FORM D

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. UNITED STATES
ECURITIES 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

'	4122	29
	OMB APPI	ROVAL
	OMP Number	2225 0076

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

SEC USE ONLY					
Prefix	Serial				
	1				
DATE R	ECEIVED				

• •	endment and name has changed, and indicate change.)	^
Offering of Senior Secured Notes, 5	Series A Preferred Stock, and Warrants for Share	es of Common Stock.
Filing Under (Check box(es) that apply): Type of Filing: New Filing A	☐ Rule 504 ☐ Rule 505 ☐ Rule mendment	506 Section 4(6)
Type of thing.		RECEIVED
	A. BASIC IDENTIFICATION DATA	(5)
1. Enter the information requested about the		
•—	ndment and name has changed, and indicate change.)	
PORT TOWNSEND PAPER COR		
PORT TOWNSEND PAPER HOL	DINGS CORPORATION ("HOLDINGS")	
PTPC PACKAGING, INC. ("PTPC	2")	209/\$
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) 360-385-3170
100 MILL ROAD PORT TOWNS	END WA 98368	
	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		
SAME AS ABOVE		SAME AS ABOVE
Brief Description of Business		(2)
The Issuers manufacture corrugated	I paper boxes.	PROCECOR
	• •	1.00E35E
Type of Business Organization		PROCESSE other (please specify): SEP 2 4 2007
	☐ limited partnership, already formed	other (please specify): 5EP 2 4 2007
business trust	limited partnership, to be formed	F. T
	Month Year	MONSON
Actual or Estimated Date of Incorporation of	or Organization: 11 01 19 83	Actual Estimated FINANCIAL
Jurisdiction of Incorporation or Organization	n: (Enter two-letter U.S. Postal Service abbreviation for	_
	CN for Canada; FN for other foreign jurisdiction)	WA (See FN1)
GENERAL INSTRUCTIONS		
F 1 1		
Federal:	ina afannisia in milana an an annasian undan Ba	nulation D on Continu 4(6), 17 CED 320 501 at one or
15 U.S.C. 77d(6).	ing of securities in reliance on an exemption under Reg	guilation D of Section 4(6), 17 CFR 230.301 et seq. of
• •		
	er than 15 days after the first sale of securities in the of	
	on the earlier of the date it is received by the SEC at t	
after the date on which it is due, on the date	it was mailed by United States registered or certified n	nail to that address.
Where To File: U.S. Securities and Exchange	ge Commission, 450 Fifth Street, N.W., Washington, D	D.C. 20549.
Copies Required: Five (5) copies of this not	ice 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 Paguinad: A new filing must a	ontain all information requested. Amendments need on	dy report the name of the iccurr and affering any
	n Part C, and any material changes from the information	

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

FN1: Holdings is a DE Corporation, incoporated: 08/27/2007; PTPC-incorporated 02/27/2001.

		A. BASIC IDENTI	FICATION 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	ndividual)								
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if	ndividual)								
Business or Residence Address	(Number and Stree	t, City, State, Zip 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 and Stree	t, City, State, Zip 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 and Street	t, City, State, Zip 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 and Street	t, City, State, Zip 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 and Stree	t, City, State, Zip 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 and Stree	t, City, State, Zip Code)							

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

				B.	INFORMA	TION ABO	OUT OFFE	RING				
1. Has	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								Yes 🔲	No		
2 Who	e ia eka min	.i						_			c	
2. What is the minimum investment that will be accepted from any individual?												
3. Does	3. Does the offering permit joint ownership of a single unit?								Yes	No		
com offer and/	mission or ring. If a p or with a st	similar ren erson to be tate or state	nuneration listed is and s, list the m	for solicita associated ame of the	tion of pur d person or broker or	chasers in agent of a dealer. If n	be paid or connection broker or on the formation formation	with sales lealer regis ve (5) pers	of securition tered with ons to be li	the SEC isted are		
Full Na	me (Last n	ame first, i	f individua	l)								
Busines	ss or Reside	ence Addre	ss (Numbe	r and Stree	t, City, Sta	te, Zip Co	de)				_	
Name o	of Associate	ed Broker o	or Dealer									
			d Has Solid					************			🗆 Al	l States
[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] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
			f individua								. ,	
Busines	ss or Reside	ence Addre	ss (Numbe	r and Stree	t, City, Sta	te, Zip Co	de)					
Name o	of Associate	ed Broker o	or Dealer							_		
			d Has Solic									1 States
												[ID]
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) (MD)	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [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 Na	me (Last n	ame first, i	f individua	1)								
Busines	s or Reside	ence Addre	ss (Numbe	r and Stree	t, City, Sta	te, Zip Co	de)	•	- "			-
Name o	f Associate	ed Broker o	or Dealer									
			d Has Solid								🔲 Al	l States
[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]	[[1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	(VA)	[WA]	[WV]	[WI]	[WY]	[PR]

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 the 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. Aggregate Amount Already Type of Security Offering Price Sold \$35,000,000 \$35,000,000 Debt Equity..... \$25,000,000 \$25,000,000 Common □ Preferred \$FN2 \$FN2 Convertible Securities (including warrants)..... Partnership Interests.... \$N/A \$N/A Other (Specify N/A)..... \$N/A SN/A Total \$60,000,000 \$60,000,000 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." Aggregate Number **Dollar Amount** of Purchases Investors \$60,000,000 Accredited Investors 0 \$N/A Non-accredited Investors 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 **Dollar Amount** Type of Offering Security Sold N/A \$N/A Rule 505..... Regulation A..... N/A \$N/A Rule 504..... N/A \$N/A N/A \$N/A 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.... \$N/A Printing and Engraving Costs \boxtimes \$N/A \$FN3 Legal Fees. \boxtimes \$N/A Accounting Fees \boxtimes \$N/A Engineering Fees. ☒ \$N/A Sales Commission (specify finders' fees separately)..... Other Expenses (identify) (backstop fee, funding fee, fees for new financing related items, \$3,866,130.00 Professional Fees, refund fees)

Total

\$3,866,130.00

FN2: Allocations of purchase price between the equity security and the warrants will be determined after the sale. FN3: Legal Fees included in "Professional Fees" under "Other Expenses."

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.a. This difference is the "adjusted gross proceeds to the issuer." 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. Payme Office Direct & Affit Salaries and fees SN/A Purchase of real estate SN/A Purchase, rental or leasing and installation of machinery and equipment SN/A Construction or leasing of plant buildings and facilities SN/A 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) SN/A	\$56,133,870.00
and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer." 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. Payme Office Direct & Affi Salaries and fees	
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. Payme Office Direct & Affi Salaries and fees	nts to
Offfice Direct & Affi Salaries and fees	nts to
Purchase of real estate	ctors To
Purchase, rental or leasing and installation of machinery and equipment	■ \$N/A
Construction or leasing of plant buildings and facilities	
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)	
offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	
	⊠ \$N/A
Repayment of indebtedness	\$50,425,750
Working capital SN/A	⊠ \$N/A
Other (specify): Finance transactions and fees required under and in connecton with the Plan of Reoganization, approved by Order issued by the U.S. Bankruptcy Court	\$5,708,120.
for the Western Dist. of Washington at Seattle, dated as of Aug. 14, 2007	
SN/A	
Column Totals 🗵 s	\$56,133,870
Total Payments Listed (column totals added)	\$56,133,870.00
D. FEDERAL SIGNATURE	
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Co request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragrap	ommission, upon written
Issuer (Print or Type) PORT TOWNSEND PAPER CORPORATION PORT TOWNSEND PAPER HOLDINGSCORPORATION, PTPC	MBER 11, 2007
Name of Signer (Print or Type) Title of Signer (Print or Type)	
JOHN P. BEGLEY PRESIDENT & CEO	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.	Intentional misstatements	or omissions o	of fact constitute	federal criminal	violations. (See 18 U.S.	C. 1001.)
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	E. STATE SIGNATURE	
	presently subject to any of the disqualification provis	
	See Appendix, Column 5, for state response.	
2. The undersigned issuer hereby undertakes Form D (17 CFR 239.500) at such times a	to furnish to any state administrator of any state in was required by state law.	hich this notice is filed, a notice on
The undersigned issuer hereby undertake issuer to offerees.	s to furnish to the state administrators, upon written	request, information furnished by the
Limited Offering Exemption (ULOE) of	issuer is familiar with the conditions that must be sati the state in which this notice is filed and understands t ishing that these conditions have been satisfied.	isfied to be entitled to the Uniform hat the issuer claiming the availability
The issuer has read this notification and knoundersigned duly authorized person.	ows the contents to be true and has duly caused this n	otice to be signed on its behalf by the
Issuer (Print or Type) PORT TOWNSEND PAPER CORPORATION PORT TOWNSEND PAPER HOLDINGSCORPORATION ("HOLDINGS") PTPC PACKAGING, INC. ("PTPC")	Signature	Date SEPTEMBR 11, 2007
Name (Print or Type) PORT TOWNSEND PAPER CORPORATION PORT TOWNSEND PAPER HOLDINGSCORPORATION ("HOLDINGS") PTPC PACKAGING, INC. ("PTPC")	Title (Print or Type) PRESIDENT & CEO	

ino	ıru	nt:	nn	٠
1713	11 U		v_{I}	٠

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	Intend to non-a investors	to sell ccredited s in State -Item 1)	3 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)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA					-					
СО								□		
СТ										
DE										
DC										
FL										
GA										
ні										
ID		O.					·			
IL										
IN				l	\$696,000.00					
lA										
KS										
KY										
LA										
ME				:						
MD										
МА										
МІ										
MN										
MS										
МО									D.	
МТ										
NE										

APPENDIX

1	2		3	4				5	
			Type of security					Disqualification under State ULOE	
	Intend to sell		and aggregate	T C. in				(if yes,	attach
	to non-accredited investors in State		offering price offered in state	Type of investor and amount purchased in State				explanation of waiver granted)	
	(Part B-Item 1)		(Part C-Item 1)	(Part C-Item 2)			(Part E-Item 1)		
				Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
NV									
NH									
ŊJ									
NM			•••						
NY				8	\$53,188,800.00				
NC									
ND									
ОН									
ок									
OR								□	
PA				11	\$6,115,200.00				
RI									
SC			-						
SD			-				<u>.</u>		
TN									
TX									
UT									
VT									
VA									
WA									
wv									
WI		0							
WY		0							
PR									

