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April 30, 2008

FORM D



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	USE ONLY
Prefix	Serial
DA	TE RECEIVED

Estimated average burden

hours per response. 16.00

1080MB Number:

Expires:

Name of Offering (check if this is an amendment and name has changed, and indicate change.) The Advent Multi-Strategy Fund	PECEIVED CO
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE 2005
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	102
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) The Advent Multi-Strategy Fund	
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Advent Capital Management, LLC, 1065 Avenue of the Americas, 31st Floor, New York, NY 10018	Telephone Number (Including Area Code) (212) 482-1600
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code) PROCESSED
Brief Description of Business Investment Fund	OCT 1 9 2005 E
	THOMSON clease specify): FINANCIAL Advent Series Trust, a Cayman Islands Unit Trust
Month Year Actual or Estimated Date of Incorporation or Organization: 0 3 0 5 Actual Estivity Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	

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 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 predictated on the filing of a federal notice.

Persons who 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.

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2. Enter the information re	equested for the fo				
		•	d within the past five years;		
•		*	•	n of, 10% or more of a	class of equity securities of the issuer.
			of corporate general and ma		· •
		f partnership issuers.			• • • • • • • • • • • • • • • • • • • •
Check Box(es) that Apply:	✓ Promoter	Beneficial Own	er Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			-	
Advent Capital Manag	gement, LLC				
Business or Residence Addre		Street, City, State, Zip	Code)		<u> </u>
1065 Avenue of the An	nericas, 31st Flo	oor, New York, N	Y 10018		
Check Box(es) that Apply:	Promoter	Beneficial Own	er Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Simmons, Russell					
Business or Residence Addre	-	Street, City, State, Zip	Code)		
101 Fox Hedge Road,					
Check Box(es) that Apply:	Promoter	Beneficial Own	er Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Code)		······································
Check Box(es) that Apply:	Promoter	Beneficial Own	er Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	er Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	er Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		······································	-	
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	Executive Office	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Code)		

					20 A B 10	erbayy ya	ONARGE	i tookelis					
	77 aL-		d		seand to act				alde a econom	0		Yes	No
1.	Has the	issuer soic	l, or does th							_	***************************************	ليا	Ø
•	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?											s 3,00	0 000 +
2.	What is the minimum investment that will be accepted from any individual? This amount may be waived or changed in the sole discretion of Citco Trustees (Cayman) Limited.								***************************************				
3.		•	permit join	_			, ,	,			·····	Yes ✓	No □
4.			ion request		-							ت	LJ
	commis	sion or sim	ilar remune	ration for s	olicitation	of purchase	ers in conne	ction with	sales of sec	urities in th	e offering.		
			ted is an assume of the b										
			you may s							•			
Ful	l Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	ip Code)				 -		
Na	me of As	sociated Br	oker or De	aler						,			
<u></u>	:- 11/1		7 : 1 11-	C-lisiad	7	4- C-1:-:4)	D						
Sta			Listed Hass " or check									☐ Al!	States
	CDCCK	All States	or check	11101410001	States)	****************	***************	***************	****************			Ш Ай	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA I	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	TX	NM UT	NY VT	NC VA	ND WA	OH)	OK WI	OR WY	PA PR
	LKL.	[00]	رطوا		<u>IA</u>	<u> </u>		<u> </u>				W A	
Ful	l Name (Last name	first, if ind	ividual)				· -					
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	me of As	sociated Br	oker or De	aler									
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers					······································	
	(Check	"All States	or check	individual	States)	***************************************	***************************************		***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,	☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM TT	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	[TN]	TX	<u>UT</u>	VT	VA	WA	[WV]	WI	WY	PR
Fu	l Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)					<u> </u>	
Na	me of As	sociated Bi	roker or De	aler									· · · · · · · · · · · · · · · · · · ·
Sta	tes in Wi	nich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	······			•••••••			☐ A1	l 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 V	NC	ND	OH)	OK)	OR	PA
	RI	SC	SD	$\mathbb{T}N$	TX	UT	VT	VA	WA	WV	WI	WY	PR

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the 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		ggregate ering Price		Am	ount Already Sold
	Debt	S	0		š	0
	Equity					0
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$	0	5	•	0
	Partnership Interests				 	
	Other (Specify Unit Trust Interests ("Units"))					
	Total					
	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."	ľ	lumber nvestors		Do	Aggregate ollar Amount f Purchases
	Accredited Investors		4		s	4,350,000
	Non-accredited Investors	_		•		0
	Total (for filings under Rule 504 only)			•	_	0
	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 ecurity		D	ollar Amount Sold
	Rule 505		•		c	0014
	Regulation A					
	Rule 504				,	
	Total				<u> </u>	
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 insurer. 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	•••••	[2]	S	0
	Printing and Engraving Costs	•••••	<u>-</u>]	s	0
	Legal Fees		····· [3]	s_ _	31,000
	Accounting Fees	•••••	······ []	s_ _	3,000
	Engineering Fees	•••••	_	_	s	0
	Sales Commissions (specify finders' fees separately)		_		\$	0
	Other Expenses (identify)	•••••]	\$	0
	Total		······ [2	s_ _	34,000

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."		s <u>4,316,000</u>
Indicate below the amount of the adjusted gross proceed 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 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 4.5 above.		
	Payments to Officers, Directors, & Affiliates	
Salaries and fees	⊡\$ _	0 25 0
Purchase of real estate	7\$	0 7 \$ 0
Purchase, rental or leasing and installation of machinery	-	
and equipment		
Construction or leasing of plant buildings and facilities	7 \$	0 75 0
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	G1 P	0 == 0
issuer pursuant to a merger)		
Repayment of indebtedness		
Working capital		
Other (specify): Lavatinest of proceeds.	@\$	0 [7] \$4,316,000
	□\$	\$
Column Totals	②\$	0 7s 4,316,000
Total Payments Listed (column totals added)	② \$.	4,316,000
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice ignature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commithe information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon wri	Rule 505, the following liten request of its staff,
issuer (Print or Typt) Signature	Date /	
The Advent Multi-Strategy Fund	10/7	105
Name of Signer (Print or Type) Title of Signer (Print or Type)		
Rodd Baxter General Counsel of Advent Capital Management, L. of The Advent Multi-Stratory Fund	LC, Atterney to	-Fact

ATTENTION –

Intentional mismatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1081.)

	and the state of the state of the state of							
1.	ls my party described in 17 CFR 250. provisions of such rule?	262 presently subject to any of the disqualification	Yes 🗆	No ☑				
	See Appendix, Column 5, for state response. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice D (17 CPR 239.500) at such times as required by state law. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnish issuer to offerees. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which this notice is filed and understands that the issuer claiming the state in which the issuer claiming the state in which the issuer claiming the state in which the issuer claim the state in which the state in							
2 .			tice is filed a no	tice on Form				
3.	-	skes to furnish to the state administrators, upon written request, in	nformation furn	ished by the				
4.	limited Offering Exemption (ULOE) o	f the state in which this notice is filed and understands that the iss						
	uer has read this notification and knows th thorized person.	se contents to be true and has duly caused this notice to be signed on	its behalf by the	undersigned				
Issuer (Print of Type)	Signature Date	//					
The A	dvent Multi-Strategy Fund		1/7/08					
Name ((Print or Type)	Title (Print or Type)						
Rodd	Bexter	General Connect of Advent Capital Management, LLC, Attorney-he-Fact of The Advent Multi-Strategy Fund						

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.

					Hi NDI				
1	Intendation to non-a	2 I to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK	_				l				
AZ									
AR									
CA									
со		!							
СТ									
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MS									

1		2	3			4			ification
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	investor and rchased in State C-Item 2)		under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
-	(1 11 1 1	10111 1)	(1210 1000 1)	Number of	(1	Number of		(14412	
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No
мо									
МТ									
NE									
NV									
NH									
NJ		×	Units \$2,000,000	1	\$2,000,000	0	\$0		×
NM									
NY		×	Units \$2,350,000	3	\$2,350,000	0	\$0		×
NC									
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VA								<u> </u>	
WA									
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				A STATE	NOTE A					
1	2 3					4		5		
	Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										