

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

4	4	4	9	4	7

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2002
Estimated average burden

SEC USE ONLY						
Prefix	Serial					
DATE R	ECEIVED					
1	1					

hours per response 16.00

Name of Offering (check if t	his is an amendment and nar	me has changed, and indic	ate change.)	
Filing Under (Check box(es) that a	apply): □ Rule 504 □ R	ule 505 ⊠ Rule 506 □	Section 4(6) ULOF	
Type of Filing: New Filing	☐ Amendment			
	A. BASIC I	DENTIFICATION DAT	ΓA	
1. Enter the information requested	about the issuer			05068605
Name of Issuer (check if this	is an amendment and name l	has changed, and indicate	change.)	2000059
Microfield Group, Inc.				75 4. 4.44
Address of Executive Offices	(Number and Stre	et, City, State, Zip Code)	Telephone Number (In	cluding Area Code)
1631 NW Thurman Street, Suite	e 200, Portland, Oregon 97	209	503.419.3580	
Address of Principal Business Ope (if different from Executive Office		et, City, State, Zip Code)	Telephone Number (In	cluding Area Code)
Brief Description of Business The	e Issuer and its subsidiarie	s specialize in the installa	ation of electrical produ	icts and services.
			\	PROCESSED
Type of Business Organization				CCT 0 2 2005
	☐ limited partnership, a	Iready formed	□ other (please specify)	OCT 26 2005
□ business trust	☐ limited partnership, to	be formed	a other (product specify)	
Actual or Estimated Date of Incorp	poration or Organization:	Month Year 0 8 6	☑ Actual ☐ Estimated	THOMSON FINANCIAL
Jurisdiction of Incorporation or Or	•	r U.S. Postal Service abbro ; FN for other foreign juri		OR

GENERAL INSTRUCTIONS

Faderal

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 offer-ing, 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 exemp-tion, 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.

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.

SEC 1972 (7-00) 1 of 8

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) Robert J. Jesenik Business or Residence Address (Number and Street, City, State, Zip Code) 805 SW Broadway Ste 560, Portland, Oregon, 97205 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) William C. McCormick. Business or Residence Address (Number and Street, City, State, Zip Code) 1631 NW Thurman Ste 200, Portland, Oregon 97209 ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Steven M. Wright. Business or Residence Address (Number and Street, City, State, Zip Code) 1631 NW Thurman Ste 200, Portland, Oregon 97209 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Michael Stansell Business or Residence Address (Number and Street, City, State, Zip Code) 1631 NW Thurman Ste 200, Portland, Oregon 97209 ☐ Beneficial Owner Check Box(es) that Apply: ☐ Promoter □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) A. Mark Walter Business or Residence Address (Number and Street, City, State, Zip Code) 1631 NW Thurman Ste 200, Portland, Oregon 97209 ☐ Executive Officer □ Director Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ General and/or Managing Partner Full Name (Last name first, if individual) **Capstone Investments** Business or Residence Address (Number and Street, City, State, Zip Code) 4660 La Jolia Village Drive, Executive Suite 1040, San Diego California 92122 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Randall R. Reed Business or Residence Address (Number and Street, City, State, Zip Code) 1631 NW Thurman Ste 200, Portland, Oregon 97209

					В. І	NFORMA	TION ABO	UT OFF	ERING					·
													Yes	No
1. Ha	s the	e issuer so	old, or does				ccredited inv							\boxtimes
				An	swer also i	n Appendix	k, Column 2,	if filing u	nder ULOE	Ξ.				
2. W	hat i	s the mini	mum inves	tment that	will be acco	epted from	any individu	al?	•••••				\$	2,000
3 D	sac ti	ha offarin	a narmit ia	int aumarch	in of a cine	rla unit?							Yes	No
													⊠	
or lis of	simi ted i the	ilar remui s an assoo broker or	neration for ciated perso dealer. If	r solicitatio on or agent	n of purcha of a broken five (5) per	asers in cor or dealer in rsons to be	en or will be nnection with registered wi listed are as	h sales of th the SE	securities : C and/or w	in the offer ith a state o	ing. If a pe or states, lis	rson to be the name		
		(Last nam Investmen	e first, if in	idividual)										
				(Number a			Zip Code) California 9	2122						
		ssociated (nvestme)	Broker or I	Dealer		 	~~							
States	n W	hich Pers	on Listed F	las Solicite	d or Intend	s to Solicit	Purchasers							
(Chec	k "A	All States"	or check in	ndividual S	tates)		•••••			•••••			□ All	States
[AL]		[AK]	[AZ]	[AR]		(CO)	[CT] X		[DC]	[FL]	[GA]	[HI]	[ID	
(IL) [MT]	X	(IN) (NE)	[IA] [NV]	[KS] [NH]	[KY]	[LA] [NM]	[ME] [NY] X	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	(MO [PA	
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	
		·	e first, if ir											
Busine	SS OI	r Residen	e Address	(Number a	nd Street, C	City, State,	Zip Code)							
Name	of A	ssociated	Broker or I	Dealer						, , , , , , , , , , , , , , , , , , , 		<u> </u>		
States	in W	hich Pers	on Listed F	Ias Solicite	d or Intend	s to Solicit	Purchasers							
							******************						□ All	States
[AL]		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[IL] [MT]		[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	(ME) [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	(MN) [OK]	[MS] [OR]	(MC [PA	
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	
Full N	ame	(Last nan	ne first, if in	ndividual)										
Busine	ss o	r Residen	ce Address	(Number a	nd Street, C	City, State,	Zip Code)							
					ŕ	• • • • • • • • • • • • • • • • • • • •	,							
Name	of A	ssociated	Broker or l	Dealer										
States	in W	hich Pers	on Listed F	Has Solicite	d or Intend	s to Solicit	Purchasers							
(Chec	:k "/	All States'	or check i	ndividual S	states)	•••••							□ All	States
[AL]		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[II]	-
[IL] [MT]		[IN] [NE]	[AI] [VN]	[NH]	[KY] [NJ]	[LA] [MM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] {OR]	[MC [PA	
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[MX]	[PF	

(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 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	\$	\$
Equity	\$ 4,748,000	\$ 3,659,520
☑ Common ☐ Preferred	·	
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	
Other (Specify)	\$	\$
Total	\$_4,748,000	
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."	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	25	\$ 3,659,520
Non-accredited Investors	0	\$0
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 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	Dollar Amount
Type of Security	Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504	none	\$ 0.00
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		\$
Printing and Engraving Costs		\$
Legal Fees	⊠	\$10,000
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)	⊠	\$ 229,520
Other Expenses (identify)		\$
Total	П	\$ 239,520

C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND	USE C	F PROCEEDS		
b. Enter the difference between the aggregate offetion 1 and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference i	s the		\$	3,420,000
5. Indicate below the amount of the adjusted gross pused for each of the purposes shown. If the amount for and check the box to the left of the estimate. The total gross proceeds to the issuer set forth in response to P.	or any purpose is not known, furnish an esti al of the payments listed must equal the adj	mate			
			Payments to Officers, Directors, & Affiliates		ayments To Others
Salaries and fees		□ \$_		□\$_	
Purchase of real estate		□ \$_		\$	
Purchase, rental or leasing and installation of mac	chinery and equipment	□ \$_		□\$_	
Construction or leasing of plant buildings and fac	ilities	□ \$_		□\$	
Acquisition of other businesses (including the val offering that may be used in exchange for the asset to a merger)	ets or securities of another issuer pursuant	□\$_		\$	
Repayment of indebtedness					
Working capital		□ \$_		_ □ \$	2,320,000
Other (specify):		□ \$_		_ □ \$	
		□\$_		\$	
Column Totals					
Total Payments Listed (column totals added)			□ \$	3,420,0	00
	D. FEDERAL SIGNATURE			ω <u></u>	
The issuer has duly caused this notice to be singed be ollowing signature constitutes an undertaking by the issues staff, the information furnished by the issuer to any n	by the undersigned duly authorized person suer to furnish to the U.S. Securities and Ex	change	e Commission, u		
ssuer (Print or Type)	Signature		Date ,		
Aicrofield Group, Inc.	a.Mal W. IT		10/10	105	
• • • • • • • • • • • • • • • • • • • •	Fitle of Signer (Print or Type)				
A. Mark Walter	President				

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

		E. STATE SIGNATURE					
1.	1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?						
	See	e Appendix, Column 5, for state response.					
2.	The undersigned issuer hereby undertakes to fu (17 CFR 239.500) at such times as required by	urnish to any state administrator of any state in which this notice is filed, a notice state law.	on Fo	orm D			
3.	The undersigned issuer hereby undertakes to f to offerees.	furnish to the state administrators, upon written request, information furnished by	by the	issuer			
4.	- · · · · · · · · · · · · · · · · · · ·	er is familiar with the conditions that must be satisfied to be entitled to the Uniform which this notice is filed and understands that the issuer claiming the availablese conditions have been satisfied.					
	ssuer has read this notification and knows the signed duly authorized person.	e contents to be true and has duly caused this notice to be signed on its be	ehalf t	y the			
Issue	r (Print or Type)	Signature 1 1 Date 1					
Micr	ofield Group, Inc.	10/10/05					
Name	e of Signer (Print or Type)	Title of Sigper (Print or Type)					

President

Instruction.

A. Mark Walter

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					5		
	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)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
				Number of Accredited		Number of Non-Accredited					
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
AL								<u> </u>			
AK								 			
AZ											
AR								<u> </u>			
CA		Х	common stock \$4,748,000	4	\$260,309	0			Х		
CO								<u> </u>			
CT											
DE											
DC											
FL											
GA											
ні											
ID											
IL		X	common stock \$4,748,000	1	\$350,000	0	•		Х		
IN											
IA											
KS											
KY											
LA				}							
ME											
MD		X	common stock \$4,748,000	4	\$210,000	0			х		
MA											
MI											
MN											
MS			 								
MO											
1,10	ــــــــــــــــــــــــــــــــــــــ			ــــــــــــــــــــــــــــــــــــــ	4	<u> </u>		ــــــــــــــــــــــــــــــــــــــ			

APPENDIX

Number of Accredited Investors	1	Intend 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)	4 Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
MT NE					Accredited	-	Non-Accredited					
NE		Yes	No	 	Investors	Amount	Investors	Amount	Yes	No		
NV												
NH NJ	ļ											
NJ	NV											
NM x common stock \$4,748,000 1 \$300,000 0 x NC x <	NH											
NY	NJ			<u> </u>								
NY	NM		1	annman stack				: 	ļ			
ND OH Common stock Com	NY		X		1	\$300,000	0		ļ	X		
OH CK Common stock Common stock Common stock S1,406,629 0 X </td <td>NC</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>ļ</td> <td></td>	NC								ļ			
OK Common stock \$4,748,000 11 \$1,406,629 0 X PA X \$4,748,000 1 \$2,062 0 X RI SC SD	ND								ļ			
OR X common stock \$4,748,000 11 \$1,406,629 0 X PA X \$4,748,000 1 \$2,062 0 X RI SC SD TN TX X \$4,748,000 1 \$301,000 0 X UT VT VA WV WY	ОН											
OR	ОК											
PA A \$4,748,000 1 \$2,002 0 A RI SC SC SD	OR		X		11	\$1,406,629	0			х		
SC SD SD <td< td=""><td>PA</td><td></td><td>X</td><td></td><td>1</td><td>\$2,062</td><td>0</td><td></td><td></td><td>Х</td></td<>	PA		X		1	\$2,062	0			Х		
SD TN	RI											
TN	SC											
TX X common stock \$4,748,000 1 \$301,000 0 X UT VT VA WA WV WI WY	SD											
TX X common stock \$4,748,000 1 \$301,000 0 X UT VT VA WA WV WI WY	TN											
UT VT VA VA WA VA WV VA WI VA WY VA			Х		1	\$301,000	0			Х		
VT												
VA WA WV WI WY												
WA												
WV WI WY WY												
WI WY									<u> </u>	 -		
WY		 										
	PR		 									