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SEC 1972 (6-02) Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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 state exemption unless such exemption is predicated on the filing of a federal notice.

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

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response... 1



FORM D

PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

| SEC USE ONLY | | | | | | | | | | |
|---------------|---------------|--------|--|--|--|--|--|--|--|--|
| Prefix | Prefix Serial | | | | | | | | | |
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| | AUG 0 7 2002 |
|---|--------------------------|
| Name of Offering ([] check if this is an amendment and name has changed, and indicate changed are preferred. | e.) THOMSON FINANCIAL |
| Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [x] Rule 506 [] Section 4(6 |) []ULOE |
| Type of Filing: [x] New Filing [] Amendment | |
| A. BASIC IDENTIFICATION DATA | |
| Enter the information requested about the issuer | |
| Name of Issuer ([] check if this is an amendment and name has changed, and indiciate changed the Electro-Lock Technologies, Inc. | e.) |
| | one Number |
| (Including Area Code) 19762 MacArthur Boulevard, #323, Irvine, CA, 92612 (949) |) 724-8883 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telep (Including Area Code) (if different from Executive Offices) | hone Number |

Brief Description of Business Electronic Components

9

| Type of Business Organ | nization |
|---|--|
| ky corporation | [] limited partnership, already formed [] other (please specify): |
| [] business trust | [] limited partnership, to be formed |
| | Month Year |
| Actual or Estimated Date | e of Incorporation or Organization: [D]8] [99] [X] Actual [] Estimated |
| Jurisdiction of Incorpora | tion or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [C] [A] |
| GENERAL INSTRUCTION | DNS |
| Federal: | |
| | rs making an offering of securities in reliance on an exemption under Regulation D or 0.501 et seq. or 15 U.S.C. 77d(6). |
| deemed filed with the U.S the SEC at the address of | ust be filed no later than 15 days after the first sale of securities in the offering. A notice is S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by given below or, if received at that address after the date on which it is due, on the date it ates registered or certified mail to that address. |
| Where to File: U.S. Secu | rities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. |
| | 5) copies of this notice must be filed with the SEC, one of which must be manually signed. signed must be photocopies of manually signed copy or bear typed or printed signatures. |
| of the issuer and offering | new filing must contain all information requested. Amendments need only report the name , any changes thereto, the information requested in Part C, and any material changes viously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC |
| Filing Fee: There is no fe | deral filing fee. |
| State: | |
| securities in those states file a separate notice with state requires the payme shall accompany this for | I to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must have becurities Administrator in each state where sales are to be, or have been made. If a cent of a fee as a precondition to the claim for the exemption, a fee in the proper amount m. This notice shall be filed in the appropriate states in accordance with state law. The constitutes a part of this notice and must be completed. |
| | |
| | A. BASIC IDENTIFICATION DATA |
| 2. Enter the information r | requested for the following: |
| Each beneficial of a class of equit Each executive of partnership issue | the issuer, if the issuer has been organized within the past five years; wner having the power to vote or dispose, or direct the vote or disposition of, 10% or more by securities of the issuer; fficer and director of corporate issuers and of corporate general and managing partners of rs; and I managing partnership issuers. |
| Check Box(es) [X] F that Apply: | Promoter [¾] Beneficial [¾] Executive [¾] Director [] General and/or Managing Partner |

| Business or Resid | dence Address (Nu | nber and Stree | et, City, State, Zip Cod | e) | |
|---------------------------------|------------------------------------|---------------------|--|---|---------------------------------------|
| 19762 MacA | <u>rthur Boulev</u> | ard. #323 | . Irvine, Cal | ifornia, 92 | 612 |
| Check Box(es) that Apply: | [x] Promoter [] | Beneficial Owner | [] Executive Officer | [] Director [] | General and/or Managing Partner |
| Full Name (Last n | ame first, If individu David J. | al) | | | : |
| Business or Resk | dence Address (Nur | nber and Stree | et, City, State, Zip Cod | e) | |
| 2635 Camin | o Del Rio S. | , Ste. 10 | 9, San Diego, | California | , 92108 |
| Check Box(es) that Apply: | [X] Promoter [X] | Beneficial Owner | [X] Executive Officer | [x] Director [] | General and/or Managing Partner |
| Full Name (Last n Block, Gre | ame first, if Individu | al) | | | |
| Business or Resid | dence Address (Nur | nber and Stree | et, City, State, Zip Cod | е) | |
| _225_West_F | laza Street. | _#105,_Sc | olana Beach, C | alifornia, | 92075 |
| Check Box(es) that Apply: | [] Promoter [] | Beneficial Owner | [X] Executive Officer | [x] Director [] | General and/or Managing Partner |
| Full Name (Last n | name first, if individu | | | · · · · · · · · · · · · · · · · · · · | |
| Purves, St | • | aij | | | |
| Business or Resid | dence Address (Nu | | et, City, State, Zip Cod 3, Irvine, Cal | | 612 |
| Check Box(es) that Apply: | [] Promoter [] | Beneficial Owner | [x] Executive Officer | [] Director [] | General and/or Managing Partner |
| Full Name (Last r | name first, if individ uk | ial) | | | |
| Business or Resid | dence Address (Nu | mber and Stree | et, City, State, Zip Cod | e) | |
| 670 West | 17th Street. | #64. Cos | ta Mesa. Cali | ornia, 926 | 27 |
| Check Box(es) that Apply: | [] Promoter [] | | [] Executive Officer | [] Director [] | |
| Full Name (Last r | name first, if individu | ıal) | | | |
| Business or Resi | dence Address (Nu | mber and Stree | et, City, State, Zip Coo | le) | |
| Check Box(es) that Apply: | [] Promoter [] | Beneficial Owner | [] Executive Officer | [] Director [] | General and/or Managing Partner |
| Full Name (Last | name first, if individe | ual) | | | |

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| | · | | | В. | . INFOR | MATION | ABOUT | OFFER | ING | | | |
| | the issu | ier sold, | or does | the issu | uer inten | d to sell, | to non-a | ccredite | d investo | ors in this | Ye (X | s No |
| | | | Answ | er also i | in Appen | dix, Colu | umn 2, if | filing und | der ULOI | Ε. | | |
| 2. Wha | at is the | minimur | n investi | nent tha | at will be | accepte | d from a | ny individ | iual? | | | 0,000 |
| 3. Doe | s the off | fering pe | ermit join | t owner | ship of a | single u | nit? | | | ••••• | Ye ز X | s No |
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| | C. (| OFFERI | NG PRIC | CE, NUN | BER O | F INVES | TORS, E | XPENS | ES AND | USE OF | PROCE | EDS |
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| 2. Ente | er the nu | mber of | accredit | ted and | ກດກ-ຂດ^ | ∡ dited in | nvestors | who | | | | |
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| iollar a | amount | of their p | oriave pourchase | es on the | e total lin | ics and es. Ente | r "0" if an | swer is | | | | |
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| 3. If th | is filina i | s for an | offerina | under R | ule 504 | or <u>505,</u> e | enter the | | | | | |
| inform | ation red | quested | for all se | curities | sold by | the issue | er, to date | e, in | | | | |
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| ~ | ype of o | ffering | | | | | | | Type of | Security | Dollar Sold | Amount |
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| Rule 504 | <u>\$</u> |
| Total | 3 |
| 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 Issuer. 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. | |
| Transfer Agent's Fees | []\$ |
| Printing and Engraving Costs | |
| Legal Fees | |
| Accounting Fees | |
| Engineering Fees | |
| Sales Commissions (specify finders' fees separately) | |
| Other Expenses (identify) | |
| Other Expenses (identify) | [x] \$8,000 |
| b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question difference is the "adjusted gross proceeds to the issuer." 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b | n 4.a. This \$ 32,000 |
| above. | |
| | Payments to Officers, Directors, & Payments To Affiliates Others |
| Salaries and fees | M \$ 107,500 M \$ 41,200 |
| Purchase of real estate | []\$ |
| Purchase, rental or leasing and installation of machinery and equipment | []\$ <u>N</u> \$ <u>187,500</u> |
| Construction or leasing of plant buildings and facilities | []\$[]\$ |
| Acquisition of other businesses (including the value of | |
| securities involved in this offering that may be used in exchange for the assets or securities of another issuer | []\$[]\$ |
| pursuant to a merger) | |
| Repayment of indebtedness | []\$[]\$ |
| Working capital | []\$ <u>\</u> \\$ 655,800 |
| Other (specify): | []\$[]\$ |
| | []\$[]\$ |
| Column Totals | []\$[]\$ |
| Total Payments Listed (column totals added) | [x] \$ <u>992</u> ,000 |
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D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

| · | |
|---------------------------------|---------------------------------|
| Issuer (Print or Type) | Signature |
| Electro-Lock Technologies, Inc. | 07/25/02 |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) |
| Michael Gorman | Chief Executive Officer |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

- 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.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)

Electro-Lock Technologies, Inc.

Name of Signer (Print or Type)

Michael Gorman

Signature

07/25/02

Title (Print or Type)

Chief Executive Officer

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.

| | 1 2 3 4 5 | | | | | | | | | |
|----------|---------------------|--|--|--|------------------------------|--|--|-----------------|--------------|--|
| 1 | I Intend to sell 1: | | Type of security and aggregate offering price offered in state (Part C-Item 1) | aı | Type of mount pu (Part | Disqualification under State ULOE (if yes, attach explanation of waiver granted) | | | | |
| | (Part b-II | em i) | (Part C-item 1) | | | C-item 2) | | (Part E-Item 1) | | |
| | | | | Number of Accredited | | Number of Non-Accredited | | | | |
| State | Yes | No. | | Investors | Amount | | Amount | Yes | No | |
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