CITIZENS CLEAN ELECTIONS COMMISSION
Independent Expenditure Report
Pursuant to A.R.S. §§16-941(D), 955, -956, and A.A.C. R2-20-109(F)

☐ Amended Report

Name: SOLARCITY CORPORATION

Address: 3055 CLEARVIEW WAY

City: SAN MATEO

State: CA

Zip: 94402

Telephone Number: 1-855-860-7652

Fax Number: 

Name of Authorized Agent: JON WELLINGHOFF

Telephone Number: 1-855-860-7652

E-mail Address: JWELLINGHOFF@SOLARCITY.COM

Authorized Agent Address (if different from above):

<table>
<thead>
<tr>
<th>Date of Expenditure* (i.e. 5/30/2016)</th>
<th>Amount of Expenditure (i.e. $5,000.00)</th>
<th>Candidate Supported /Opposed</th>
<th>Support</th>
<th>Oppose</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/8/2016</td>
<td>$23,690.00</td>
<td>BOB BURNS, BILL MUNDELL, TOM CHABIN</td>
<td>X</td>
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All persons, including corporations, limited liability companies, and labor organizations, are required to file independent expenditure reports under A.R.S. §§ 16-941(D); 955 & Ariz. Admin. Code R2-20-109(F). Please fill out, scan and return to the Arizona Citizens Clean Elections Commission, ccec@azcleanelections.gov.

Forms received within 24 hours of the date of expenditure will be considered timely.

Failure to file the form and submit the information required subjects an entity that makes independent expenditures to penalties under the Clean Elections Act unless the entity receives an exemption from the Commission. Exemption forms are available at www.azcleanelections.gov.

Please contact ccec@azcleanelections.gov or (602) 364-3477 with questions.

*The independent expenditure date is the date when the literature or advertisement is distributed. The independent expenditure may be paid for at a later date as reported on committee campaign finance reports required by A.R.S. §16-915.

I, the undersigned, certify that the above statements are true and accurate to the best of my knowledge and belief:

Signature of Authorized Agent

09/2016
Name: SOLARCITY CORPORATION

Address: 3055 CLEARVIEW WAY
City: SAN MATEO
State: CA
Zip: 94402

Telephone Number: 1-855-860-7652
Fax Number: 

Name of Authorized Agent: JON WELLINGHOFF
Telephone Number: 1-855-860-7652
E-mail Address: JWELLINGHOFF@SOLARCITY.COM

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<tr>
<td>11/03/2016</td>
<td>$28,370.04</td>
<td>BOB BURNS (SUPPORT), BILL MUNDELL (SUPPORT), TOM CHABIN (SUPPORT)</td>
</tr>
</tbody>
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I, the undersigned, certify that the above statements are true and accurate to the best of my knowledge and belief:

[Signature of Authorized Agent]

05/2016
**Name:** 
SOLARCITY CORPORATION

**Address:**
3055 CLEARVIEW WAY

**City:**
SAN MATEO

**State:**
CA

**Zip:**
94402

**Telephone Number:**
1-855-860-7652

**Fax Number:**

**Name of Authorized Agent:**
JON WELLINGHOFF

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</thead>
<tbody>
<tr>
<td>11/02/2016</td>
<td>$6,359.80</td>
<td>BOB BURNS [SUPPORT], BILL MUNDELL [SUPPORT], TOM CHABIN [SUPPORT]</td>
</tr>
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I, the undersigned, certify that the above statements are true and accurate to the best of my knowledge and belief:

[Signature of Authorized Agent]

05/20/16
Name: SOLARCITY CORPORATION

Address: 3055 CLEARVIEW WAY

City: SAN MATEO

State: CA

Zip: 94402

Telephone Number: 1-855-860-7652

Fax Number: 

Name of Authorized Agent: JON WELLINGHOFF

Telephone Number: 1-855-860-7652

E-mail Address: JWELLINGHOFF@SOLARCITY.COM

Authorized Agent Address (if different from above):

City: 

State: 

Zip: 

Date of Expenditure (i.e. 5/30/2016) | Amount of Expenditure (i.e. $5,000.00) | Candidate Supported /Opposed
---|---|---
10/10/2016 | $6,359.80 | BOB BURNS (SUPPORT), BILL MUNDELL (SUPPORT), TOM CHABIN (SUPPORT)

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05/2016