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 358350

OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	. April 30, 2008
Estimated avera	ige burden
hours per response.	16.00

SEC US	E ONLY
Prefix	Serial
DATE RI	CEIVED

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Name of Offering (check if this is an amendment and name has changed, and indicate of	change.)
SearchForce, Inc. – offering of Series C Preferred stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: ☐ New Filing ☐ Amendment	
DA GLO INFERIORICA TION DA	
A. BASIC IDENTIFICATION DA	````
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate of	change.) 07075811
SearchForce, Inc.	Tital and Number (Including Asso Code)
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3 Waters Park Drive, Suite 211, San Mateo, CA 94403	(650) 235-8800
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	
SearchForce, Inc. builds internet-based software platforms to across 'Pay per Click' or 'PPC' search engines.	facilitate the management of marketing
Type of Business Organization ⊠ corporation	ease specify): PROCESSED
7 (4132) of Estimated Asia of West Series of Asia S	Estimated SEP 1 2007
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbre CN for Canada; FN for other foreign juris	diction) DE FINANCIA
CENEDAL INSTRUCTIONS	- WAROLAT

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 Avenue, 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 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. É	BASIC IDENTIFICATION DATA		
Enter the information requested for the following:			
Each promoter of the issuer, if the issuer has been or			
 Each beneficial owner having the power to vote or dis 	spose, or direct the vote or disposition of	f, 10% or more of a cla	ass of equity securities of the issuer,
 Each executive officer and director of corporate issue 	ers and of corporate general and managi	ing partners of partner	rship issuers; and
 Each general and managing partner of partnership is 	suers.		
Check Box(es) that Apply:	ial Owner	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Berger, Charles			
	et, City, State, Zip Code)		
3 Waters Park Drive, Suite 211, San Ma	ateo. CA 94403		
Check Box(es) that Apply: ☐ Promoter ☐ Benefic		Director	General and/or Managing Partner
Full Name (Last name first, if individual) Dsouza, Dhiren			
Business or Residence Address (Number and Street	et, City, State, Zip Code)		
3 Waters Park Drive, Suite 211, San Ma	ateo, CA 94403		
Check Box(es) that Apply:	ial Owner 🖾 Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Patel, Samir		<u> </u>	
Business or Residence Address (Number and Street	et, City, State, Zip Code)		
3 Waters Park Drive, Suite 211, San Ma	ateo, CA 94403		<u></u>
Check Box(es) that Apply:	ial Owner	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Simon, David			
Business or Residence Address (Number and Stree 3 Waters Park Drive, Suite 211, San Ma	et, City, State, Zip Code)		
Check Box(es) that Apply:		☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Stevenson, Peter			
	et, City, State, Zip Code)		
3 Waters Park Drive, Suite 211, San Ma			
Check Box(es) that Apply:		Director	General and/or Managing Partner
Full Name (Last name first, if individual)		=_	
Business or Residence Address (Number and Street	et, City, State, Zip Code)		
Check Box(es) that Apply:	cial Owner	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address . (Number and Street	et, City, State, Zip Code)		

					l	B. INFO	RMATIO	N ABOU	r offer	ING					
	Mac th-	ionuncan	d ordoes	the iceus	intend to	call to no	-acceptite	vd invector	e in this of	fering?				Yes	No ⊠
1.	าสร เกอ	issuer sol	u, or doe s		r inteņa to Ilso in App	-				remy t		******************	• •		<u> </u>
2.	What is	the minim	um investi		will be acc	-		_	J					\$N/	Α
						•	•							Yes	No F⊠
3. 4.												irectly, any			⊠
	commis- If a pers or states	sion or sir son to be li s, list the r	nilar remu sted is an name of th	ineration f associate e broker d	or solicitat d person c	ion of pun or agent of f more tha	chasers in a broker o n five (5) ;	connection or dealer re persons to	on with sale gistered we be listed a	es of secu vith the SE	rities in t C and/or	ne offering. with a state ons of such			
Full	Name (L	ast name	first, if indi	vidual)											
Bus	iness or l	Residence	Address	(Number a	and Street,	City, State	e, Zip Code	3)		A					
Nar	ne of Ass	ociated Bi	oker or De	ealer											
Stat					d or Intend								🗆	All State	S
	AL	AK	AZ	AR	CA	CO	CT	DE	[DC]	FL	GA	HI	ĪD		
	[L]	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR		
Full	Name (L	ast name	first, if ind	ividual)											
Bus	iness or	Residence	Address	(Number a	and Street,	City, State	e, Zip Cod	8)		-					
Nar	ne of Ass	ociated B	oker or D	ealer											
Sta					d or Intend									A# 64-4-	_
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	AL	[AK]	[AZ]	AR	[CA]	CO	CT	DE	DC MA	FL.	[GA]	HI			
		IN N	IA INSZI	KS	KY NJ	LA	ME	MD	(MA)	MI	MN	[MS]	MO		
	MT RI	SC	NV SD	NH TN	LN]	NM) UT	NY VT	NC VA	ND WA	[OH]	(OK)	OR WY	PA PR		
Ful		ast name				<u> </u>	1211	[+/1]	נינט	[***]	L.**		12.23		
Bus	siness or	Residence	Address	(Number	and Street	, City, Stat	e, Zip Cod	e)			·				
Na	me of Ass	sociated B	roker or D	ealer		··· · · · · · · · · · · · · · · · · ·					· · ·				
Sta	tes in Wh	ich Perso	n Listed H	as Solicite	d or Intend	ds to Solici	t Purchase	ers							
	(Check	"All State:	s" or chec	k individua	l States)								🗖	All State	s
	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	NC	ND	ОН	OK	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	VA	WA	[WV]	WI.	WY	PR		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

_	APPROPRIATE BRICE	ATTIMETERS.	OF INDECTORS	DUDDNOCCO	AND HER OF BROOFFRE
۱	OFFERING PRICE	. NUMBER	OF INVESTURS.	LAPENSES	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	Aggregat Offering Pr		Amo	unt Already Sold
	Debt	\$N/A_		\$	N/A
	Equity	\$4,300,000		\$ <u>4.</u> :	300,000
	☐ Common ☑ Preferred	•			
	Convertible Securities (including warrants)	\$N/A_		\$	N/A
	Partnership Interests	\$ <u>N/A</u>		\$	N/A
	Other (Specify)	\$ N/A		\$	N/A
	Total	\$4,300,000		\$4.3	300,000
	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."				ggregate
		Number Investor			lar Amount Purchases
	Accredited Investors	1		\$ <u>4,</u> :	300,000
	Non-accredited Investors	0		\$	0
	Total (for filings under Rule 504 only)	N/A		\$	N/A
	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		Dol	lar Amount
	Type of Offering	Security			Sold
	Rule 505	N/A		\$	N/A
	Regulation A	N/A		\$	N/A
	Rule 504	N/A		\$	N/A
	Total	N/A		\$	N/A
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	.,,,,,,,,,,,,		\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		\boxtimes	\$ <u>75.</u> (200
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)	********		\$	0
	Total		\boxtimes	\$ <u>75.0</u>	000

	C. OFFERING I	· · · · · · · · · · · · · · · · · · ·	 			
	and total expenses furnished in respons	gregate offering price given in response to Part C — Question 1 se to Part C - Question 4.a. This difference is the "adjusted gross			\$ <u>4,2</u> 2	25,000
5.	each of the purposes shown. If the am-	ted gross proceeds to the issuer used or proposed to be used for ount for any purpose is not known, furnish an estimate and check he total of the payments listed must equal the adjusted gross onse to Part C — Question 4.b above.	Payı	ments to		
			Dire	fficers, ectors, & filiates		ments to
	Salaries and fees		. 🗆 \$	0	_ 🗆 \$	0 ′
	Purchase of real estate		□ \$	0	_ 🗆 \$	0
	Purchase, rental or leasing and in	stallation of machinery	П «	n	\$	0
	• •	uildings and facilities			□\$	
			. ⊔.ъ	<u></u>	_ U	
	offering that may be used in exch	ncluding the value of securities involved in this ange for the assets or securities of another	□ ¢	٥	_ □\$_	0
					_ ⊔ _ □\$	
	• •				_ U\$	
	* ·					
	Other (specify):		□ •—-	0	_ ⊠ \$ 4.2	23,000
			. 🗆 \$. 0	_ 🗆 \$	0
					_ ⊠ \$4.2	25,000
	Total Payments Listed (column to	otals added)		⊠ \$4.	425,000	
_		D. FEDERAL SIGNATURE				
ig	nature constitutes an undertaking by t	be signed by the undersigned duly authorized person. If this he issuer to furnish to the U.S. Securities and Exchange Corny non-accredited investor pursuant to paragraph (b)(2) of Rule 50	nmission,	iled under upon writte	Rule 505, ti en request	he followi of its sta
	uer (Print or Type) earchForce, Inc.	Signature	Dat Se		er <u>()5</u> °, 2(07
	me of Signer (Print or Type)	Title of Signer (Print or Type)				

ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations.



(See 18 U.S.C. 1001.)