# 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



	SEC U	SE ONLY	
Prefix			Serial
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		İ	
	Date R	eceived	
	1	1	

<u> </u>	an amendment and name has changed, and indi	cate change	(i) / T x / / / Z
BorderWare Series C Financing			1 30/43/
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 50 Amendment	)6 DS	Section 4(6) ULOE
Type of Filing: ☑ New Filing □	A. BASIC IDENTIFICATION DA	TA	
	· · · · · · · · · · · · · · · · · · ·	A I A	
1. Enter the information requested about	<del></del>		
	imendment and name has changed, and indicate	e change.)	
BorderWare Technologies, Inc.			<del></del>
Address of Executive Offices	(Number and Street, City, State, Z	(ip Code)	Telephone Number (Including Area Code)
50 Burnamthorpe Road West, #502, Miss	sissauga, Ontario, L5B 3C2, CANADA		905-804-1855
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Z	(ip Code)	Telephone Number (Including Area Code)
Brief Description of Business			
Provider of internet security services and	products.		
Type of Business Organization			
□ corporation	☐ limited partnership, already formed		other (please specify):
☐ business trust	☐ limited partnership, to be formed		
Actual or Estimated Date of Incorporatio Jurisdiction of Incorporation or Organiza	n or Organization: tion: (Enter two-letter U.S. Postal Service abbout CN for Canada; FN for other foreign juri		■ Actual □ Estimated

#### **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 prince the information requested in Part C, and any material changes from the information previously supplied in Parts A and DESSED 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 state that 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 form.

SEC 1972 (6-12) 1 188

# 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 ind	lividual)				
Ray Glover					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Lip Code)		
135 Ducks Hill Road, Northwood	i, Middlesex Engla	and HA6 2SQ			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Richard Earle					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
365 Walmer Road, Toronto, ON	Canada M5R 2Y3				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
John Alsop	•				
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)	·	
213 Kenollie Avenue, Mississaug	a. ON Canada L50	3 2H7			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)			·	
Byron Lee					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Lip Code)		
50 Maitland Street, Toronto, ON	Canada M4Y 1C5				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if inc	livi <b>dual</b> )				
lan Locke					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
1588 Spring Road, Mississauga,	ON Canada I 5I IN	13			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Jeff Webber					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
12111 Chalk Hill Road, Heraldsb	nurg CALISA 954/	18			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, if inc	1::				Managing Partner
run Ivaine (Last name iirst, ii inc	iividuai)				
Wilson Lee					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
2329 Falling Green Drive, Oakvi	lle, ON Canada L6	M 5A7			

Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Jennifer Georgas					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
66 Saulter Street, Toronto, ON C	anada M4M 2H7				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Peter Cox					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
8 University Road, London, Engl	and SW19 2BX				
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)		·	<u> </u>	
Jefferson Partners Fund IV, L.P.					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
Soho Centre, 260 Queen Street W	lest 4th Floor Toro	onto, ON Canada M5V 17	.8		
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)			·	
Jefferson Partners Fund IV (US),	L.P.				
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
Soho Centre, 260 Queen Street W	est, 4th Floor, Toro	onto, ON Canada M5V 1Z	.8		
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if inc	lividual)	<del></del>			
Jefferson Partners Fund IV (PA),	IP.				
Business or Residence Address		er and Street, City, State, 2	Zip Code)		·····
Soho Centre, 260 Queen Street W	est. 4th Floor, Tord	onto. ON Canada M5V 1Z	.8		
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
E-Nitiative Limited, Attn: Ray C	ilover				
Business or Residence Address		er and Street, City, State, 2	Zip Code)		
7 Brackenwood, Sunbury-on-Tha	mes, Middlesex, E	ngland TW16 6SQ			
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Sea Change Investments Inc., Att	n: Richard Earle				
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
3100 Steeles Avenue West, Suite	205, Concord, ON	, Canada, L4K 3E1			

Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if it	ndividual)				
Boiler Riffle Investments Inc., A	Attn: Kimberly Wal	lace/Suzanne Pyfrom-Con	liffe		
Business or Residence Address	(Number	er and Street, City, State, 2	Zip Code)	-	
3 <sup>rd</sup> Floor, Montague Sterling Ce	entre, P.O. Box N 32	42, East Bay Street, Nassa	u, Bahamas		
Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	ndividual)			· · · · · · · · · · · · · · · · · · ·	
e-Scotia Acquisition Inc., Attn:	Greg Milavsky				
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
40 King Street West, 64th Floor	, Scotia Plaza, Toror	nto, ON, Canada M5H 3Y2	2		

				B. INF	ORMATIC	N ABOU	OFFERI	NG				
1. Has the iss	suer sold. o	r does the i	ssuer intend	d to sell, to	non accred	ited investo	ors in this o	ffering?			Yes	No ⊠
., .,	, •			•	Appendix,	,					_	_
0. 330 - 1. 4						·	Ū				6 27/4	
2. What is th	e minimun	i investmen	t that will t	se accepted	from any ii	ndividual?.	•••	•••••			\$ <u>N/A</u> Yes	No
3. Does the o	offering per	mit joint ov	vnershi <b>p</b> of	`a single ur	nit?		•				<b>⊠</b>	
4. Enter the remuneration or agent of a persons to be	for solicita broker or d	ition of pure	chasers in c ered with th	connection ne SEC and	with sales o /or with a s	f securities tate or state	in the offe	ring. If a plame of the	erson to be broker or d	listed is a lealer. If i	n associa nore than	ted person five (5)
Full Name (L	ast name fi	rst, if indiv	idual)									
Mooreland P												
Business or F	Residence A	ddress (Nu	mber and S	Street, City,	State, Zip (	Code)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
545 Steambo	at Road, G	reenwich, C	T 06830									
Name of Ass	ociated Bro	ker or Deal	er									
States in Whi	ah Paman	Listed Has	Saliaited or	Intendate	Caliait Due	hocare*						
					Solicit Puro						🗖	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CŢ]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L					C							
Business or F	Residence A	Address (Nu	mber and S	street, City,	State, Zip	Code)						
Name of Ass	ociated Bro	ker or Deal	er					-				
States in Whi								<del></del>				A.II. St
(Check	[AK]	F check inc	iividuai Sta [AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	ш [HI]	All States [ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L				(171)	[0.]			[ 1771]	[ ,]		[ '' ' ]	[1.11]
Business or F	Residence A	Address (Nu	mber and S	Street, City,	State, Zip	Code)						
		·····										
Name of Ass	ociated Bro	ker or Deal	er									
States in Wh							) · · · san mi					All States
(Check "	[AK]	or check inc [AZ]	iividuai Sta [AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	⊔ [HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R1]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	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	S	S
	Equity		\$ 8,609,400
	Equity	3 <u>20,000,000</u>	3 8,009,400
	*All dollar amounts in this Form D are in Canadian dollars unless otherwise indicated.  ☐ Common ☑ Preferred		
	Convertible Securities (including warrants)		S
	Partnership Interests		S
	Other (Specify)	S	\$
	Total	\$_20,000,000	S <u>8,609,400</u>
	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."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	S 615,000
	Non-accredited Investors		
	Non-accredited investors		3
	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 <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, 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	Dollar Amount
	Rule 505	Security	Sold S
	Regulation A		\$
	Rule 504		S
	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	C	s
	Printing and Engraving Costs		s
	Legal Fees		3 \$ <u>75,000</u>
	Accounting Fees		S
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify) <u>finder's fee (note that the "finder" did not solicit any investors; see Iten</u>		s <u>200,000</u>
	Total		S 275,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	OF P	ROCEEDS		
<ul> <li>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 gross proceeds to the issuer."</li> <li>5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be</li> </ul>				\$ <u>19,725,000</u>
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 left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates		Payments To Others
Salaries and fees		\$	_	
Purchase of real estate		S		
Purchase, rental or leasing and installation of machinery and equipment		s		
Construction or leasing of plant buildings and facilities		ss		
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)		\$		
Repayment of indebtedness		S		
Working Capital		S		\$19,725,000
Other (specify):		S		2
	_	c	_	c
Column Totals		S		
Column Totals	Ш	\$	×	\$19,725,000
Total Payments Listed (Column totals added)		□ \$_	<u>19,7</u>	25,000
D. FEDERAL SIGNATURE				
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this no following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exch request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to	ange	Commission, u	pon	written
Issuer (Print or Type) Signature		Date		
BorderWare Technologies, Inc.		AUL 19,0	000	1
Name of Signer (Print or Type) Title of Signer (Print or Type)				
Wilson Lee CFO				

# — ATTENTION —

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

	E. STATE SIGNATURE			
	262 presently subject to any of the disqualificat		Yes	No ⊠
	See Appendix, Column 5, for state resp	oonse.		
2. The undersigned issuer hereby undert Form D (17 CFR 239,500) at such ti	akes to furnish to any state administrator of any nes as required by state law.	state in which this notice is filed, a no	otice on	
3. The undersigned issuer hereby undert issuer to offerees.	akes to furnish to the state administrators, upon	written request, information furnished	d by the	
limited Offering Exemption (ULOE)	t the issuer is familiar with the conditions that n of the state in which this notice is filed and uncestablishing that these conditions have been satisfied.	lerstands that the issuer claiming the a		y.
The issuer has read this notification and undersigned duly authorized person.	knows the contents to be true and has duly cause	ed this notice to be signed on its beha	If by the	
Issuer (Print or Type)	Signature	Date		
BorderWare Technologies, Inc.		AUL 19	,2004	
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Wilson Lee	CFO			

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.

# APPENDIX

1.	2 3  Intend to sell Type of			4					5 lification ate ULOE s, attach	
	investo	accredited rs in State 3-Item 1)	security and aggregate offering price offered in state (Part C-Item 1)		amount pi	f investor and urchased in State t C-Item 2)		explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Series C Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA		Х	\$20,000,000	2	\$365,000	0			х	
СО									-	
СТ										
DE										
DC										
FL		Х	\$20,000,000	1	\$250,000	0			х	
GA										
HI										
ID										
IL										
IN										
ΙA					··· -					
KS						·				
KY										
LA										
ME										
MD										
MA										
MI										
MN										
MS										
МО										

# APPENDIX

Type of investor and amount purchased in State (Part B-them 1)   Type of investor and amount purchased in State (Part B-them 1)   Type of investor and amount purchased in State (Part C-them 2)   Type of investor and amount purchased in State (Part C-them 1)   Type of investor and amount purchased in State (Part C-them 1)   Type of investors   Type of investor and amount purchased in State (Part C-them 2)   Type of investors   Type of investors   Type of investor and amount purchased in State (Part C-them 2)   Type of investors   Type of investors   Type of investor and amount purchased in State (Part C-them 2)   Type of investors   Type	1.	T	2	3	 				-
	''		2	3		4		Disqual	ification
	ļ	Inten	to sell	Type of				under Sta	ite ULOE
Investors in State   Clear   Prefer   Clear   Prefer   Clear   Clear		to non-a	accredited	security	Type o	f investor and		explan	ation of
				offering price	amount pu	irchased in State		waiver	granted)
State         Yes         No         Series Stock         Number of Preferred Stock         Amount         Non-Accredited Investors         Amount         Yes         No           MT         I		(1 411 12	J-Helli 1)	offered in state (Part C Item 1)	(гаг	(C-Rein 2)		(rait L	-item 1)
State         Yes         No         Stock         Investors         Amount         Investors         Amount         Investors         Amount         Yes         No           NT         Image: State of the content of the con		<u> </u>		Series C		Number of			
NE	State	Yes	No		Amount		Amount	Yes _	No
NH	MT								
NH	NE								
NM	NV								
NM         NY         NO         NO<	NH								
NY	NJ								
NC         ND         ND<	NM								
ND         Image: control or contr	NY	ļ							
OH OK OK OR	NC				 				
OK         Image: Control of the c	ND								
OR	ОН								
PA	ОК								
RI	OR								
SC         SD         SD<	PA				 				
SD         Image: square s	RI								
TN	SC								
TX	SD								
UT         .	TN								
VT	TX	ļ							
VA	UT	ļ							
WA	VT								
WV	VA								
WI            WY            PR		ļ							
WY PR					 			_	
PR PR									