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 OMB APPROVAL

OMB Number:

3235-0076

Serial

April 30, 2008 Expires: Estimated average burden

hours per response.....16.00

SEC USE ONLY

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series E Preferred Stock Financing	05069412
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	Prince
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Vernier Networks, Inc.	9C1 1 9 2005
Address of Executive Offices (Number and Street, City, State, Zip Code) 490 E. Middlefield Road, Mountain View, CA 94043	Telephone Number (Including Area Code) (650) 526-2600 1086
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 Develops wireless network infrastructure solutions	
Type of Business Organization Corporation Ilimited partnership, already formed business trust limited partnership, to be formed other	(please specify): OCT 2 1 2005
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estimate NANCIAL ate:

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.

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.

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.

> 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.

		A	. BASIC IDI	ENTL	FICATION DATA			
Each beneficial ownEach executive office	e issuer, if the issuer h er having the power to	as been vote o orate is	r dispose, or direct the ssuers and of corporat	vote				securities of the issuer; nd
Check Box(es) that Apply:	Promoter		Beneficial Owner	⊠ 	Executive Officer	⊠ 	Director	 General and/or Managing Partner
Full Name (Last name first, if	`individual)							
Simon Khalaf					-			
Business or Residence Addres 490 E. Middlefield Road, M	•	•	, State, Zip Code)				•	
Check Box(es) that Apply:	Promoter		Beneficial Owner	\boxtimes	Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if Bhupi Singh	individual)							
Business or Residence Addres	ss (Number and Stre	et, City	, State, Zip Code)					·
490 E. Middlefield Road, M			, , , , ,					
Check Box(es) that Apply:	Promoter		Beneficial Owner	\boxtimes	Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, if Douglas Klein	individual)							
Business or Residence Address	ss (Number and Stre-	et, City	, State, Zip Code)					
490 E. Middlefield Road, M		-	•					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	\boxtimes	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)							
Joe Booker								
Business or Residence Addresco Vernier Networks, Inc.,	•		•	4 9404	43			
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer	\boxtimes	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)		•				-	
Business or Residence Addre	ss (Number and Stre	et, City	, State, Zip Code)					
Allegis Capital, 100 Hamilto	on Avenue, Cuite 25	0, Pal	o Alto, CA 94301					
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer	\boxtimes	Director	General and/or Managing Partner
Full Name (Last name first, if William Elmore	individual)							
Business or Residence Addre	ss (Number and Stre	et. City	. State, Zip Code)				······································	 - F-112
Foundation Capital, 70 Will	•		• '				•	
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer	\boxtimes	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)	,	1000					
Raymond A. Rothrock					***			
Business or Residence Addre	•							
Venrock Associates, 30 Roc					1 1 011 1			
	(Use hlan	k sheet	or conviand use add	TITION?	al conies of this sheet	acn	ecessary)	

A. BASIC IDENTIFICATION DATA	
 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 Theis	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Doll Capital Management, 2420 Sand Hill Road, Menlo Park, CA 94025	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Nicolas Popp	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Vernier Networks, Inc., 490 E. Middlefield Road, Mountain View, CA 94043	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Foundation Capital	
Business or Residence Address (Number and Street, City, State, Zip Code) 70 Willow Road, Suite 200, Menlo Park, CA 94025	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner	
Full Name (Last name first, if individual) Doll Capital Management	
Business or Residence Address (Number and Street, City, State, Zip Code)	
2420 Sand Hill Road, Suite 200, Menlo Park, CA 94025	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Media Technology Ventures	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Allegis Capital, 100 Hamilton Avenue, Cuite 250, Palo Alto, CA 94301	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner	
Full Name (Last name first, if individual)	
Utah Venture Partners	
Business or Residence Address (Number and Street, City, State, Zip Code)	
2755 E. Cottonwood Parkway, Suite 520, Salt Lake City, UT 84121	_
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Packet Design, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code)	
3400 Hillview Avenue, Building 3, Palo Alto, CA 94304	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

· · · · · · · · · · · · · · · · · · ·		A. BASIC II	DENTIFICATION DATA		
Each beneficial ownEach executive offic	e issuer, if the issuer having the power to	as been organized within the vote or dispose, or direct porate issuers and of corpor	ne past five years; the vote or disposition of, 10% rate general and managing par		f equity securities of the issuer; suers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Financial Technology Ventu					
Business or Residence Addres				•	
601 California Street, Suite		<u> </u>			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Venrock Associates					
Business or Residence Address	•				
30 Rockefeller Plaza, Room	5508, New York, N	Y 10112			
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 Addres	ss (Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	r Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	ss (Number and Stree	et, City, State, Zip Code)	78. <u> </u>		
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	ss (Number and Stree	et, City, State, Zip Code)		100	
Check Box(es) that Apply:	Promoter	Beneficial Owne	r Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)	age age	-	
Check Box(es) that Apply:	Promoter	Beneficial Owne	r Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	findividual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
	(Use blan	k sheet, or copy and use a	additional copies of this shee	et, as necessary)	
<u> </u>		. ,,	1		

				B.	INFOR	MATION A	BOUT OF	FERING				
1. Has tl	ne issuer sold,	or does the is	sner intend t	o sell to nor	accredited i	nvestors in t	his offering?				Yes	No ⊠
1. 1145 (ic issuer solu,	or does the is	sacr mena e		ilso in Appen		•					23
2. What	is the minimum	m investment	t that will be								\$	N/A
• 5	.1										Yes	No
	the offering pe										\boxtimes	L
remui	neration for sol	icitation of p	urchasers in c	onnection w	ith sales of se	curities in th	e offering. It	f a person to b	e listed is an	associated		
-	n or agent of a live (5) persons		-									
deale	r only.											
Full Name	(Last name fire	st, if individu	ıal)									
Business or	Residence Ac	idress (Numb	per and Street	t, City, State	, Zip Code)			-				NIPAL-
Name of A	ssociated Brok	er or Dealer										
Traine of 1												
States in W	hich Person L	isted Has Sol	licited or Inte	nds to Solic	it Purchasers							
(Check	"All States" or	check indivi	duals States)		• • • • • • • • • • • • • • • • • • • •			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			☐ Al	1 States
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name fir	st, if individu	ual)		 .						·	
	<u> </u>					,						
Business o	r Residence Ad	ddress (Numl	ber and Stree	t, City, State	, Zip Code)							
Name of A	ssociated Brok	ker or Dealer										· · · · · · · · · · · · · · · · · · ·
States in W	hich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers		• .					
(Check	"All States" or	check indivi	duals States)		•••••						☐ Al	l States
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Full Name	(Last name fir	st, if individu	ual)									
Business o	r Residence A	ddress (Num	ber and Stree	t, City, State	, Zip Code)							
Name of A	ssociated Brol	ker or Dealer			**************************************				· · · · · · · · · · · · · · · · · · ·			
States in W	Vhich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers							
(Check	"All States" or	check indivi	duals States)								□ A ²	11 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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			(Use l	blank sheet,	or copy and ι	use additiona	l copies of th	nis sheet, as n	ecessary)			

	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.	4	<i>b</i>
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$ 21,000,000.00	\$ <u>20,999,999.70</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$0_	\$0
	Other (Specify)	\$0	\$0
	Total	\$ 21,000,000.00	\$_20,999,999.70
	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 Purchase
	Accredited investors	19	\$ <u>20,999,999.70</u>
	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 Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	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		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$48,000.00_
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	⊠	\$ 48,000.00
		الأسكا	

5. Indicate below the amount of the adjusted gross proceeds 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.b above. Payments to Officers, Directors & Affiliates Payments To Others Salaries and fees			RING PRICE, NUMBER OF INVESTORS, EXPENSES AND		
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		total expenses furnished in response to	Part C - Question 4.a. This difference is the "adjusted gross		\$ 20,952,000.00
Salaries and fees Payments to Officer, Directors & Payments To Officer, Directors & Caffiliates Payments To Officer State S S S S Purchase of real estate S S S S S S Purchase, rental or leasing and installation of machinery and equipment. S S S S Construction or leasing of plant buildings and facilities S S S S 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) S S S Repayment of indebtedness S S S S Working capital S S S S S Column Totals S S S S S Total Payments Listed (column totals added) Total Payments Liste	5.	the purposes shown. If the amount for a left of the estimate. The total of the pay	any purpose is not known, furnish an estimate and check the box to yments listed must equal the adjusted gross proceeds to the issue	to the	
Purchase of real estate		•		Officers, Directors &	
Purchase, rental or leasing and installation of machinery and equipment		Salaries and fees		🗆 \$	S
Construction or leasing of plant buildings and facilities \$ \$ \$ \$ \$ \$ \$ \$ \$		Purchase of real estate		s	\$
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)		Purchase, rental or leasing and installa-	tion of machinery and equipment	🗆 \$	S
used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness		Construction or leasing of plant building	ngs and facilities	🗆 \$	S
Working capital S S		Acquisition of other businesses (includused in exchange for the assets or secu	ling the value of securities involved in this offering that may be rities of another issuer pursuant to a merger)	🗆 \$	s
Other (specify):		Repayment of indebtedness			S
Total Payments Listed (column totals added)		Working capital		🗆 \$	⋈ \$ <u>20,952,000.00</u>
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes a undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Vernier Networks, Inc. Date October 17, 2005 Title of Signer (Print or Type)		Other (specify):		🗆 s	□ \$
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes a undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Vernier Networks, Inc. Date October 17, 2005 Title of Signer (Print or Type)		Column Totals		🔲 \$	\$20,952,000.00
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes a undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Vernier Networks, Inc. Date October 17, 2005 Title of Signer (Print or Type)		Total Payments Listed (column to	otals added)	🛚 🖾 \$_20,95	52,000.00
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes a undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Vernier Networks, Inc. Date October 17, 2005 Title of Signer (Print or Type)			D. FEDERAL SIGNATURE		
Vernier Networks, Inc. October 17, 2005 Name of Signer (Print or Type) Title of Signer (Print or Type)	unde	ertaking by the issuer to furnish the U.S. So	ned by the undersigned duly authorized person. If this notice is filed ecurities and Exchange Commission, upon written request of its sta	l under Rule 505, the following	g signature constitutes an
Name of Signer (Print or Type) Title of Signer (Print or Type)	Issu	er (Print or Type)	1 ~		
				October 17, 2005	
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ATTENTION			A TTENTION		