BECENE!

UNITED STATES

SECUE

RITIES AND EXCHANGE COMMISSION	ON
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 AP	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated averag hours per respo	
SEC USI	E ONLY
Prefix	Serial
DATE RE	CEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series B Preferred Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
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.) Auxora, Inc.	03059522
Address of Executive Offices (Number and Street, City, State, Zip Code) 4750 Littlejohn Street, Baldwin Park, CA 91706	Telephone Number (Including Area Code) (626) 960-1998
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same as above	Telephone Number (Including Area Code)
Brief Description of Business Manufacture of fiber optic filters and related products	
Type of Business Organization Corporation Iimited partnership, already formed Iimited partnership, to be formed Other	PROCESSEI (please specify): AUG 1 9 2003
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estimated FINANCIAL sate:

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.

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 motice.

> 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.

		A.	BASIC IDI	ENTI	FICATION DATA			
Each beneficial ownEach executive office	e issuer, if the issuer ha	as been vote or orate is	dispose, or direct the suers and of corporate	vote	or disposition of, 10%			securities of the issuer; nd
Check Box(es) that Apply:	Promoter		Beneficial Owner	\boxtimes	Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, it	findividual)							
Zhang, Xinxiong								
Business or Residence Addre	ss (Number and Stree	t, City,	State, Zip Code)					
4750 Littlejohn Street, Bald	win Park, CA 9170	6						
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	\boxtimes	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)							
Kim, Michael K.							·	
Business or Residence Addres	,							
1510 Fashion Island Boulev	ard, Suite 100, San N							
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	⊠ ——	Director	 General and/or Managing Partner
Full Name (Last name first, if	(individual)							
Hardwick, David L.								
Business or Residence Addre		-						
20 New England Business C	enter, Andover, MA							
Check Box(es) that Apply:	Promoter	⊠ 	Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if	findividual)							
Contemporary Internationa	il							
Business or Residence Address	,							
Keeling Road, 2nd Sec. No.	77, 5F-6, Taipei, Tai	wan, R	R.O.C.					
Check Box(es) that Apply:	Promoter	⊠ ——	Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if	individual)							
Schenley Enterprise								
Business or Residence Address	,	• • •						
Keeling Road, 2 nd Sec. No. 7	7, 5F-6, Taipei, Taiv							
Check Box(es) that Apply:	Promoter	⊠ 	Beneficial Owner		Executive Officer		Director	 General and/or Managing Partner
Full Name (Last name first, if	•							
Rustic Canyon Ventures, Ll								
Business or Residence Address		-	= '					
1510 Fashion Island Boulev	ard, Suite 100, San N	Mateo,	CA 94404					
Check Box(es) that Apply:	Promoter	⊠ 	Beneficial Owner		Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if	individual)							
Rustic Canyon Advisors Fu								
Business or Residence Address	,	•	•					
1510 Fashion Island Boulev								
	(Use blank	sheet,	or copy and use add	itiona	l copies of this sheet	as ne	cessary)	

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Bo Brustkern				,- <u></u>	
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)			
1510 Fashion Island Boulev	ard, Suite 100, San	Mateo, CA 94404			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer		General and/or Managing Partner
Full Name (Last name first, in	f individual)				
Business or Residence Addre	ess (Number and Stree	et. City. State. Zin Code)			
2425 Olympic Blvd., Suite 6					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Check Box(es) that Appry.	Troinotei	Belleticial Owner	L'Accusive Officer	Director	Managing Partner
Full Name (Last name first, is	f individual)				
Bill Diamond					
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)			
900 E. Hamilton Blvd., Suit	e 100, Campbell, CA	95008			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Grand Pacific Financing Co	orporation				
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)			
1255 Corporate Center Drive	, PH10, Monterey Pa	rk, CA 91754			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and Stree	et, 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, i	f individual)				
Business or Residence Addre	ess (Number and Stree	et, 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, i	f individual)		•		
Business or Residence Addre	ess (Number and Stree	et, 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, in	f individual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			

1.												Yes	No
	Has the	issuer sold,	or does the i	ssuer intend t				_	·				\boxtimes
2	771 '			. d. 4 - 20 1 .				-	under ULOE.			Ф	,
2.	what is	the minimu	m investmen	t that will be	accepted fro	om any indivi	idual?	***************		••••	•••••	\$ Yes	n/a No
3.	Does the	e offering pe	ermit joint ov	vnership of a	single unit?							\boxtimes	
			-	•					indirectly, an				
								~	f a person to b name of the b				
1	han five	e (5) persons							orth the inform				
	lealer or		st, if individu	ıal)				<u></u>	· <u> </u>		<u> </u>		
			.,	 -,									
Busin	ess or R	esidence Ac	ldress (Numl	ber and Stree	t, City, State	, Zip Code)							
Name	of Asso	ociated Brok	er or Dealer					***					
States	in Whic	ch Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers					-	_	
(Ch	eck "Al	Il States" or	check indivi	duals States)			,					□ A	Il States
ΓA	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[I]	_	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
-	-, 1T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[[21]	[OH]	[OK]	[OR]	[PA]
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		ant manua fim	st, if individu	(ler									
Full N	ame (La	ast name m	si, ii iiidividi	iai)									
				ber and Stree	t, City, State	, Zip Code)	V-1811-8V				_		
Busine	ess or R	esidence Ac			t, City, State	, Zip Code)							
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Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	·	\$
Equity	\$2,000,000	\$2,000,000
☐ Common ☐ Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	` \$
Other (Specify)	\$	\$
Total	\$2,000,000	\$ 2,000,000
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."		A
	Number Investors	Aggregate Dollar Amount of Purchase
Accredited investors	6	\$_2,000,000
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.		
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.	T	D. II.
	Type of	Dollar Amount
Type of Offering	Security	Sold
Type of Offering Rule 505	•	Sold \$n/a
	n/a	_
Rule 505	n/a n/a	\$n/a
Rule 505 Regulation A	n/a n/a n/a	\$n/a \$n/a
Rule 505 Regulation A Rule 504	n/a n/a n/a	\$
Rule 505 Regulation A Rule 504 Total 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	n/a n/a n/a n/a	\$n/a \$n/a \$n/a
Regulation A Rule 504 Total 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.	n/a n/a n/a n/a	\$
Rule 505 Regulation A Rule 504 Total 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	n/a n/a n/a n/a	\$
Regulation A Rule 504 Total 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	n/a n/a n/a n/a n/a n/a	\$
Regulation A Rule 504 Total 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	n/a n/a n/a n/a n/a N/a n/a n/a	\$
Rule 505 Regulation A Rule 504 Total 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	n/a n/a n/a n/a n/a n/a n/a	\$
Rule 505 Regulation A Rule 504 Total 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	n/a n/a n/a n/a n/a n/a n/a n/a	\$

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C.

	total expenses furnished in response to	gregate offering price given in response to Part C - Question 1 Part C - Question 4.a. This difference is the "adjusted gross		\$ <u>1,900,000</u>					
5.	the purposes shown. If the amount for a left of the estimate. The total of the pa	ndicate 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 eff of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set orth in response to Part C - Question 4.b above.							
			Payments to Officers, Directors & Affiliates	Payments To Others					
	Salaries and fees		\$	\$					
	Purchase of real estate		🗆 \$	\$					
	Purchase, rental or leasing and installa	tion of machinery and equipment		S					
	Construction or leasing of plant building	ngs and facilities	🔲 \$	\$					
	Acquisition of other businesses (includused in exchange for the assets or secu	ding the value of securities involved in this offering that may burities of another issuer pursuant to a merger)	oe 	□ s					
		interes of whother issued pursuant to a morger/							
	• •								
	,, ,, ,,								
	Column Totals		🗆 \$	S					
	Total Payments Listed (column to	otals added)	🛭 \$ 1,90	0,000					
			a na mpika makagagagan apin sa mpijanin saun akan membulikan perambungan penambunga						
-	<u>romaniki megasi Kabutatan Malabelingi</u>	D. FEDERAL SIGNATURE	a Malidder vikter pal tod kiej stêr isalê, kişê neder ki ki k						
ınd		ned by the undersigned duly authorized person. If this notice is fill ecurities and Exchange Commission, upon written request of its state of Rule 502.							
ssu	er (Print or Type)	Signature	Date OS	3					
			0/0/0	_>					
	ora, Inc. ne of Signer (Print or Type)	Title of Signer (Print or Type)	·						

1		2	3		5 Disqualification					
	Intend to sell to non-accredited investors in State (Part B-Item 1)		on-accredited Type of security and aggregate offering Price offered in state		Type of investor and amount purchased in State (Part C-Item 2)					
			Number of Accredited			Number of Non-Accredited			No	
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR CA		X	Series B Preferred Stock	5	1,797,317	0	n/a		X	
			Series B-1 Preferred Stock	1	200,000	0	n/a			
СО										
СТ										
DE										
DC										
FL										
GA										
HI										
ID										
IL			·							
IN										
IA										
KS										
KY										
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ME										
MD										
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MI										
MN										
MS										
МО										
МТ										

1		2	3			4			5
	Intend non-acc invest	to sell to credited tors in ate -Item 1)	o d Type of security and aggregate offering price offered in state		Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)				
NE				(Part B-Item 1) (Part C – Item 1) (Part C-Item 1)					
NV									
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NH									
NJ									
NM									
NY									
NC									
ОН									
OK									
OR									
PA									
RI									
SC -									
SD									
TN									
TX									
UT									
VT									
VA			per affil (see affil (_		
WA									
WI									
WY									
PR							_		