

UNITED STATES ECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

OMB APPROVAL OMB Number: 3235-0076

Expires: May 31, 2002 Estimated average burden hours per response . . . 1.00

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

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Prefix]	Serial
DA	TE RECEIV	ED

Name of Offering (ch	eck if this is an amendme	nt and name has	changed, an	d indicate change.)					
Series D Preferred Stock	Offering		_						
Filing Under (Check box(es) that app	ply):	☐ Rule 505	🛛 Rule	506 Section 4(6)	ULOE				
Type of Filing: \(\bigzim \) New Filing	□Amendment								
	A. BASIC	<u>IDENT</u> IFICATIO	N DATA						
1. Enter the information requested a	bout the issuer								
Name of Issuer (check if this	is an amendment and name	has changed, and in	ndicate chang	e.)					
Accerra Corporation									
Address of Executive Offices	(Number and	Street, City, State,	, Zip Code)	Telephone Number (Inclu	ding Area Code)				
451 Aviation Blvd., Suite	201, Santa Rosa, CA 9540		, • ,	(707) 524-2300	-				
Address of Principal Business Opera	tions (Number and	Street, City, State,	Zip Code)	Telephone Number (Inclu	ding Area Code)				
(if different from Executive Offices)		,,,,	, ,		,				
Brief Description of Business									
Biter Description of Dustriess					BRACECCE				
					AKACESSEI				
Type of Business Organization	·			/	/ 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				
corporation	limited partnership, a	lready formed		1	MAY 14 2003				
			∐ othei	:: limited liability company					
business trust	limited partnership, to				THOMSON				
		Month	Year		FINANCIAL				
Actual or Estimated Date of Incorpor	_		<u>99</u>	⊠Actual	☐ Estimated				
Jurisdiction of Incorporation or Orga	•								
	CN for Canada; FN for other foreign jurisdiction)								

GENERAL INSTRUCTIONS

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 predicated on the filing of a federal notice.



		A. BASIC IDENT	IFICATION DATA		
 Each beneficial owner securities of the issuer 	ssuer, if the isson having the power; and director of	uer has been organized wer to vote or dispose, or corporate issuers and of	-	ition of, 10% o	r more of a class of equity
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if in Clevenger, Richard	dividual)				
Business or Residence Address c/o Accerra Corporat		r and Street, City, State, ion Blvd., Suite 201, Sa			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in Simpson, David	dividual)				
Business or Residence Address c/o Accerra Corporat		r and Street, City, State, ion Blvd., Suite 201, Sa			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in Carrubba, Frank	dividual)				
Business or Residence Address c/o Accerra Corporat	•	r and Street, City, State, on Blvd., Suite 201, Sa	-		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Hakel, Thomas	dividual)				
Business or Residence Address c/o Accerra Corporat		and Street, City, State, on Blvd., Suite 201, Sa			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in Barrett, Daniel	dividual)				
Business or Residence Address c/o Accerra Corporat		and Street, City, State, on Blvd., Suite 201, Sa		<u>.</u>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Santa Barbara Techn					
Business or Residence Address c/o Accerra Corporat	•	and Street, City, State, on Blvd., Suite 201, Sa	• '		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in Laier, Jr., James	dividual)				
Business or Residence Address c/o Accerra Corporat		and Street, City, State, on Blvd., Suite 201, Sa			

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

					B. IN	FORMA	TION AB	OUT OF	FERING					
						·						Y	es	No
1.	Has the iss	suer sold,	or does the	e issuer int	end to sel	l, to non-a	ccredited i	nvestors i	n this offer	ring?]	\boxtimes
				Answe	r also in A	Appendix,	Column 2	if filing u	ınder ULC	E.				
2.	What is th	e minimu	m investm					_				\$	N/A	
	***************************************		in miveban			p							es	No
•	D 4b	· 65			. 6:1									
3.			-		_							[∑	7	لــا
4.	sion or sin to be listed	nilar <i>r</i> emu d is an ass	neration fo ociated pe	or solicitat rson or age	ion of pure ent of a bre	chasers in oker or dea	connectior aler registe	with sale cred with t	s of securi he SEC ar	ties in the	rectly, any offering. If a state or st	f a person ates, 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.													
Ful N/A	l Name (Las	st name fir	st, if indiv	ridual)								<u></u>		
	siness or Re	aidanaa A	ddrana (Niv	mbor and	Street Cit	by State 7	in Coda)							
Dus	smess of Re	sidence A	aaress (141	unber and	Street, Ci	iy, State, Z	ip Code)							
Nar	ne of Assoc	iated Brok	er or Deal	let							**			
Sto	tes in Which	Dorson I	isted Hes	Calicitad a	r Intende	ta Caliait I	Dirohagora							
Sia	Check "A											Г	7 A11	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[I]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	-
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P2	-
	[RI]	[sc]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P]	R]
	l Name (Las	st name fir	st, if indiv	ridual)			***				· · · · · · · · · · · · · · · · · · ·			
N/A														
Bus	siness or Re	sidence A	ddress (Nu	imber and	Street, Cit	ty, State, Z	Cip Code)							
Naı	ne of Assoc	iated Brok	er or Deal	ler										
Stat	tes in Which	n Person L	isted Has	Solicited o	r Intends	to Solicit I	urchasers					***************************************		
	(Check "A	ll States"	or check is	ndividual S	States)] All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[I]	D]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	
	[TM]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P.	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P]	R]
Ful N/A	l Name (Las	st name fir	st, if indiv	vidual)										
Bus	siness or Re	sidence A	ddress (Nu	ımber and	Street, Cit	ty, State, 2	(ip Code)	. ·						
Nar	ne of Assoc	iated Brok	er or Deal	er						· 				
Stat	tes in Which	Person I	isted Has	Solicited o	r Intende	to Solicit I	hitchasers		J					
Ju	Check "A										*************	Г] All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P2	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PI	

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

	C. OFFERING, PRICE, NUMBER OF INVESTORS, EXPENS	SES AND USE OF PRO	CEEDS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if 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	\$	\$
	Equity	\$ 2,000,000.00	\$_1,462,830.00
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ <u>-0-</u>	\$ <u>-</u> 0-
	Partnership Interests	\$ <u>-</u> 0-	
	Other (Specify) Limited Liability Company Membership Interests	\$ <u>-</u> 0-	<u>-0-</u>
	Total	\$ 2,000,000.00	\$ <u>1,462,830.00</u>
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		\$_1,462,830.00
	Non-accredited Investors	-0-	\$0
	Total (for filings under Rule 504 only)	n/a	\$ n/a
	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	n/a	\$n/a
	Regulation A	n/a	\$n/a
	Rule 504	n/a	\$n/a
	Total	n/a	\$n/a
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		S0
	Printing and Engraving Costs		\$0-
	Legal Fees		■ \$ 15,000.00
	Accounting Fees		\$0-
	Engineering Fees		\$ 0-
	Sales Commissions (specify finders' fees separately)		S0-
	Other Expenses (identify) Finders' Fees		S -0-
	Total		⊠\$ 15 000 00

	C. OFFERING, PRICE, NUMBER OF	'INVESTORS, EXPENS	ES AND USE OF PRO	CEEDS
	b. Enter the difference between the aggregate price given Question 1 and total expenses furnished in response to Pardifference is the "adjusted gross proceeds to the issuer."	t C - Question 4.a. This		\$ <u>1,985,000.00</u>
5.	Indicate below the amount of adjusted gross proceeds to the to be used for each of the purposes shown. If the amoun known, furnish an estimate and check the box to the left of of the payments listed must equal the adjusted gross proceed in response to Part C - Question 4.b above.	t for any purpose is not the estimate. The total	Payments To Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		\$ 0	\$ <u>-0-</u>
	Purchase of real estate		\$ 0-	\$0
	Purchase, rental or leasing and installation of machiner	y and equipment	\$0-	\$0
	Construction or leasing of plant buildings and facilities		\$ 0-	\$0
	this offering that may be used in exchange for the asset issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify):		\$0- \$0- \$0- \$0-	\$0
	0.1		□ \$ <u>-0-</u>	
	Column Totals Total Payments Listed (column totals added)		□ \$ <u>-0-</u> □ \$ <u>1.9</u>	\$\frac{1,985,000.00}{085,000.00}
	D. FE	DERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the undersinature constitutes an undertaking by the issuer to furnish to the formation furnished by the issuer to any non-accredited investor	e U.S. Securities and Exch	ange Commission, upon	
Iss	er (Print or Type) Accerra Corporation	gnature Jul 19	U/	Date
Na	me of Signer (Print or Type) Thomas Hakel Ti	tle of Signer (Print or Type Chief Executive O		

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 subjof such rule?	ect to any of the disqualification provisions	Yes No							
	See Appendix, Column 5, for state response.									
2.	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.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	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.									
Iss	uer (Print or Type) Accerra Corporation.	Signature AM MM	Date							
Na	me of Signer (Print or Type) Thomas Hakel	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.

				AI	PPENDIX					
1	Intend to non-a investor	1 to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount p	4 of investor and urchased in State t C-Item 2)		5 Disqualification Under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)		
State	Yes	No	Convertible Note	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ							-1-2		:	
AR										
CA		х	\$1,153,294	12	\$1,153,294	0	0		Х	
со		X	\$25,540	1	\$25,540	0	О		X	
CT		X	\$25,000	1	\$25,000	0	0		Х	
DE										
DC							!			
FL										
GA										
н										
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IN			1							
IA										
KS										
KY								· · · · · · · · · · · · · · · · · · ·		
LA										
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MD										
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MN										
MS										
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				API	PENDIX						
1	Intend to non-a investor	1 to sell accredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount p	4 of investor and urchased in State rt C-Item 2)		Disqual Under St (if yes explan waiver	5 Disqualification Under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)		
State	Yes	No	Convertible Note	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
耴		-			\$						
NE											
NV											
NH											
NJ											
NM											
NY		Х	\$111,321	2	\$111,321	0	0		Х		
NC				L							
ND											
OH											
OK			<u> </u>								
OR		Х	\$147,675	5	\$147,675	0	0		X		
PA											
RI	-										
SC											
SD							·····				
TN											
TX											
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VT											
VA											
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WV											
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PR		<u> </u>									