FORM D

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

OMB APPROVAL
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Estimated average burden
hours per response.....16.00



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

SEC USE ONLY					
Prefix	Serial				
'					
DA	E RECEIVED				

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Name of Offering (check	if this is an amendment and name has changed, and indicate change.)	· · · · · · · · · · · · · · · · · · ·
2003 Stock, Te	rm Notes, Cash and Exchange Offer	
Filing Under (Check box(es) tha	t apply): Rule 504 Rule 505 Rule 506 Section 4(6)	☐ ULOE
Type of Filing: New Fili		
.,,,,		AG - TEGE (T)
	A. BASIC IDENTIFICATION DATA	
1. Enter the information reque	ested about the issuer	KK MAY OF AUG 2/
Name of Issuer (check if the	his is an amendment and name has changed, and indicate change.)	Mass and a second
MPSC,	Inc.	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
287 East Sixth St	reet, Suite 675, St. Paul, MN 55101	(651) 222-3647
Address of Principal Business O	perations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Off	•	, , , , , , , , , , , , , , , , , , , ,
Brief Description of Business	The Company provides the service of its	proprietary "Rinsing & Chill
	Technology" to client beef slaughter pla	
Type of Business Organization		PROCE SSE
Corporation	limited partnership, already formed other (p	please specify):
business trust	limited partnership, to be formed	MAY 0 6 2003
		/ MAI V 2003
	Month Year	TUAN 88000
Actual or Estimated Date of Inco		mated / THOMSON FINANCIAL
Jurisdiction of Incorporation or	Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
	CN for Canada; FN for other foreign jurisdiction)	MN

GENERAL INSTRUCTIONS

Federal:

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.

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.

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2. 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 o	of, 10%	or more of	a clas	s of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporate general and management	aging p	artners of	artne	rship 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, if individual)			***************************************	and the second s
Loos, August W.				
Business or Residence Address (Number and Street, City, State, Zip Code) 3111 Green Dolphin Lane, Naples, FL 34102				
	E-1 F	Discount of		C
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer	<u>X</u>] [Director		General and/or Managing Partner
Full Name (Last name first, if individual)			•	
Ide, J. Warner Business or Residence Address (Number and Street, City, State, Zip Code)		 		
287 East Sixth Street, Suite 675, St. Paul, MN 55101 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer		Director	$\overline{}$	General and/or
Enter Box(es) man Apprys.	, LXI	31100101		Managing Partner
Full Name (Last name first, if individual)				
Lund III, Russell T.				
Business or Residence Address (Number and Street, City, State, Zip Code)				
4100 West 50th Street, Edina, MN 55424	<u>.</u>			
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Z I	Director		General and/or Managing Partner
Full Name (Last name first, if individual)		···		
Packard, Dwight F.				
Business or Residence Address (Number and Street, City, State, Zip Code)				
18 Red Bridge Road, Sioux City, IA 51104	= 1	<u> </u>		
Check Box(es) that Apply: Promoter \overline{\overline{\overline{\chi}}} Beneficial Owner \overline{\overline{\chi}} Executive Officer	K] I	Director		General and/or Managing Partner
Full Name (Last name first, if individual)				
Loos, John				
Business or Residence Address (Number and Street, City, State, Zip Code)				
445 7th Ave. N., Naples, FL 34102				
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)				
Bernhardt, Tammy				
Business or Residence Address (Number and Street, City, State, Zip Code)				
6225 Willow Drive, Corcoran, MN 55340				
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	∐ ı	Director		General and/or Managing Partner
Full Name (Last name first, if individual)				
Lawler Jr., Casimir				
Business or Residence Address (Number and Street, City, State, Zip Code)				
287 East Sixth Street, Suite 675, St. Paul, MN 55101	1			
(Use blank sheet, or copy and use additional copies of this sh	neet, as	necessary)		

					B. II	VFORMAT	ON ABOU	T OFFERI	ŊĞ:		71. 1 . A	102 1	Harbert Levy V.
1.	Has the	issuer sold	l, or does th	ne issuer ir	itend to sel	ll to non-a	ccredited in	nvestors in	this offeri	in o?		Yes	No
1.	mas me	issuer sore	, 01 4003 11		•	Appendix,					••••••	ы	L
2.	What is	the minim	um investm			-					••••••	\$_No	ne
3.	Does the	o offering	permit join	ownerchi	n of a sina	le unit?						Yes	No
<i>3</i> .			ion request									**	Ц
	commiss If a person or states	sion or sim on to be lis , list the na	ilar remune ted is an ass ume of the b you may so	ration for s sociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state		
Ful	l Name (I	ast name	first, if indi	vidual)									
Bu	siness or l	Residence	Address (N	umber and	N/. I Street, Ci		in Code)	<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	1 States
	AL	ĀK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN 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	ll Name (I	Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	me of Ass	ociated Br	oker or De	aler		····					· 		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)							☐ Al	1 States
	AL	AK	ΑŽ	AR	CA	CO	CT	DE	DC	FL	GA	HI	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
Ful	ll Name (1	Last name	first, if ind	ividual)									
Bu	siness or	Residence	: Address (1	Number an	d Street, C	lity, State, I	Zip Code)						
Na	me of Ass	ociated Bi	oker or De	aler									
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	••••••						☐ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KŸ 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

	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	Amount Already
	Type of Security	Offering Price	
	Debt		
	Equity	10,466,	<u>59</u> 3 \$ 0
	🔀 Common 🔲 Preferred		
	Convertible Securities (including warrants)	<u> 0</u>	<u> </u>
	Partnership Interests	<u> </u>	<u> </u>
	Other (Specify)	0	<u> </u>
	Total	<u>0</u>	\$_0
	Answer also in Appendix, Column 3, if filing under ULOE.		
	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."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	0	<u> </u>
	Non-accredited Investors	0	<u> </u>
	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 Amount Sold
	Rule 505	-	
	Regulation A		\$ N/A
	Rule 504	N/A	
	Total		\$ N/A
1	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		\$N/A
	Printing and Engraving Costs		\$ 2,500
	Legal Fees	.,,,,,,,,,	\$ 25,000
	Accounting Fees		∑ \$ <u>10,000</u>
	Engineering Fees		\$ N/A
	Sales Commissions (specify finders' fees separately)		\$N/A
	Other Expenses (identify)		\$
	Total		\$ 37,500

and total expenses furnished in respons proceeds to the issuer."	ggregate offering price given in response to Part C — e to Part C — Question 4.a. This difference is the "ar	djusted gross	\$ <u>13,829,072</u>
each of the purposes shown. If the a check the box to the left of the estimate	sted gross proceed to the issuer used or proposed to mount for any purpose is not known, furnish an ear. The total of the payments listed must equal the adponse to Part C — Question 4.b above.	estimate and	
	,	Payments to Officers, Directors, & Affiliates	
Salaries and fees		\$	\$
Purchase of real estate	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	\$
Purchase, rental or leasing and instal and equipment	lation of machinery	\$	[]\$
	dings and facilities		-
offering that may be used in exchang	uding the value of securities involved in this ge for the assets or securities of another	— .	— •
			_
			
		\$	\$
Column Totals		\$	🗆 \$
Total Payments Listed (column total	s added)	\$	
	d řederausignature		
gnature constitutes an undertaking by th	signed by the undersigned duly authorized person. e issuer to furnish to the U.S. Securities and Excha any non-accredited investor pursuant to paragrap	ange Commission, upon wri	
ssuer (Print or Type)	Signature	Date	
MPSC. Inc.	Wan h	4/201	103
ame of Signer (Print or Type)	Title of Signer (Print or Type)	7	
J. Warner Ide	President		

- ATTENTION -

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