# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# FORM D

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



## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix Se					
	DATE RECEIVED				

Name of Offering ( check if this is an amendment and name has changed, and indicate change NetSpend Holdings, Inc. private offering of Class A Common Stock	c.)
Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506  Type of Filing:  New Filing Amendment	Section 4(6) LILOE
A. BASIC IDENTIFICATION DATA	u Cena B
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) NetSpend Holdings, Inc.	200>
Address of Executive Offices (Number and Street, City, State, Zip Code) 701 Brazos Street, Suite 1200, Austin, TX 78701-2582	Telephone Number (Including Area Code) 512.532.8200
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 provision of prepaid, reloadable debit cards	PROCESSED
Type of Business Organization    Corporation   limited partnership, already formed   other (please   limited partnership, to be formed	specify) 3 AUS 0 6 2007
Actual or Estimated Date of Incorporation or Organization:    Month   Year	

### 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 loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	· Calling A	A. BASIC IDENT	IFICATION DATA		1.21. 1		
. Enter the information requested	l for the followir	ng:					
• 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;		- 1	-				
<ul> <li>Each executive officer and</li> </ul>	d director of cor	porate issuers and of	corporate general and ma	naging partners of	f partnership issuers; and		
<ul> <li>Each general and managing</li> </ul>	ng partner of par	tnership issuers.					
Check Box(es) that Apply: P	romoter	Beneficial Owner	Executive Officer	□ Director	Genera! and/or Managing Partner		
Full Name (Last name first, if indi- Savard, Richard J.	vidual)		1 2 2 2 2 2				
Business or Residence Address (N 701 Brazos Street, Suite 1200, Aus			ode)				
Check Box(es) that Apply: P		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if indi- le Lavis, John	vidual)						
Business or Residence Address (N	umber and Stree	t, City, State, Zip Co	ode)				
701 Brazos Street, Suite 1200, Aus							
Check Box(es) that Apply: P	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if indi- Fussell, Steven	vidual)						
Business or Residence Address (N			ode)				
701 Brazos Street, Suite 1200, Aus			57 r .: o∞				
Check Box(es) that Apply: P		Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, if indi- Chibib, Adam	vidual)						
Business or Residence Address (N			ode)				
701 Brazos Street, Suite 1200, Aus			<u> </u>		-		
	romoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, if indi- Reesing, Steve W.	vidual) —						
Business or Residence Address (N 701 Brazos Street, Suite 1200, Aus			ode)				
Check Box(es) that Apply: P		Beneficial Owner	Executive Officer	Director	[ ] General and/or		
			Z Zacourio omicor		Managing Partner		
Full Name (Last name first, if indig Brown, Christopher T.	viáuzl)						
Business or Residence Address (N	umber and Stree	t, City, State, Zip Co	ode)				
01 Brazos Street, Suite 1200, Aus							
Check Box(es) that Apply: P	romoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if indi- Lockhart, H. Eugene	vidual)						
Business or Residence Address (N '01 Brazos Street, Suite 1200, Aus			ode)				
Check Box(es) that Apply: P		Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner		
Full Name (Last name first, if individed the control of the contro	viduai)						
Business or Residence Address (No. 201 Brazos Street, Suite 1200, Aus			ode)				
<del></del>			tional conies of this sheet	as necessary )	<u></u>		

	A. BASIC IDEN	TIFICATION 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;						
<ul> <li>Each beneficial owner having the securities of the issuer;</li> </ul>	power to vote or dispose, o	r direct the vote or disposi	tion of, 10% or m	ore of a class of equity				
Each executive officer and directo	r of corporate issuers and o	of corporate general and m	anaging partners of	of partnership issuers; and				
Each general and managing partner of partnership issuers.								
Check Box(es) that Apply:	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Sosa, Rogelio								
Business or Residence Address (Number at 701 Brazos Street, Suite 1200, Austin, TX		Code)						
Check Box(es) that Apply:  Promoter	⊠ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Lamont, Ann H.		-						
Business or Residence Address (Number ar 701 Brazos Street, Suite 1200, Austin, TX		Code)	i 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Schley, Daniel M.								
Business or Residence Address (Number at 701 Brazos Street, Suite 1200, Austin, TX		Code)						
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Henry, Daniel R.								
Business or Residence Address (Number at 701 Brazos Street, Suite 1200, Austin, TX		Code)						
Check Box(es) that Apply: Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Oak Investment Partners X, Limited Par	rtnership							
Business or Residence Address (Number and One Gorham Island, Westport, Connecticut		Code)						
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 Address (Number an	nd Street, City, State, Zip C	Code)	7					
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 Address (Number an	nd Street, City, State, Zip C	Code)						
Check Box(es) that Apply:  Promoter	☐ Beneficia! Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)								
Business or Residence Address (Number an	nd Street, City, State, Zip C	Code)						

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1.	Has the iss	suer sold.	or does t	the issuer	intend to	sell. to i	non-accre	dited inv	estors in	this offer	ing?			Yes	No ⊠
		,					ppendix,				_				_
2.	2. What is the minimum investment that will be accepted from any individual?							\$							
3.	3. Does the offering permit joint ownership of a single unit?							Yes ⊠	No □						
۶. 4.			_		-	_									ш
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state								g.							
													ns of such		
	broker or		<u>-</u>		e informa	tion for	that broke	er or deal	er only.	N/ <i>A</i>					
Ful	l Name (La	st namie f	irst, if inc	lividual)											
Bus	siness or Re	sidence A	Address (	Number a	and Stree	t, City, S	tate, Zip	Code)		··········					<u> </u>
Na	me of Asso	ciated Br	oker or D	ealer								-		<u> </u>	
Sta	tes in Whic	h Person	Listed Ha	as Solicite	ed or Inte	ends to So	olicit Pur	chasers	<del></del>						
	(Check "A	Il States'	or check	individu	al States	)				• • • • • • • • • • • • • • • • • • • •			••••••	C	All States
	AL	AK	ΑŻ	AR	CA	CO	CT	DE	ρd	FL	GA	HI	ID		
	II	IN	AI	KS	KY	LA	ME	MD	ΜA	MI	ММ	MS	МО		
	MT	NE	NV	NH	ПJ	NM	NY	NC		ᅋ	ОК	OR	PA		
	RI	sc	SD	TN	TX	UT	VT	VA	WY.	wv	WI	WY	PR		
rui	l Name (La	st name i	irst, if inc	iividuai)											
Bu	siness or Re	sidence A	Address (	Number a	ind Stree	t, City, S	tate, Zip	Code)						-	
Na	me of Asso	ciated Bro	oker or D	ealer			<del></del>								
Sta	tes in Whic	h Person	Listed H	as Solicite	ed or Inte	nds to So	olicit Pur	chasers			•				
	(Check "A	Il States'	or check	individu	al States)	)				•••••		•••••			A.1 States
	AL	AK	AZ	AR	CA	<u>co</u>	CT	DE	DC	FL	GA	HI	ΞĐ		
	IL	IN	İΑ	KS	K.	LA	ME	MD	MΑ	MI	MN	MS	MC		
	MT	NE	NV	MH	ĽИ	MM	NY	NC	ND	СН	ОК	OR ETT	PA		
	RI l Name (La	SC st name f	SD irst if ind	TN lividual	TX	UI	VI	VA	WA	WV	WI	WY	ΡĽ		
												•			
Bus	siness or Re	sidence A	Address (	Number a	and Stree	t, City, S	tate, Zip	Code)							
Nai	me of Assoc	ciated Bro	oker or D	ealer						-					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)							All States								
	AL	AK	AZ	AR	CA CA	CO		DE	рd	FL	F		ID	·····	. 111 044103
	<u> </u>	IN	ΙA	KS	KY	LA	CT ME	MD	MA	MI	GA MN	HI MS	MO		
	MT	NE	NV	NH	ĹИ	NM	NY	NG	ND	OH	OK	OR	PA		
	RI	sc	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR		
										<del></del>	<del></del>	<del></del>			

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C. OFFERING PRICE, NUMBER OF INVES	TORS, EXPENSES AND USE OF PROCEEDS
<ol> <li>Enter the aggregate offering price of securities included in this offer already sold. Enter "0" if answer is "none" or "zero." If the tr offering, check this box and indicate in the columns below the offered for exchange and already exchanged.</li> </ol>	ansaction is an exchange amounts of the securities
Type of Security	Aggregate · Amount Offering Price Already Sold
Debt	
Equity	\$ 162,000 \$ 162,000
	⊠ Preferred
<del></del>	
Convertible Securities (including warrants)	\$ <del>0</del> \$ <del>0</del>
Partnership Interests Other (Specify	\$ 0 \$ 0
Other (Specify) Total	
Total Answer also in Appendix, Co	the state of the s
<ol> <li>Enter the number of accredited and non-accredited investors who in this offering and the aggregate dollar amounts of their purcha Rule 504, indicate the number of persons who have purchased se dollar amount of their purchases on the total lines. Enter "0" if answ</li> </ol>	ses. For offerings under curities and the aggregate wer is "none" or "zero."
	Aggregate Number of Dollar Amount Investors of Purchases
Accredited Investors	1 \$ 162,000
Non-accredited Investors	\$
Total (for filings under Rule 504 only)	<u> </u>
Answer also in Appendix, Co	
<ol> <li>If this filing is for an offering under Rule 504 or 505, enter the inf securities sold by the issuer, to date, in offerings of the types ind months prior to the first sale of securities in this offering. Classify Part C - Question 1.</li> </ol>	icated, in the twelve (12)
Type of Offering	Type of Dollar Amount
	Security Sold
Rule 505	<u> </u>
Regulation A	<u> </u>
Rule 504	3
Total	\$
4. a. Furnish a statement of all expenses in connection with the issuar securities in this offering. Exclude amounts relating solely to orgissuer. The information may be given as subject to further conting an expenditure is not known, furnish an estimate and check the estimate.	anization expenses of the gencies. If the amount of
Transfer Agent's Fees	<b>□</b> \$
Printing and Engraving Costs	
Legal Fees	▼ \$ 5,000
Accounting Fees	
Engineering Fees	[ <u></u>
Sales Commissions (chasify finders! food congretaly)	<u> </u>
Other Expenses (identify) state filing fee and miscellaneous	
Total	\$ 5500

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C. OFFERING PRICE	CE, NUMBER OF INVESTORS, EXPE	NSES AND USE OF PROC	EEDS
	gregate offering price given in response to hed in response to Part C — Question ds to the issuer."		\$_156,500
used for each of the purposes shown. I estimate and check the box to the left of	ted gross proceeds to the issuer used or prof f the amount for any purpose is not known of the estimate. The total of the payments e issuer set forth in responses to Part C—	, furnish an listed must	
		Payments to Officers, Directors & Affiliates	Payments to Others
Salaries and fees		□ <b>s</b>	□ \$
Durchase of real estate		<b>□</b> •	
***************************************	ation of machinery and equipment		S
	ngs and facilities		_
Acquisition of other businesses (including involved in this offering that may be unassets or securities of another issuer programme in the contract of the con	ding the value of securities used in exchange for the		□ \$
Repayment of indebtedness			
Working capital		□ \$ 156,500	
Other (specify):	\$		
Column Totals			
Total Payments Listed (column totals .		197197(141	6,500
	D. FEDERAL SIGNATURI		
The issuer has duly caused this notice to be following signature constitutes an undertaking its staff, the information furnished by the	ng by the issuer to furnish to the U.S. Secu	rities and Exchange Commiss	sion, upon writter, request
ssuer (Print or Type)	Signature	Date	
NetSpend Holdings, Inc.		July <u>Z 4</u> , 2007	
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Christopher T. Brown	G≎neral Counsel		
Intentional minetary	ATTENTION	EN	- -
intentional misstatements (	or omissions of fact constitute federal c	mmai violadons. (588 18 U	7.3.Q. IQQ I.J