FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashing	ton	D C	20540

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
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

													_					
1. Name and Address of Reporting Person* <u>Capitol Acquisition Founder V, LLC</u>				2. Issuer Name and Ticker or Trading Symbol <u>Capitol Investment Corp. V</u> [CAP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner						
(Last)	•	First) Γ NORTH, SUIT	(Middle) ΓΕ 820		3. Date of Earliest Transaction (Month/Day/Year) 12/04/2020								-	Officer (g	give title	Α	Other (s	
(Street) ARLINGTON VA 22209					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City) (State) (Zip)													. 5	, a byo.	0 1.10.1		g . 0.00	
		1	able I - Non	-Deriv	ative S	Securitie	s Ac	quired,	Disp	posed o	of, or B	enefic	cially	Owned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day.			Execution Date,		Code (li	Transaction Disposed		rities Acquired (A) o ed Of (D) (Instr. 3, 4 a		or and 5)	5. Amount Securities Beneficiall Owned Fo	у	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									v	Amount	(A) or (D)		rice	Reported Transactio (Instr. 3 an	Reported Fransaction(s) Instr. 3 and 4)			Instr. 4)
			Table II - D	Derivat	ive Se	ecurities	Acq	uired, D s, option	ispo	osed of	, or Be	nefici	ally O	wned		,	,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date if any (Month/Day/Year)		te, Transaction Code (Instr.		5. Number of 6 Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amor Securities Under Derivative Secur (Instr. 3 and 4)		unt of	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title		unt or ber of es		Transactio (Instr. 4)			
Warrants	\$11.5	12/04/2020		P		1,942,980		(1)		(1)	Class A Common Stock	1,94	2,980	\$1.5	1,942	,980	I	See footnote ⁽²⁾
		Reporting Person*	<u>V, LLC</u>	,								·		,				
(Last) 1300 17	ГН STREE	(First) Γ NORTH, SUIT	(Middle) ΓΕ 820															
(Street)	GTON	VA	22209			,												
(City)		(State)	(Zip)															
ı	nd Address of 1 L. Dyso	Reporting Person*																
		(First) TESTMENT COLUMN TO NORTH, SUIT																
(Street) ARLING	GTON,	VA	22209															
(O:F-)		(2)																

- 1. The warrants will become exercisable commencing on the later of 12 months from the closing of the Issuer's initial public offering and 30 days after the completion of the Issuer's initial business combination, and will expire five years after the completion of the Issuer's initial business combination or earlier upon redemption or liquidation
- 2. Represents warrants held by Capitol Acquisition Founder V LLC, which is controlled by Mr. Dryden.

/s/ L. Dyson Dryden, Managing Member

12/08/2020

/s/ L. Dyson Dryden

12/08/2020

** Signature of Reporting Person

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 4 (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.