SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	ddress of Repo	0	2. Date of E Requiring S (Month/Day 08/16/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>CF Finance Acquisition Corp. III</u> [LIDR]						
(Last) BELL MICI 1941 RING (Street) SAN JOSE (City)	WOOD AVE	(Middle) 95131 (Zip)	-		4. Relationship of Rel Issuer (Check all applicable Director X Officer (give title below) Secretary an	e)	10% C Other (below)	wner (specify	Fileo 6. In	d (Month/Day/ dividual or Jo eck Applicable Form filed I Person	int/Group Filing Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				i	2. Amount of Securi Beneficially Owned 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Se (Instr. 4)		curity Conversion or Exercise		sion O cise F	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.
I I-		Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Price of Derivativ Security		Direct (D) or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

No securities are beneficially owned.

/s/ Andrew S. Hughes

09/10/2021

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.