NOTICE OF SALE OF SECURITIES

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

26005

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB NumberExpires: Estimated average burden hours per response

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DATE RECEIVED

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Common Stock				
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [x] Rule 506 [] Section 4(6)	[] ULOE			
Type of Filing: [x] New Filing [] Amendment				
A. BASIC IDENTIFICATION DAT	ra			
1. Enter the information requested about the issuer	03059568			
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.)				
Envivio Services Corporation				
Address of Executive Offices (Number and Street, City, State, Zip Code) 801 Gateway Boulevard, Suite 402, South San Francisco, CA 94080	Telephone Number (Including Area Code) (650) 875-3000			
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (If different from Executive Offices)	Telephone Number (Including Area Code)			
Brief Description of Business Sales Services				
Type of Business Organization				
[x] corporation [] limited partnership, already formed	[] other (please specify):			
[] business trust [] limited partnership, to be formed				
Actual or Estimated Date of Incorporation or Organization: $ Month $ Year Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Servic	[x] Actual [] Estimated State: ROCESSED AUG 1 5 2003			

GENERAL INSTRUCTIONS

[DE]

CN for Canada; FN for other foreign jurisdiction)

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 notice.

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;
- e Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general and managing 	ng partner of partne	rship issuers.			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[x] Director	[] General and/or Managing Partner
Full Name (Last name Envivio, Inc.	first, if individual)		The state of the s		
Business or Residence Address 801 Gateway Boulevard	AGGS OF TRANSPORTED TO THE TRANSPORT OF	**************************************	000000 cm 000000 magazing photographic and common construction of the commo		
Check Box(es) that Apply:	[] Promoter	[x] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name Jonathan Fram	e first, if individual)				
Business or Residence Address 801 Gateway Boulevard	,	and Street, City, State, Zip of th San Francisco, CA	•		
Check Box(es) that Apply:	[·] · Promoter	[] Beneficial Owner	[x] Executive Officer	[x] Director	[] General and/or Managing Partner
Full Name (Last name Julien Signes	first, if individual)		Paragram and the second		
Business or Residence Address 801 Gateway Boulevard	(a) (a) (b) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	The same of the sa			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[x] Executive Officer	[x] Director	[] General and/or Managing Partner
Full Name (Last name Albert Liong	first, if individual)		-		
Business or Residence Address 801 Gateway Boulevard		and Street, City, State, Zip of the San Francisco, CA		- ····-	
				[] Director	[] General and/or Managing Partner
Full Name (Last name	first; if individual)				
Business or Residence Addres	ś (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	s (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)		Der State St	1997, S. 199	
Business or Residence Addres	s (Number	and Street, City, State, Zip	Code)		

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

					B. INFOR	RMATION	ABOUT O	FFERING				
1Has the	issuer sold	, or does the i	ssuer intend	to sell, to n	on-accredite	d investors in	n this offerin	g?			[] Yes	[x] No
				Ansv	ver also in A	ppendix, Co	lumn 2, if fil	ing under U	LOE.			
2What is	the minim	ım investment	that will be	accepted fro	om any indiv	vidual? \$					None	
2Daga tha	affanina -	-armit iaint au	umarahin of	aingla unit	,						[v] Vac	[] No
3Does the	oriering j	permit joint ov	vnersnip or a	a single unit.		••••••	***************************************	• • • • • • • • • • • • • • • • • • • •	*,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		[X] 168	[] No
solicitatio with the S	n of purch SEC and/or		ection with so or states, list	ales of secur the name of	ities in the o	ffering. If a or dealer. If	person to be	listed is an	associated po	erson or agei	nt of a broke	neration for or dealer registered of such a broker or
Full Name	e (Last name fire	st, if individ	ual)			•					
Business	or Residen	ce Address	(Nur	mber and Str	eet, City, St	ate, Zip Cod	e)					
Name of	Associated	Broker or De	ealer									
States in '	Which Per	son Listed Ha	s Solicited o	r Intends to	Solicit Purch	nasers						
(Check "A	All States"	or check indi	vidual States			***********	••••••	***************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nam		Last name fir			<u></u>							
Business	or Residen	ce Address	(Nur	mber and Str	eet, City, St	ate, Zip Cod	e)					
Name of	Associated	Broker or De	ealer									
States in '	Which Per	son Listed Ha	s Solicited o	r Intends to	Solicit Purch	nasers						<u> </u>
(Check "A	All States"	or check indi	vidual States	i,,		*******		•••••				[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nam	e (Last name fir	st, if individ	ual)								
Business	or Residen	ce Address	(Nur	nber and Str	eet, City, St	ate, Zip Cod	e)			, <u></u> ; 2 5 5 1		V
Name of	Associated	Broker or De	ealer									
States in '	Which Per	son Listed Ha	s Solicited o	r Intends to	Solicit Purch	nasers					.,	

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 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.		
Type of Security	Aggregate Offering Price	Amount Already Sold
D. tr	\$ <u>0</u>	\$ <u>0</u>
DebtEquity	\$_100.00	\$ 100.00
[X] Common [] Preferred	+ <u>=====</u>	<u> </u>
Convertible Securities including Warrants	\$_0	\$ <u>0</u>
Partnership Interests	\$ <u>.</u> \$ <u>0</u>	\$ <u>0</u>
Other (Specify)	\$ <u>0</u>	\$ <u>0</u>
Total	\$ 100.00	\$ 100.00
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."		Aggregate
	Number of	Dollar Amount
	Investors	of Purchases
Accredited Investors	<u>1</u>	\$ <u>100.00</u>
Non-accredited Investors	$\overline{\mathbf{o}}$	\$ <u>0</u>
Total (for filings under Rule 504 only)		
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	Security	Joid
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 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	l	[] \$ <u></u>
Printing and Engraving Costs	1	[] \$
Legal Fees		x] \$500.00
Accounting Fees		\$
Engineering Fees		[] \$
Sales Commissions (specify finders' fees separately)		[] \$
Other Expenses (identify)		[] \$
Total		[] \$
	[\$500.00

C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES AND US	SE OF PROCEEDS		
b. Enter the difference between the aggregate offering price and total expenses furnished in response to Part C - Question a proceeds to issuer."	\$ <u>134,500.00</u>			
5. Indicate below the amount of the adjusted gross proceeds for each of the purposes shown. If the amount for any purpose the box to the left of the estimate. The total of the pay proceeds to the issuer set forth in response to Part C - Questio	ose is not known, furnish an estimate and ments listed must equal the adjusted gross	i		
		Payments to		
		Officers, Directors, & Affiliates	Payments To Others	
Salaries and fees		[] \$	[] \$	
Purchase of real estate		[] \$	[] \$	
Purchase, rental or leasing and installation of machinery and e	[] \$	[] \$		
Construction or leasing of plant buildings and facilities	[] \$	[] \$		
Acquisition of other businesses (including the value of securiti offering that may be used in exchange for the assets or securit issuer pursuant to a merger)		[] \$	[] \$	
Repayment of indebtedness	·	[] \$	[] \$	
Working capital		[] \$	[][\$4 <u>00.00]</u>	
Other (specify):		[] \$	[] \$	
Column Totals	^	[] \$	[][\$4 <u>00.00]</u>	
Total Payments Listed (column totals added)	[]	[] [\$4 <u>00.00]</u>		
D.	FEDERAL SIGNATURE			
The issuer has duly caused this notice to be signed by the unc signature constitutes an undertaking by the issuer to furnish to information furnished by the issuer to any non-accredited inve	the U.S. Securities and Exchange Comr	nission, upon writte		
Issuer (Print or Type) Envivio Services Corporation	Signature		Date August 11, 2003	
Name of Signer (Print or Type) Albert Liong	Title of Signer (Print or Type) Chief Financial Officer			
·	ATTENTION			
Intentional misstatements or omissions of fa	ct constitute federal criminal viola	tions. (See 18 U	J.S.C. 1001.)	