (A)		
I certify that I have e	examined th	is Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name	of Treasurer	Richard A Glick			
Signature of Treasure	Richard er	A Glick	[Electronically Filed]	Date 12	14 2011
NOTE: Submission of			may subject the person signing the		penalties of 2 U.S.C. §437g.
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

	EEC Ec	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	raye Z
Car	ndidate	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. (Cominformation below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:
		X 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 so committee. (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.)	
Join	t Fund	Iraising 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Title or Position

Г	_		_
ı	EEC Form 1 (Deviced)	22/2000)	Page 3
_	FEC Form 1 (Revised (raye 3
			INIC
_		BY PAC OF IBERDROLA RENEWABLES, I	
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	ip PAC Sponsor
II	BERDROLA RENEW	ABLES 	
	Mailing Address	1125 NW COUCH	
	g		
		PORTLAND OR 97209	. -
		CITY STATE Z	IP CODE
	Deletionship. M. Connector	d Organization	lership PAC Sponsor
	Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	iersnip PAC Sponsor
	books and records. Richard A Full Name Mailing Address	Glick 607 14th Street, N.W. Suite 225 Washington DC 20005	
	Title or Position	CITY STATE Z	IP CODE
		Telephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the namessistant treasurer).	e and address of
	Full Name Richard A of Treasurer	Glick	
	Mailing Address	607 14th Street, N.W. Suite 225	
		Washington DC 20005	-
		CITY STATE Z	IP CODE

Telephone number

	rm 1 (Revised 02/2009)	
Full Name of Designated Agent	Kevin A Lynch	
Mailing Address	1125 NW Couch, Suite 700	
	Portland , OR , 97209	
	CITY STATE	ZIP CODE
Title or Position DIRECTOR GO		
Banks or Other safety deposit bo Name of Bank, I		as accounts, rents
safety deposit bo	Depository, etc. US BANK	as accounts, rents
safety deposit bo	Depository, etc. US BANK 1001 NW 23rd Avenue	as accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. US BANK 1001 NW 23rd Avenue	as accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. US BANK 1001 NW 23rd Avenue	as accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. US BANK 1001 NW 23rd Avenue	ZIP CODE
safety deposit bo Name of Bank, I	Depository, etc. US BANK 1001 NW 23rd Avenue PORTLAND OR 97210 CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. US BANK 1001 NW 23rd Avenue PORTLAND OR 97210 CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. US BANK 1001 NW 23rd Avenue PORTLAND OR 97210 CITY STATE	
Name of Bank, I	Depository, etc. US BANK 1001 NW 23rd Avenue PORTLAND OR 97210 CITY STATE	
Name of Bank, I	Depository, etc. US BANK 1001 NW 23rd Avenue PORTLAND OR 97210 CITY STATE	

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor IBERDROLA USA POLITICAL ACTION COMMITTEE, THE 52 Farm View Drive Mailing Address One Commerce Plaza Suite 1001 New Gloucester ME 04260 **CITY** ZIP CODE STATE 4 Relationship: Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number