FORM D

03058273

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 UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response.....16.00



Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Brooke Acceptance Company, LLC/Floating Rate, Asset Backed	Notes. Series 2003-1
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6)	
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
	AFCEIVED CO.
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	(MAY 0 4 2003 >>
Brooke Acceptance Company L L C	1 100000
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
10895 Grandview Dr., St. 250, Overland Park, KS 66210 Address of Principal Business Operations (Number and Street, City, State, Zip Code)	913-661 0123404 (See See See See See See See See See Se
(if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Brooke Acceptance Company L L C is a D	elaware limited liability
company which serves as the special purpose entity owned	•
TANGEBEIGHT OF BROOKE Credit Corporation Ioans a	
	please specify): asset backed notes
business trust limited partnership, to be formed	Limited Liability Company
Month Year	DDACE
Actual or Estimated Date of Incorporation or Organization: Actual Date of Incorporation or Organization or Organization: Actual Date of Incorporation or Organization or O	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	MAY 09
GENERAL INSTRUCTIONS	—————————————————————————————————————
Federal:	THOMS
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be 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. 20	9549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously support 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 ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law this notice and must be completed.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
ATTENTION —	
Failure to file notice in the appropriate states will not result in a loss of the federal e appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

BA

A. BASIC IDENTIFICATION DATA	
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 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, if individual)	
Brooke Credit Corporation	WED CAN
Business or Residence Address (Number and Street, City, State, Zip Code)	ANNY S CARL
10895 Grandview Drive, Suite 250, Overland Park, Kansas 66210	3 MAY 0 7 2002
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer X Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Lowry, Michael	
Business or Residence Address (Number and Street, City, State, Zip Code)	
10895 Grandview Drive, Suite 250, Overland Park, Kansas 66210	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Crouch, Dean	•
Business or Residence Address (Number and Street, City, State, Zip Code)	
10895 Grandview Drive, Suite 250, Overland Park, Kansas 66210	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Figueroa, Orlando	
Business or Residence Address (Number and Street, City, State, Zip Code)	
48 Wall Street, New York, New York 10005	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Oldenburger, Ian	
Business or Residence Address (Number and Street, City, State, Zip Code)	
10895 Grandview Drive, Ste. 250, Overland Park, Kansas 66210	
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 Address (Number and Street, City, State, Zip Code)	
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 Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	
(Use orank sheet, or copy and use additional copies of this sheet, as necessary,	<i>!</i>

Jass the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						В. Г	NFORMAT	ION ABOU	T OFFERI	NG	THE RESERVE TO STREET			
Answer also in Appendix, Column 2, if filling under ULOE. 2. What is the minimum investment that will be accepted from any individual?	1.	Has the	issuer solo	l. or does th	ne issuer in	ntend to sel	l. to non-a	ccredited i	nvestors in	this offeri	ng?			
2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single 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 remnanciation for solicitation of parchasers in connection with sales of recursities 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 (by persons to be listed are associated persons of such a broker or dealer. If more than five (by persons to be listed are associated persons of such a broker or dealer. If more than five (by persons to be listed are associated persons of such a broker or dealer. When the information for that broker or dealer only. Full Name (Last name first, if individual) None————————————————————————————————————	•	1145 1110		, et dets v.							•	•••••		LA.
3. Does the offering permit joint ownership of a single unit?	2.	What is	the minim	um investn					_				\$ <u>15</u>	0,000.00
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 of 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 registered with the SEC and/or with a state of or dealer, you may set forth the information for that broker or dealer each sociated persons of such a broker or dealer registered with the SEC and/or with a state of or dealer, you may set forth the information for that broker or dealer each sociated persons of such a broker or dealer (alternative dealer). Full Name (Last name first, if individual) None—— Sold by Internal Staff Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States All States All States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States	2	Dogath	a offanina	narmit iain	. ovum anahi	n of o oino	la vinit?			•				
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 resistered with the SEC and/or with a state of 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 only. Full Name (Last name first, if individual) None—— Sold by Internal Staff Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) AL AK AZ AK CA CO CT DE DC FL GA HI DD MA MI NEW MISS NOO														K.J
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bus	siness or	Residence	Address (N	umber and				ternal	Staff				
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								p 0000)		:				
(Check "All States" or check individual States)	Nai	ne of Ass	sociated B	oker or De	aler									
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RI SC SD TN TX UT VT VA WA WV WI WY PR		MT	NE		NH	NJ	NM LE	NY VT	NC VA	ND WA	OH WW	OK OVI	OR OV	PA

¥2364		enera eresekener	APAGO JOSES	Vanassa sa
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS		
l.	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		nount Aiready Sold
	Debt\$		\$	
	Equity\$			<u></u>
	Common Preferred			
	Convertible Securities (including warrants)		\$	
	Partnership Interests\$			
	Other (Specify Floating rate, a)ssetbackednotes,Series2003-1\$	13,350.0	100 \$1	3.350.000
	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 ollar Amount of Purchases
	Accredited Investors	19	\$_	13,350,000
	Non-accredited Investors	. 0	_ \$_	0.00
	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	D	Oollar Amount Sold
	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.		(Dept	
	Transfer Agent's Fees		 \$	0.00
	Printing and Engraving Costs		_ _	0.00
	Legal Fees		<u> </u>	0.00_
	Accounting Fees		 \$_	0.00-

0.00

0.00

0.00 *

* The Issuer did not incur any expenses in connection with the issuance and distribution of the securities in this offering. All expenses were incurred by the originator of the loans, Brooke Credit Corporation.

Engineering Fees

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify)

Total

4 of 9

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	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 gros proceeds to the issuer."	3	\$ <u>13,350,000</u>
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used fo 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 gros proceeds to the issuer set forth in response to Part C — Question 4.b above.	i	
	:	Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ <u>0.00</u>
	Purchase of real estate	s	s0.00
	Purchase, rental or leasing and installation of machinery and equipment		
	Construction or leasing of plant buildings and facilities	0.00	0.00
	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)	\$ <u>13,350,0</u>	
	Repayment of indebtedness	□\$ <u>0.00</u>	s0.00
	Working capital		\$ <u>0.00</u>
	Other (specify):	s 0.00	s <u>0.00</u>
		\$0.00	\$ <u>0.00</u>
	Column Totals	\$ <u>13,350,0</u>	0.00 s 0.00
	Total Payments Listed (column totals added)	\$	13,350,000
	D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notion nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Communiformation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ission, upon writte	
Iss	uer (Print or Type)	Date	
B	rooke Acceptance Company L L C	4/23/200	3
Na	me of Signer (Print or Type) Title of Signer (Print or Type)		297
M	ichael Lowry	cesident	·····

ATTENTION -

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

	E. STATE SIGNATURE			
1.	. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?		Yes	No X
	See Appendix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in w D (17 CFR 239.500) at such times as required by state law.	hich this notice is fi	led a not	ice on Form:
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon writte issuer to offerees.	n request, informati	ion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be limited Offering Exemption (ULOE) of the state in which this notice is filed and understands of this exemption has the burden of establishing that these conditions have been satisfied.			
	suer has read this notification and knows the contents to be true and has duly caused this notice to b uthorized person.	e signed on its behal	f by the	undersigned
Issuer ((Print or Type) Signature	Date		
Brook	oke Acceptance Comapny L L C	4/23/20	03	
Name (I	(Print or Type) Title (Print or Type)			
Michae	ael Lowry President	\		

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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		2		3			4		5	
	Intend to sell to non-accredited investors in State (Part B-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)					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		
AL		X		0	_	0					
AK		X		0	-	0	_				
AZ	-	X		0	_	0	_				
AR		X		0	_	0 _	_				
CA	- 1	X		0	_	0	-				
со		X	Asset Backed Notes	2	750,000	0			X		
СТ		Х	Notes	0	-	0	_				
DE		Х		0	_	0	_				
DC ,		X		0							
FL		X		0	_	0	_				
GA		Х		0	_	0	_				
НІ		X		0	_	0					
ID		X		0	-	0	-				
IL		X		0	_	0	-				
IN		Х		0	_	0	-				
IA		X	Asset Backed	3	1,500,00				X		
KS		X	Notes Asset Backed	_	9,450,00		-		X		
KY		X	Notes	0	_	0					
LA							1				
ME		X X		0	_	0	-				
MD		X		0	_	0	_				
MA		X		0							
MI		X		0		0					
MN		X		0	_	0	_				
MS		X		0	_	0					

1	Intend to sell to non-accredited		Type of security and aggregate		T of	4 investor and		under St	lification ate ULOE attach
	investor	rs in State	offering price offered in state (Part C-Item 1)		waiver	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		Х		0	_	0	_		
MT		Х		0	-	0	_		
NE		X	Asset Backe Notes	d 3	,500,000	0			X
NV		X		0	_	0			
NH		X		0		0			
NJ		Х		0	<u>.</u>	0			
NM		X		0	_	0			
NY		X		0_		0			
NC		x		0	-	0	-		
ND		X		0	_	0	_		
ОН		X		0	_	0	-		
OK		Х		0	_	0	_		
OR		Х		0		- 0			
PA		X		0	_	0	_		
RI		Х		0	_	0			
SC		Х		0	_	0	_		
SD		X	Asset Backed	_	150,0		_		Х
TN		_x	Notes	0	_	0	-		
TX		X		0	-	0	_		
UT		Х		0	_	0	_		
VT		X		0	_	0	-		
VA		X		0	_	0	-		
WA	L	Х		0	_	0	_		
WV		Х		0		- 0	_		
WI		х		0	-	0	-		

1	Intend to sell to non-accredited		Type of security and aggregate offering price			4 f investor and		Disqual under Sta (if yes, explana	ite ULO
		investors in State offered in state amount purchased in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2)						waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		· v		0					
PR		X		0		0			