

# Limited Liability Company (LLC) Statement of Members

(Government Code Section 84109)

Type or Print in Ink.

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|--|
| <b>Amendment</b><br>Check box if an Amendment<br><br># _____<br>Date qualification threshold met<br>(Month, Day, Year) |
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|------------|
| Date Stamp |
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|                            |
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| <b>CALIFORNIA<br/>FORM</b> |
| For Official Use Only      |

## 1. LLC Information

|   |   |  |                                      |
|---|---|--|--------------------------------------|
| LEGAL NAME OF LIMITED LIABILITY COMPANY:  | NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: | PRINCIPAL/RESPONSIBLE OFFICER PHONE #: | PRINCIPAL/RESPONSIBLE OFFICER EMAIL: |
| LLC STREET ADDRESS:                       | CITY:   | STATE:                                 | ZIP CODE:                            |
| LLC MAILING ADDRESS (IF DIFFERENT):       |   | CITY:                                  | STATE: ZIP CODE:                     |
| NAME OF COMMITTEE:                        | COMMITTEE ID:                                     | COMMITTEE PHONE NUMBER:                | COMMITTEE EMAIL ADDRESS:             |
| COMMITTEE STREET ADDRESS:                 | CITY:   | STATE:                                 | ZIP CODE:                            |
| COMMITTEE MAILING ADDRESS (IF DIFFERENT): |   | CITY:                                  | STATE: ZIP CODE:                     |

## 2. Members (If any members are other LLCs, further disclosure is required in Part 3.)

| FULL NAME | MEMBERSHIP TYPE   | DATE(S) OF CAPITAL CONTRIBUTION<br><small>(ONLY COMPLETE IF MEMBER HAS MET CAPITAL CONTRIBUTION THRESHOLD)</small> | CUMULATIVE CAPITAL CONTRIBUTIONS TO LLC | PERCENTAGE OWNERSHIP INTEREST |
|-----------|---|--|---|-------------------------------|
|           | MEMBERSHIP 10% OR GREATER<br>CAPITAL CONTRIBUTIONS \$10,000 OR MORE |  |   |                               |
|           | MEMBERSHIP 10% OR GREATER<br>CAPITAL CONTRIBUTIONS \$10,000 OR MORE |  |   |                               |
|           | MEMBERSHIP 10% OR GREATER<br>CAPITAL CONTRIBUTIONS \$10,000 OR MORE |  |   |                               |
|           | MEMBERSHIP 10% OR GREATER<br>CAPITAL CONTRIBUTIONS \$10,000 OR MORE |  |   |                               |

## 3. Names of Member LLCs Listed in Part 2

| NAME OF LLC LISTED IN PART 2 | FULL NAMES OF MEMBERS |
|------------------------------|-----------------------|
|                              |                       |
|                              |                       |
|                              |                       |
|                              |                       |

## 4. Verification

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on \_\_\_\_\_ DATE By \_\_\_\_\_ SIGNATURE

Attach additional information on appropriately labeled continuation sheets.