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						
		l						
DATE RECEIVED								

Name of Offering (\Box check if this is an amendment and name has changed, and in USADATA, INC.	dicate change.)
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506	☐ Section 4(6) ☐ LOE NOV 2 2 2005
Type of Filing: ☐ Amendment	MOA Z B 2
A. BASIC IDENTIFICATION DATA	185
Enter the information requested about the issuer	
Name of Issuer (☐ check if this is an amendment and name has changed, and indic USADATA, INC.	cate change.)
Address of Executive Offices(Number and Street, City, State, Zip Code) 292 Madison Avenue, 3 rd Floor, New York, New York 10017	Telephone Number (Including Area Code) (212) 679-1411
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 Resells business and consumer information from lists for direct mailing campaigns	various sources for use in creating mailing
Type of Business Organization	PROCESS
 ☑ corporation ☐ limited partnership, already formed ☐ business trust ☐ limited partnership, to be formed 	ease specify):
Month Year	
Actual or Estimated Date of Incorporation or Organization: [11] [92 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service ab	
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 Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received a 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 copy or bear typed or printed signatures.	ed. Any copies not manually signed must be photocopies of the
Information Required: A new filing must contain all information requested. Amendments need only report the na requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part	me of the issuer and offering, any changes thereto, the information tE 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 se adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in experience the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall a states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be constituted.	ach state where sales are to be, or have been made. If a state accompany this form. This notice shall be filed in the appropriate
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely a loss of an available state exemption unless such exemption is predicated on the filing of a federal no	

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 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 ☐ Manager/Managing Partner
Full Name (Last name first, if individual) Epstein, Walter
Business or Residence Address (Number and Street, City, State, Zip Code) c/o USADATA, Inc., 292 Madison Avenue, 3 rd Floor, New York, New York 10017
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual) Gaskill, Dathan
Business or Residence Address (Number and Street, Citv. State, Zip Code) c/o USADATA, Inc., 292 Madison Avenue, 3 rd Floor, New York, New York 10017
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual) Halligan, John
Business or Residence Address (Number and Street, City, State, Zip Code) c/o USADATA, Inc., 292 Madison Avenue, 3 rd Floor, New York, New York 10017
Check Box(es) that Apply; ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ Manager Managing/Partner
Full Name (Last name first, if individual) Hulber, Loren
Business or Residence Address (Number and Street, City, State, Zip Code) c/o USADATA, Inc., 292 Madison Avenue, 3 rd Floor, New York, New York 10017
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ Manager Managing/Partner
Full Name (Last name first, if individual) Koutoupes, Nikitas
Business or Residence Address (Number and Street, City, State, Zip Code) c/o USADATA, Inc., 292 Madison Avenue, 3 rd Floor, New York, New York 10017
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ Manager Managing/Partner
Full Name (Last name first, if individual) Murphy, Eric J.
Business or Residence Address (Number and Street, City, State, Zip Code) c/o USADATA, Inc., 292 Madison Avenue, 3 rd Floor, New York, New York 10017
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual) Pess, Daniel
Business or Residence Address (Number and Street, City, State, Zip Code) c/o USADATA, Inc., 292 Madison Avenue, 3 rd Floor, New York, New York 10017
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual) Petillo, Douglas
Business or Residence Address (Number and Street, City, State, Zip Code) c/o USADATA, Inc., 292 Madison Avenue, 3 rd Floor, New York, New York 10017
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual) Edison Fund V, LP
Business or Residence Address (Number and Street, City, State, Zip Code) 1009 Lenox Drive, #4, Lawrenceville, New Jersey 08648
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual) SI Venture Fund II, L.P.
Business or Residence Address (Number and Street, Citv. State, Zip Code) c/o SI Ventures. 12600 Gateway Blvd., Fort Myers, FL 33913

Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual) Mu-Centive LLC
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mesco Ltd., 470 Main Street, Suite 315, Ridgefield, CT 06877
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner
Full Name (Last name first, if individual) Insight Capital Partners III, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code) 527 Madison Avenue, 10 th Floor, New York, NY 10022
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply; ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ Manager/Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner
Full Name (Last name first, if individual)
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Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner
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Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner
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Full Name (Last name first, if individual)
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Full Name (Last name first, if individual) Business or Residence Address (Number and Street, Citv. State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, Citv. State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner Full Name (Last name first, if individual)
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, Citv. State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, Citv. State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, Citv. State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager/Managing Partner Full Name (Last name first, if individual)
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer □ Director □ Manager/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer □ Director □ Manager/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. INFO	PRMATIC	N ABOU	T OFFE	RING						
1.	Has the	e issuer s	old, or do	oes the is	suer inte	nd to sell	, to non-a	accredited	d investor	s in this	offering?			Yes	No ⊠
				Answer	also in A	ppendix,	Column	2, if filing	under UL	LOE.					
2.	What is	the mini	mum inv	estment t	hat will b	e accepte	ed from a	ny individ	lual (but l	lesser am	nounts m	ay be acc	epted)	\$N	/A
3.	Does th	ne offering	g permit j	joint own	ership of	a single	unit?		••••••	• • • • • • • • • • • • • • • • • • • •				Yes	No ⊠
4.	commis If a per state or	ssion or si son to be	milar ren listed is st the na	nuneratio an assoc me of the	n for solid iated per broker o	citation of rson or aq r dealer.	purchase gent of a If more th	ers in con broker or an five (5	nection w dealer re) persons	vith sales egistered s to be list	of securit	or indire ties in the SEC and/ ssociated	offering. or with a		
Ful N/A		Last nam	e first, if	individua	1)										
Bus	siness or	Residen	ce Addre	ess (Num	ber and S	Street, Cit	ty, State,	Zip Code)						
Nai	me of As	sociated	Broker o	r Dealer											
Sta	tes in W	hich Pers	on Liste	d Has So	licited or	Intends t	o Solicit I	Purchase	rs						
	(Check	"All State	es" or ch	eck indivi	dual Stat	es)	•••••		• • • • • • • • • • • • • • • • • • • •	••••••	•••••	A	II States		
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Ful	l Name (Last nam	e first, if	individua	1)										
Bu	siness o	Residen	ce Addre	ess (Num	ber and S	Street, Ci	ty, State,	Zip Code	·)				_		
Na	me of As	sociated	Broker o	r Dealer											
Sta	ites in W	hich Pers	on Liste	d Has So	licited or	Intends t	o Solicit I	urchase	rs						
	(Check	"All State	es" or ch	eck indivi	dual Stat	tes)			••••••	•••••	•••••	A	II States		
<u>.</u>	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Ful	I Name	Last nam	e first, if	individua	l) 										
Bu	siness o	r Residen	ce Addre	ess (Num	ber and S	Street, Ci	ty, State,	Zip Code	•)						
Na	me of As	sociated	Broker o	r Dealer	-										
Sta	ites in W	hich Pers	son Liste	d Has So	licited or	Intends t	o Solicit	Purchase	rs		-			<u> </u>	
	(Check	: "All State	es" or ch	eck indivi	dual Sta	tes)			••••••			₽	dl States		
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) [MO] [PA] [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 🛘 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt ☐ Common Preferred 0 Convertible Securities (including warrants)..... 300,000 \$__300,000___ Membership Interests 0 Other: 0__ Total..... Answer also in Appendix, Column 3, if filing Under ULOE _300,000 300,000 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." Aggregate Number **Dollar Amount** Investors Of Purchases \$_300,000_ Accredited Investors 6 Non-accredited Investors..... 0 \$ 0 Total (for filings Under Rule 504 only) 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 Type of **Dollar Amount** Security Sold Type of Offering Rule 505.... Regulation A..... Rule 504.... Total 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 expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$__0_ Printing and Engraving Costs \$ 0 Legal Fees..... \times \$ 30,000 Accounting Fees..... \$__0_ Blue sky fees \times \$ 150

 \mathbf{X}

X

 \times

\$<u>0</u>

\$_150_

\$ 30,300

\$<u>269,700</u>

Sales Commissions (Specify finder's fees separately).....

Other Expenses (identify): Postage

This difference is the "adjusted gross proceeds to the issuer."

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 4.1.

C. OFFERING PRICE, NUMBER OF INVES	STORS, EXPENSES AND USE O	OF PI	ROCEEDS		
5. Indicate below the amount of the adjusted used or proposed to be used for each of the purious any purpose is not known, furnish and estimate the estimate. The total of the payments listed proceeds to the issuer set forth in response to	rposes shown. If the amount for e and check the box to the left of d must equal the adjusted gross	Dir	Payments to Officers, rectors, & Affiliates		Payments To Others
Salaries, dividends Purchase of real estate Purchase, rental or leasing and installation of mac Construction or leasing of plant buildings and facil Acquisitions of other businesses (including the value offering that may be used in exchange for	hinery and equipment ities		\$ \$ \$ \$		\$ \$ \$
another issuer pursuant to a merger) Repayment of indebtedness			\$ \$ \$		\$ \$ \$ 269,700 \$
Column Totals Total Payments Listed (column totals added)		□ Œ	\$ 1	X	\$ 269,700
D. FEDERAL SIGNATURE The issuer has duly caused this notice to be seem the following signature constitutes an undertain written request of its staff, the information furnal Rule 502.	aking by the issuer to furnish to the	e U.S	S. Securities and ex	xcha	ange Commission, upon
Issuer (Print or Type) USADATA, INC.	Signature		Date Novem	ber	14, 2005
Name of Signer (Print or Type)	Title of Signer (Print or T)	/pe)			
Eric J. Murphy	Chief Executive Officer				
Intentional misstatements or omis	ATTENTION sions of fact constitute federal c	rimir	nal violations. (Se	e 18	3 U.S.C. 1001.)

E. STATE SIGNATURE

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 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 understands 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)	Signature	Date
USADATA, INC.		November 2 2005
Name of Signer (Print or Type)	Title (Print or Type)	
Eric J. Murphy	Chief Executive Officer	

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.

TO ACCF INVES S'	2 D TO SELL D NON- REDITED STORS IN TATE Γ B-ITEM 1)	TYPE OF SECURITY AND AS IN AGGREGATE OFFERING PRICE OFFERED IN STATE COMMON STOCK	NUMBER OF ACCREDITED INVESTORS	TYPE OF INVI AMOUNT PURCH (PART C-	ASED IN STATE	AMOUNT	UNDER ST (IF YES, EXPLAN, WAIVER (IFICATION FATE ULOE ATTACH ATION OF GRANTED) E-ITEM 1)
AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY			ACCREDITED	AMOUNT	NON- ACCREDITED	AMOUNT	YES	NO
AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY				AMOUNT	INVESTORS	AWOUNT	123	NO
AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY	X	X Notes & Warrants						
AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY	X	X Notes & Warrants						
AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY	X	X Notes & Warrants						•
CA CO CT DE DC FL GA HI ID IL IN IA KS KY	X	X Notes & Warrants						
CO CT DE DC FL GA HI ID IL IN IA KS KY	X	X Notes & Warrants			I f			
CT DE DC FL GA HI ID IL IN IA KS KY	Х	X Notes & Warrants		-				
DE DC FL GA HI ID IL IN IA KS KY	X	X Notes & Warrants	-					
DC FL GA HI ID IL IN IA KS KY			1	\$72,336	0			×
FL GA HI ID IL IN IA KS KY	i							
GA HI ID IL IN IA KS KY	<u> </u>							
HI ID IL IN IA KS KY	×	X Notes & Warrants	1	\$96,358	0			×
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APPENDIX											
7, 1	2 3 INTEND TO SELL TO NON- TYPE OF ACCREDITED SECURITY AND INVESTORS IN AGGREGATE STATE OFFERING PRICE (PART B-ITEM 1) OFFERED IN STATE			4	5 DISQUALIFICATION UNDER STATE ULOE (IF YES, ATTACH EXPLANATION OF WAIVER GRANTED) (PART E-ITEM 1)						
STATE	YES	NO	COMMON STOCK	NUMBER OF ACCREDITED INVESTORS	AMOUNT	NUMBER OF NON- ACCREDITED INVESTORS	AMOUNT	YES	NO		
МО											
MT											
NE											
NV					' .			L			
NH	<u> </u>			u.							
NJ	ļ										
NM	<u> </u>							, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
NY		x	Notes & Warrants	4	\$131,306	0			×		
NC											
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	INTENE	TO SELL			DISQUALIFICATION							
	TO NON-		TYPE OF					UNDER STATE ULOE				
}	ACCF	EDITED	SECURITY AND			(IF YES, ATTACH						
	INVES	TORS IN	AGGREGATE		TYPE OF INVESTOR AND							
	รา	TATE	OFFERING PRICE		WAIVER GRANTED)							
	(PART	B-ITEM 1)	OFFERED IN		(PART E-ITEM 1)							
:			STATE		(PART C-ITEM 2)							
		-		NUMBER OF		NUMBER OF						
				ACCREDITED		NON-			1			
1		!		INVESTORS		ACCREDITED						
STATE	YES	NO	COMMON STOCK		AMOUNT	INVESTORS	AMOUNT	YES	NO			
FOREIGN					Ti.							