FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 A	Address of Rep bert Guy	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 03/16/2022  3. Issuer Name and Ticker or Trading Symbol  CF Acquisition Corp. VIII [ CFFE ]								
(Last) (First) (Middle) C/O CF ACQUISITION CORP. VIII 110 EAST 59TH STREET					Issuer	ationship of Reporting k all applicable) Director Officer (give	Person(s) to  10% Owner Other (specify		If Amendment, Date of Original Filed (Month/Day/Year)      Individual or Joint/Group Filing (Check Applicable Line)		
(Street) NEW YORK (City)	NY (State)	10022 (Zip)	-			title below)	below)		X	Form filed I Person	by One Reporting
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Sec				unt of Securities cially Owned (Instr.			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 Sec (Instr. 4)				ise Form:		6. Nature of Indirect Beneficial Ownership (Instr.
I -			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Amount or Security Number of		or Indirect (I) (Instr. 5)	5)

**Explanation of Responses:** 

No securities are beneficially owned.

<u>/s/ Robert Sharp</u>

03/16/2022

\*\* Signature of Reporting

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.