FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden hours per response 16.00

SEC USE ONLY

DATE RECEIVED

Serial

Prefix

Name of Offering ( check if this is an amendment and name has changed, and indicate	e change.)	
Series B Preferred Stock		
S ( 11 3/-	Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing		
A. BASIC IDENTIFICATION DAT	ΓA	
Enter the information requested about the issuer		
Name of Issuer ( $\Box$ check if this is an amendment and name has changed, and indicate of	hange.)	
Teltone Corporation		
Address of Executive Offices (Number and Street, City, State, Zip Code)		phone Number (Including Area Code)
21312 – 30 <sup>th</sup> Dr. SE, Suite 102, Bothell, WA 98021		5) 487-1515
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telep	ephone Number (Including Area Code)
(if different from Executive Offices)  PROCESSED		
same	same	
Brief Description of Business AUG 2 & 2005	>	
Telephone technologies		
Type of Business Organization THOMSON		05064088
☑ corporation ☐ limited partnership, already for MANCIAL ☐ other (p	lease specify	y):
☐ business trust ☐ limited partnership, to be formed		•
Month Year	· · · · · · · · · · · · · · · · · · ·	
Actual or Estimated Date of Incorporation or Organization: $  0 7   6 8  $	Actual [	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevi	iation for Sta	ate:
CN for Canada; FN for foreign jurisdiction	on)	
GENERAL INSTRUCTIONS		

ÉRSUANT TO REGULATION D,

**SECTION 4(6), AND/OR** 

UMEÖRM LIMITED OFFERING EXEMPTION

#### 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 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;
  - 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)
Griffith, Debra
Business or Residence Address (Number and Street, City, State, Zip Code)
P.O. Box 945, Bothell, WA 98041-0945
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Herzog, Wendy
Business or Residence Address (Number and Street, City, State, Zip Code)
P.O. Box 945, Bothell, WA 98041-0945
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Artman, Ori
Business or Residence Address (Number and Street, City, State, Zip Code)
P.O. Box 945, Bothell, WA 98041-0945
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Anderson, Charles
Business or Residence Address (Number and Street, City, State, Zip Code)
P.O. Box 68, Stanwood, WA 98292-0068
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Waite, Charles
Business or Residence Address (Number and Street, City, State, Zip Code)
P.O. Box 945, Bothell, WA 98041-0945
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Sarich, Jr., Steve
Business or Residence Address (Number and Street, City, State, Zip Code)
111 West Highland Dr., Seattle, WA 98119-3573
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Leviticus Partners
Business or Residence Address (Number and Street, City, State, Zip Code)
405 Lexington Avenue, 45 <sup>th</sup> Floor, New York, NY 10174
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Sutter Hill Ventures
Business or Residence Address (Number and Street, City, State, Zip Code)
755 Page Mill Road, A-200, Palo Alto, CA 94304-1005

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

				B. II	NFORMAT	TON ABO	UT OFFEI	RING				
											Yes	No
l. Has th	ie issuer sol	d, or does t			to non-accr dix, Columi			_		•••••	. 🗆	×
2. What	is the minin	num investr				_					. \$25,00	00
				ос шесер		,					420,00	
2 Door t	tha affaring	narmit iain	ut ownershir	of a single	unit?						Yes . <b>≭</b>	No □
										idirectly, any		
comm	ission or si	milar remui	neration for	solicitation	of purchase	ers in conne	ection with	sales of sec	urities in th	e offering. If	•	
										vith a state or ons of such a		
			t forth the ir					ed the tisso	erated perso	on such u	•	
Full name	(Last name	e first, if ind	lividual)						·			
				10 0	0	<u> </u>						
Business (	or Residence	e Address (	Number and	1 Street, Cit	y, State, Zip	Code)						
Name of A	Associated I	Broker or D	ealer									
			as Solicited							·		
,			individual									All States
[AL]	[AK]	[AZ]	[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]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	e first, if ind	lividual)									
Business	or Residence	e Address (	Number and	d Street, Cit	v. State, Zir	Code)			<del></del>		<u></u>	
240		• · · · · · · · · · · · · · · · · · · ·		2 011001, 011	J, Otato, 2.,	, 0000,						
Name of A	Associated I	Broker or D	ealer									
			as Solicited									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[lL]	[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]
	(Last name					3					r1	( <u>-</u>
Tun name	(Last Haine	tiist, ii mo	iividuai)									
Business of	or Residenc	e Address (	Number and	d Street, Cit	y, State, Zij	Code)						
Name of A	Associated I	Broker or D	ealer									
States in \	Which Perso	on Listed H	as Solicited	or Intends	to Solicit Pu	ırchasers						
			individual				••••					All States
[AL]	[AK]	[AZ]	[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]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

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

# 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 $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	O	Aggregate  Iffering Price	Am	ount Already Sold
	Debt	\$	ū	\$	
	Equity	\$	750,000	\$	645,000
	□ Common 🗷 Preferred				<del></del>
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$	-	\$	
	Other (Specify)	\$		\$	
	Total	_	750.000	\$	645,000
	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."		N		Aggregate
			Number Investors		ollar Amount  f Purchasers
	Accredited Investors	_	9	\$	645,000
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)		_	\$	
3.	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.		<b>m</b> . 6		
	Type of offering		Type of Security	Do	ollar Amount Sold
	Rule 505		o county	\$	30,4
	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.		<u>.</u>		
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees		×	\$	5,000
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$	
	Total		×	\$	5,000

C OFFEDING DDICE NUMBED OF INVESTODS EVDENCES AND	TICE	OF DDOCEEDS			-
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 the "adjusted gross proceeds to the issuer."	is		\$		745,000
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be use 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 to adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	ate				
		Payments to Officers, Directors, & Affiliates			ments to
Salaries and fees		\$		\$	
Purchase of real estate		\$		\$	
Purchase, rental or leasing and installation of machinery and equipment		\$		\$	
Construction or leasing of plant buildings and facilities		\$		\$	
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		\$		\$	
Working capital		\$	×	\$	745,000
Other (specify):				\$	7 12,000
Column totals		<u> </u>		\$	····
Cotal Payments Listed (column totals added)		<u> </u>	×	\$	745,000
otal Layinents Listed (Column totals added)	_		ىق	Ψ	7+5,000
D. FEDERAL SIGNATURE					
D. TEDBRIE GO. WITCH					<del></del>
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this ignature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Connection formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Running Connection (b) (c) (d) (d)	nmis	sion, upon written			
	Date		<u> </u>		
Celtone Corporation		Wy Jane	90	<u> </u>	
Name of Signer (Print or Type) Title of Signer (Print or Type)					

## ATTENTION

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

	E. STATE SIGNATURE			
		Yes	No	
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?		×	
	See Appendix, Column 5, for state response.			
2	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a not	ice on Fr	orm D (17	

- 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. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 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 understand 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.

Issuer (Print or Type) Teltone Corporation	Signature Wendy Wenk of	Date Quary 3,2005
Name of Signer (Print or Type)	Title of Signer (Print or (Type) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	9.10
Wendy Herzog	Corporate Secretary	

### 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.

## APPENDIX

1		2	3 4							
	to non-a	ed to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount purcl	vestor and hased in State -Item 2)		under ULOE att explan waiver	ification State (if yes, ach ation of granted)	
State	Yes	No	Series B Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA		X	\$25,000	1	\$25,000	0	0		Х	
CO										
СТ										
DE										
DC										
FL							·			
GA										
HI										
ID										
IL										
IN										
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LA										
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MI					<del> </del>					
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MS										
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## APPENDIX

1		2 3 4							
	to non-a	ed to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pure	nvestor and chased in State C-Item 2)		under St (if yes explan waiver	lification ate ULOE at attach ation of granted)
State	Yes	No	Series B Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NE				<del></del>			<del></del>		
NV							· · · <u>· ·</u> ·	1	
NH							<del></del> .		
NJ			-					7	
NM							<u> </u>		
NY		Х	\$275,000	2	\$275,000	0	0	1	Х
NC									
ND									
ОН		Х	\$25,000	1	\$25,000	0	0	1	Х
ОК									
OR									
PA									
RI								}	
SC									
SD									
TN									
TX									
UΤ									
VT				***					
VA							-		
WA		X	\$320,000	5	\$320,000	0	0		X
WV									
WI									
WY				·			-,-		
PR					1				

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