### FORM D



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

### FORM D

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

OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ge burden
hours per respo	nse 16.00

SEC US	E ONLY
Prefix (	Serial
DATE RE	CEIVED
1	

UNIFORM LIMITED 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): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE  Type of Filing: New Filing Amendment
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.)
D.A.M.E.S. PRODUCTIONS, LLC
Address of Evecutive Offices (Number and Street City State Zin Code)   Telephone Nithhis (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)
(if different from Executive Offices)
Brief Description of Business
ANIMATION PRODUCTION AND DISTRIBUTION (228993
Type of Business Organization    corporation
business trust   limited partnership, to be formed   LIMITED LIABILITY COMPANDOCESSE
Month Year PROCESSE
Actual or Estimated Date of Incorporation or Organization: DZ D3 Natual Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)  CA  APR 25 2003
GENERAL INSTRUCTIONS YHOMSON
FINANCIAL  Who Must File: All issuers making an offering of securities in reliance on an exemption 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, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies 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.

Failure to file notice in the appropriate states will not result in a loss of the lederal 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.

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2. Enter the information re	•	Ū				
•	•	suer has been organized w				
<ul> <li>Each beneficial ow</li> </ul>	mer having the pow	er to vote or dispose, or di	ect the vote or disposition	of, 10% or more	of a class of equity securities of the	issue
<ul> <li>Each executive of</li> </ul>	ficer and director o	f corporate issuers and of	corporate general and mar	naging partners o	of partnership issuers; and	
<ul> <li>Each general and i</li> </ul>	managing partner o	f partnership issuers.				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	<del>, , , , , , , , , , , , , , , , , , , </del>
Full Name (Last name first, SEWELL,		MAURICE				
Business or Residence Addre	ess (Number and NTVRA BL	Street, City, State, Zip Co VD, SULTE I	ode) 29, Los ANG	ELES,	CA 91604	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first,	if individual)					· · · · · · · · · · · · · · · · · · ·
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	<del></del>
Full Name (Last name first,	if individual)					
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	. =
Full Name (Last name first,	f individual)					
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	de)	teri ego, ye - ego ego		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first,	if individual)					
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	de)	***************************************		·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	<del>- , ,</del> .
Full Name (Last name first,	f individual)					
Business or Residence Addre	ess (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,	f individual)					

Business or Residence Address (Number and Street, City, State, Zip Code)

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1.	Has the	issuer sold	l, or does th	ne issuer ir	ntend to se	II, to non-a	ccredited i	nvestors in	this offer	ing?	*************	Yes √	No
	Answer also in Appendix, Column 2, if filing under ULOE.											CEL	
2.												0ط ۽	l
3.												Yes पि	No
4.			ion request									*****	L
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	or states	, list the na	me of the b	roker or de	aler. If mo	re than five	e (5) persor	is to be list	ed are asso				
Ful			first, if indi		. mioman	on for that	DIOKEI OI	icarci only	•				
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Bu	siness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	(ip Code)						
Na	me of Ass	ociated Br	oker or Dea	aler					<u> </u>				
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					<del></del> .	
	(Check	"All States	" or check	individual	States)	•••••••••	***************************************		<b>,</b>		•	☐ A1	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	NE NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI)	WY	PR
Ful	Il Name (I	ast name	first, if indi	ividual)			<del>-</del>	······································	·				<del> ,</del>
Bu	siness or	Pesidence	Address (N	Jumber an	d Street C	ity State	Zin Code)	-,			·		
					a street, c		enp code)		,	<del> </del>		<u></u>	
Naı	me of Ass	ociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				·		
	(Check	"All States	or check	individual	States)	****************	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***********		☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	H	ID
		IN NE	IA NV	KS	KY DVD	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	SC	SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful	l Name (I	ast name	first, if indi	(vidual)		**************************************				,			
		···								····			
Bu	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	me of Ass	ociated Br	oker or De	aler				*****		······································			<u></u>
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers	······································					
			" or check						••••••			☐ AI	States
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	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

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## 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 \( \) and indicate in the columns below the amounts of the securities offered for exchange and				
	already exchanged.	Aggregate		Amo	ount Already
	Type of Security	Offering Pri	ce		Sold
	Debt	NONE	<u>0</u> \$	_/	WONE O
	Equity	5 <u>28,800,00</u>	<u></u> \$		٥
	Common Preferred	, ,			
	Convertible Securities (including warrants)	sO	\$		Ó
	Partnership Interests	§	\$		Ó
	Other (Specify)	s O	\$		0
	Total	Α.	\$		Ü
	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			Aggregate llar Amount
		Investors		of	Purchases
	Accredited Investors	0	:	S	0
	Non-accredited Investors	∂		\$	0
	Total (for filings under Rule 504 only)	<u> </u>	:	\$	0
	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.				
	True of Officials	Type of		Do	llar Amount Sold
	Type of Offering	Security		•	5010
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$	
	Total		_	<u>-</u> _	
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.				
	Transfer Agent's Fees	•••••	<b>V</b> \$		<u>0</u>
	Printing and Engraving Costs	•••••	<b>₩</b> \$	20	,000
	Legal Fees		<b></b> \$	50	0,000
	Accounting Fees	***********	<b>S</b>	15	, 00°
	Engineering Fees		<b>V</b> \$		<b>)</b>
	Sales Commissions (specify finders' fees separately)		□ s	90	), &10
	Other Expenses (identify) TELEPHONE, FAX, TRAVEL		□ s	2	5,000
	Total		☐ <b>S</b>	20	0,000

	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 4.a. This difference is the "adjusted gross proceeds to the issuer."			s <u>28,</u>	600,000
5.	Indicate below the amount of the adjusted gross proceed 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 above.				
		O: Dire	ments to fficers, ectors, & fliates		yments to Others
	Salaries and fees	7\$	0	□\$_	Ö
	Purchase of real estate			☐ \$_	
	Purchase, rental or leasing and installation of machinery and equipment	_ 7\$	O	_ s_	
	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)	_ ¬s	0	 □\$_	0
	Repayment of indebtedness	_		☐ \$_	0
	Working capital				0
	Other (specify):	_	-	s	
		]\$		□\$_	
	Column Totals	7\$ <u>7</u> 5	,000,000	_ \$_	· · · · · · · · · · · · · · · · · · ·
	Total Payments Listed (column totals added)		U's 2	5,000	000
	D. FEDERAL SIGNATURE				
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of F	is filed	pon writter	le 505, ti n reques	he followin It of its staf

Issuer (Print or Type)	Signature 0.0	Date
D.A.M.E.S. PRODUCTIONS, UC	Davisor Gh Lew Cl	411-03
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
DARIAN M. SEWELL	EXECUTIVE DIRECTOR	

- ATTENTION -

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

		E. STATE SIGNATURE	A CONTROL OF THE CONT
1.	Is any party described in 17 CFR 230.262 p. provisions of such rule?		
	See	Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to D (17 CFR 239.500) at such times as require	•	in which this notice is filed a notice on Forn
3.	The undersigned issuer hereby undertakes to issuer to offerees.	o furnish to the state administrators, upon wi	ritten request, information furnished by the
4.	The undersigned issuer represents that the is limited Offering Exemption (ULOE) of the s of this exemption has the burden of establish	tate in which this notice is filed and understa	nds that the issuer claiming the availability
	er has read this notification and knows the cont horized person.	ents to be true and has duly caused this notice	to be signed on its behalf by the undersigned
Issuer ()	Print or Type)	Signature	Date
D.A.M	.E.S. PRODUCTIONS, LLC	Delige History	4-17-03
Name (I	Print or Type)	Title (Print or Type)	
DAF	RIAN M. SEWELL	EXECUTIVE DIRECTOR	

#### 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.

					A.P	PENDIX				
Tare	Intend to non-a	to sell ccredited s in State -Item 1)	Type of and a offering	of security aggregate ag price I in state I-Item 1)		amount pu	f investor and rchased in State 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
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MS			11	ιį	0	\$0	0	\$0		V

					APP	ENDX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)			f security ggregate g price in state		amount pu	f investor and rchased in State C-Item 2)		under Sta (if yes, explana	ation of granted)
State	Yes	No			Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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WI	$\checkmark$		COMMON	1428.8m	Ø	\$ D	Ò	\$0		$\sqrt{}$

1	to non-a investor	2 I to sell ccredited s in State	Type of security and aggregate offering price offered in state	дРР	Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No	(Part C-Item 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY	1		COMMON \$128.8m	0	\$0	0	#0				
PR			COMMON \$28.8m	0	\$0	ව	0 13				