#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# **TEMPORARY** FORM D

OMB APPROVAL OMB Number: 3235-0076 Expires: November 30, 2008 Estimated average burden hours per response. . ..... . 4.00

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

UNIFORMILIMITED OFFERING EXEMPTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)
Filing Under (Check box(es) that apply):
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  Telephone Number (Including Area Code)
Brief Description of Business
Type of Business Organization  corporation limited partnership, already formed business trust limited partnership, to be formed  other (please specify):
Month Year  Actual or Estimated Date of Incorporation or Organization:
GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.  Federal:
Who Must File: All issuers making an offering of securities in reliance on an exception under Regulation D or Section 4(6), 17 CFR 230.501 et

seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA

- $2. \quad \text{ Enter the information requested for the following:} \\$ 
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
	(Use blank	sheet, or copy and use	additional copies of this	sheet, as necessar	ry)

					B. II	NFORMAT	ION ABOU	T OFFER	ING				
1	TT .1		1 1 .1		. 1.	11 .	11. 1.		.1			Yes	No
1.	Has the	issuer sole	d, or does th										
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?													
2.											Yes	No	
3.	Does th	e offering	permit join	t ownershi	p of a sing	le unit?							
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
					e informati	on for that	broker or	dealer only	· .				
Ful	l Name (	Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	lumber and	l Street, Ci	ity, State, Z	Zip Code)						
Na	me of As	sociated B	roker or De	aler									
Sta	tes in Wh	nich Persor	n Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individual	States)								1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	Н	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (	Last name	first, if indi	ividual)									
Bus	siness or	Residence	e Address (N	Number an	d Street, C	City, State, Z	Zip Code)						
— Na	me of As	sociated B	roker or De	aler									
Sta	tes in Wh	nich Person	n Listed Has	Solicited	or Intends	to Solicit	Purchasars						
Sta			s" or check									□ Al	1 States
	AL IL	AK IN	AZ IA	AR KS	CA KY	LA	ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (	Last name	first, if indi	ividual)									
Bus	siness or	Residence	e Address (N	Number an	d Street, C	City, State, 2	Zip Code)						
	C A	' . I.D.	1 D	.1									
Naı	me of As:	sociated B	roker or De	aler									
Sta	tes in Wh	nich Persor	n Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individual	States)								1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	Н	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u> </u>	\$
	Equity	<u> </u>	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	;	\$
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors		_ \$
	Total (for filings under Rule 504 only)		_ \$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amoun
	Rule 505	•	¢
	Regulation A		
	Rule 504		_
	Total		_
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		_ 9
	Transfer Agent's Fees	Г	\$
	Printing and Engraving Costs	_	] \$
	Legal Fees	_	] \$
	Accounting Fees	_	] \$ ] \$
	Engineering Fees	_	] \$
		_	
	Sales Commissions (specify finders' fees separately)	_	] \$
	Other Expenses (identify)		
	Total	Г	¬ \$

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF	F PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."			\$
5.	Indicate below the amount of the adjusted gross preeach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gros	d	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$	\$
	Purchase of real estate		\$	\$
	Purchase, rental or leasing and installation of mad and equipment		<u>\$</u>	\$
	Construction or leasing of plant buildings and fac	ilities	\$	\$
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	□\$	□\$
	Repayment of indebtedness		<del></del>	<del></del>
	Working capital			
	Other (specify):			
			Ψ	- □ Ψ
			\$	\$
	Column Totals		\$	. [ \$
	Total Payments Listed (column totals added)		<u></u> \$	<del></del>
		D. FEDERAL SIGNATURE		
sig the	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commired investor pursuant to paragraph (b)(2) of	ission, upon writte Rule 502.	n request of its staff
Iss	uer (Print or Type)	Signature	Date	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		

		E. STATE SIGNATURE								
1.	Is any party described in 17 CFR 230.262 proprovisions of such rule?	Yes	No							
	See	Appendix, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	ner has read this notification and knows the conte thorized person.	nts to be true and has duly caused this notice to be	e signed on its behalf by the	undersigned						
Issuer (	Print or Type)	Signature	Date							
Name (	Print or Type)	Title (Print or Type)								
		l								

# Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX 2 3 4 1 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of **Non-Accredited** Accredited State Yes No **Investors Amount Investors Amount** Yes No AL ΑK AZAR CA CO CTDE DC FLGA HI ID ILIN ΙA KS KY LA ME MD MAMIMNMS

APPENDIX										
1	Intendation to non-a	1 to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
MT										
NE										
NV										
NH										
NJ										
NM										
NY										
NC										
ND										
ОН										
OK										
OR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										

	APPENDIX									
1	1 2 3 4						5			
								ification		
Intend to sell Type of security and aggregate							(if yes,	ate ULOE attach		
to non-accredited offering price			Type of investor and				explanation of			
	investors in State offered in state (Part B-Item 1) (Part C-Item 1)			amount purchased in State (Part C-Item 2)				waiver granted) (Part E-Item 1)		
	(Falt B	-1tem 1)	(Fart C-Item 1)	Name have of	,			(Fait E-	Titelli 1)	
				Number of Accredited		Number of Non-Accredited				
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
WY										
PR										